DLN: 93493113008078 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2016 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public Department of the Treasur ▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u> Internal Revenue Service Inspection A For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017 C Name of organization DICKINSON COLLEGE D Employer identification number B Check if applicable ☐ Address change 23-1365954 ☐ Name change Doing business as ☐ Initial return Final Deturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return PO BOX 1773 (717) 245-1943 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code CARLISLE, PA 170132896 G Gross receipts \$ 236,174,141 Name and address of principal officer H(a) Is this a group return for MARGEE M ENSIGN □Yes **☑**No subordinates? PO BOX 1773 H(b) Are all subordinates CARLISLE, PA 170132896 ☐ Yes ☐No ıncluded? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW DICKINSON EDU L Year of formation 1783 M State of legal domicile PA K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary Part I 1 Briefly describe the organization's mission or most significant activities DICKINSON COLLEGE, FOUNDED IN 1773, IS A HIGHLY SELECTIVE, PRIVATE RESIDENTIAL (CONTINUED)LIBERAL-ARTS COLLEGE KNOWN FOR ITS INNOVATIVE CURRICULUM ITS MISSION IS TO OFFER STUDENTS A USEFUL EDUCATION IN THE ARTS AND SCIENCES THAT WILL PREPARE THEM FOR LIVES AS ENGAGED CITIZENS AND LEADERS DICKINSON HAS DEVELOPED AN EFFECTIVE EDUCATIONAL PROGRAM BUILT UPON CORE SKILLS INTEGRAL TO THE LIBERAL ARTS PLUS AREAS OF SPECIAL EMPHASIS SUCH AS GLOBAL PERSPECTIVE, Activities & Governance CONNECTIVITY (INTERDISCIPLINARITY), SUSTAINABILITY, ACTIVE LEARNING AND DIVERSITY PLEASE REFER TO PART III, LINE $\overset{\circ}{4}$ FOR A DETAILED DESCRIPTION OF THE COLLEGE'S PROGRAM SERVICE ACCOMPLISHMENTS Check this box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 30 Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b) 4 29 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 2,934 Total number of volunteers (estimate if necessary) . . . 6 2,354 7a -354,187 7a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 -581,695 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 7,420,512 11.449.581 Ravenue 151,753,450 156,028,939 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 21,617,690 22,005,017 2,177,455 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,519,339 191,660,992 184,310,991 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 45,367,361 49,717,111 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 75,281,804 77,318,998 16a Professional fundraising fees (Part IX, column (A), line 11e) . 19,279 25,000 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶5,583,864 54,675,371 55,124,142 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 175,343,815 182,185,251 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) **19** Revenue less expenses Subtract line 18 from line 12 . 8,967,176 9,475,741 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . . 635,090,371 692,335,621 21 Total liabilities (Part X, line 26) 142,663,221 161,704,647 492,427,150 22 Net assets or fund balances Subtract line 21 from line 20 . 530.630.974 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 2018-04-23 Signature of officer Sign Here BRONTE D BURLEIGH-JONES VP FINANCE AND ADMINISTRATION Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check \Box if P01498698 Paid self-employed Firm's name ► KPMG LLP Firm's EIN ► 13-5565207 Preparer Firm's address ► 1676 INTERNATIONAL DRIVE Phone no (703) 286-8000 Use Only MCLEAN, VA 22102 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2016) Cat No 11282Y

Form	990 (2	016)					Page 2
Par	t III	Statement of	Program Servic	e Accomplis	hments		
		Check if Schedule	O contains a respo	onse or note to a	any line in this Part III		🗹
1	Briefly	describe the orgai	nızatıon's mıssıon				
		YOUNG PEOPLE, B SHIP IN THE SERV		EFUL EDUCATIO	N IN THE LIBERAL ART	S AND SCIENCES, FOR ENGAGE	D LIVES OF CITIZENSHIP
2	Dıd th	e organization und	ertake any significa	ant program serv	vices during the year w	hich were not listed on	
	the pr	ıor Form 990 or 99	0-EZ?				🗌 Yes 🗹 No
		•	new services on Sch				
3	service	es?	•		changes in how it condi	ucts, any program	☐ Yes ☑ No
4	Sectio	n 501(c)(3) and 50	n's program service 01(c)(4) organization of any, for each pro	ons are required	to report the amount of	largest program services, as me of grants and allocations to other	easured by expenses rs, the total
4a	(Code See Ad	ditional Data) (Expenses \$	132,548,148	including grants of \$	49,717,111) (Revenue \$	123,238,473)
4b	(Code See Ad	ditional Data) (Expenses \$	28,048,707	including grants of \$) (Revenue \$	35,432,713)
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4d		program services i	(Describe in Schedi	ule O) uding grants of	\$) (Revenue \$)
	<u> </u>	program service		160,596,8	•	, (t	<u>'</u>
	. 5	g	P 30 r				Form 990 (2016)

Yes

1

2

3

4

5

6

7

R

9

10

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

Page 3

No

No

No

Nο

No

No

Nο

Nο

No

No

Nο

Form **990** (2016)

Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞 . . .

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 💆

Section 501(c)(3) organizations.

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

assessments, or similar amounts as defined in Revenue Procedure 98-19? Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?

Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

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 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 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 ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 🥞 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 🛸

12a Did the organization obtain separate, independent audited financial statements for the tax year? b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

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

business, investment, and program service activities outside the United States, or aggregate foreign investments

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

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

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,"

Form	990 (2016)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
			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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

Yes

Yes

Form **990** (2016)

Nο

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

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

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

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🥦

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 197 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)?

instructions for applicable filing thresholds, conditions, and exceptions)

29

30

31

33

36

37

	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
rai	Check if Schedule O contains a response or note to any line in this Part V			✓
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3,052			
	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	Yes	
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			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
32	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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 ►GM , IT , SP , UK , FR , CM 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
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	,		N
а	provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
c	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
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
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?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter			
11 a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

01111	1990 (2010)			rage
Par	TO VI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	"No" respo	nse to l	ines
				~
60	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	
36	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 label 1a	30	165	No
	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	29		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth officer, director, trustee, or key employee?	ner 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervol of officers, directors or trustees, or key employees to a management company or other person? .	'Islon 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 members of the governing body?	nore 7a		No
b		r 7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following	· by		
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 Rev	enue 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, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	es, 10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form?	the 11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts?	to 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	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	nt		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	. 16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemple.			
	status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	AK , CO , MA , MD , MI , NH , PA , WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s of available for public inspection. Indicate how you made these available.			
	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 interes	t		
	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 BRONTE D BURLEIGH-JONES VP FINANCE AND ADMINISTRATION 230 WEST LOUTHER STREET CARLISLE, PA 1		717) 24!	5-1943

Form 990 (2	016)										Page 7
Part VII	Compensation of Officers and Independent Contra		Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	:hıs I	Part VI	Ι.			🗆
Section	A. Officers, Directors, Tru										
year .	this table for all persons require		·						,		-
	of the organization's current off ition Enter -0- in columns (D), (als o	or organizations), re	gardless of amount	:
List all c	of the organization's current key	employees, if a	any See	≘ ınst	ructi	ions	for de	fınıtı	ion of "key employe	e "	
who received	organization's five current highed reportable compensation (Box and any related organizations)
	of the organization's former office e compensation from the organiz						pensat	ed e	mployees who rece	ived more than \$10	00,000
	of the organization's former dire , more than \$10,000 of reportab										e
	in the following order individual demployees, and former such p		ectors, i	ınstıtı	utior	nal tı	rustees	s, of	ficers, key employe	es, highest	
☐ Check ti	his box if neither the organizatio	n nor any relate	d organ	iizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

	for related							2/1099-MISC)	(14/ 3/1000	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
					_					Form 990 (2016)

compensation from the organization ▶ 23

1333 16TH STREET NW WASHINGTON, DC 20036

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Page 8

Section A. Officers, Direct	Tors, Trustees	3, 10, y	Lilip.			<u>, and</u> ,	<u>g</u> .	nest compensate	a Linployees (e	Official	ucu,		
(A) Name and Title	(B) Average hours per week (list any hours	than o	one bo	oox, u an of	ot che unles fficer	neck mo ess pers er and a stee)	rson	(D) Reportable compensation from the organization (W-		/- '	(F) Estimated amount of other compensation from the organization and		
	for related organizations below dotted line)		Institutional	Officer	Key employee	Highest compensatemployee	Former	- 2/1099-MISC)	2/1099-MISC)		rganızatı relate organıza	ed	
		นธโฮษ	l Trustee		,ee	npensated							
See Additional Data Table				\perp			\perp			#			
			\vdash	\vdash	\vdash	_	+			+			
				+		<u> </u>	+			士			
			$oxed{\Box}$	ota	$oxed{\Box}$	lacksquare	ot			\bot			
		_	\vdash	\vdash	+	_	+			+			
1b Sub-Total			Щ	\perp	L	<u> </u> ▶	L			丄			
c Total from continuation sheets to Pa	art VII, Sectio	on A.				•	<u> </u>						
d Total (add lines 1b and 1c)	g but not limited	d to thos				► /e) who	o rec	3,849,414 ceived more than \$10	0			552,606	
of reportable compensation from the	organization 🕨	85 ———									Yes	No	
3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>									employee on	3	Yes		
For any individual listed on line 1a, is organization and related organization individual									1 the	4	Yes		
5 Did any person listed on line 1a receiv services rendered to the organization									vidual for	5		No	
Section B. Independent Contract					_								
Complete this table for your five higher from the organization. Report comper										pensa	ition 		
Name a	(A) and business addre	ess			_			Desc	(B) cription of services		(C) Compen		
DANISH INSTITUTE FOR STUDY ABROAD									OAD PROGRAMS			954,255	
2233 UNIVERSITY AVE W STE 201 ST PAUL, MN 55114										\perp			
CENTURION CONSTRUCTION GROUP LLC			_	_	_	_	_	CONSTRUCT	TION	_		517,019	
516 INDUSTRIAL DRIVE LEWISBERRY, PA 173399534 MCNEES WALLACE & NURICK								LEGAL SEP	7050	\perp		246 902	
100 PINE STREET								LEGAL SERV	ICES			346,892	
HARRISBURG, PA 17101 BREWER FLOORING INC								CONSTRUCT	FION	+		338,971	
7540 ALLENTOWN BLVD SUITE 4 HARRISBURG, PA 171124238													
WASHINGTON CENTER FOR INTERNSHIPS		-						STUDY ABR	OAD PROGRAMS			259,508	

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

Part		II Statement of	Revenue									rage 3
I WIL				a respo	onse or note to any	line in th	us Part VIII				_	\square
		Check if Schedul	ic o comains	и гозро	singe of flotte to diff	(<i>f</i> Total re	4)	(Rela exe fun	B) ted or empt ction	(C) Unrelated business revenue	t	(D) Revenue excluded from ax under sections 512-514
	1:	a Federated campaig	ns	1a	123,037		I	164	enue			312-314
nts Ints		b Membership dues		1b	<u> </u>							
ira nou		c Fundraising events		1c	<u> </u> 							
s. (An		d Related organizatio		1d	<u> </u>							
Gift Ilar		e Government grants (co		1e	1,078,415							
ī, Ē		f All other contributions		l re	I 1,070,413							
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts n		1f	10,248,129							
ber the		g Noncash contribution	ons included									
들		in lines 1a-1f \$		340	<u>,185</u>							
Cont and	ŀ	n Total.Add lines 1a-1	1f		•	11,	449,581					
<u>ə</u>					Business	Code						
พะ	2a	TUITION AND FEES				900099	119,1	52,560	119,152	,560		
æ	b	ROOM AND BOARD				721310		60,125	27,960			
AC e		OTHER AUXILIARY SERV	VIC			721000		13,532	7,321		151,54	9 40,944
Ser		OTHER STUDENT FEES	.F.C.T.			900099 523000		08,570 94, 1 52	1,308	,152		
E	٠	PROGRAM-RELATED INV	VEST			323000		54,132	J+	,132		
Program Service Revenue	f	All other program se	rvice revenue	!	156.0	28,939						1
\$	g	Total.Add lines 2a-2	f	•	>	20,555						
		Investment income (i			interest, and other]	1,477,453	3				1,477,453
		similar amounts) . Income from investm			ond proceeds ►		30,857				-	30,857
				•								
			(ı) Rea		(II) Personal							
	6a	Gross rents										
		Less rental expenses				-						
	_	·										
	(Rental income or (loss)										
		Net rental income o	r (loss)			1						
			(ı) Securi	ties	(II) Other							
	7 <i>a</i>	Gross amount from sales of assets other than inventory	64,957,664 5:			2						
	ł	Less cost or other basis and sales expenses	44,4	16,062	97,087	,						
	(Gain or (loss)	20,5	541,602	-44,895	5						
	•	d Net gain or (loss) .				<u> </u>	20,496,707	,				20,496,707
Other Revenue	8 <i>a</i>	Gross income from f (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of								
ď		Less direct expense		Ь		_						
hei		Net income or (loss) Gross income from g			ents •	1						
ō	-	See Part IV, line 19		163								
				а								
		Less direct expense		Ь								
		Ret income or (loss) Gross sales of inventoreturns and allowand	tory, less	activit	nes							
		Less cost of goods s		a b		-						
	•	Net income or (loss) Miscellaneous		invent	tory <u>></u> Business Code							
	11	La OTHER REVENUES	Revenue		900099	-	2,177,455	5	2,683,191	-50!	5,736	
	(_								
	•	d All other revenue .										
	•	e Total. Add lines 11a	-11d				2,177,455	5			T	
	12	2 Total revenue. See	Instructions				191,660,992		158,519,637	-3E	1,187	22 045 061
							171,000,332	-1	100,010,007	-33.	.,10/	22,045,961 Form 990 (2016)

For	m 990 (2016)				Page 10
	Irt IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other orga	anızatıons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any	/ line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	113,800	113,800		
2	Grants and other assistance to domestic individuals See Part IV, line 22	45,262,881	45,262,881		_
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	4,340,430	4,340,430		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,515,209		2,205,581	309,628
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	55,952,936	48,185,214	5,190,660	2,577,062
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,794,641	3,208,508	393,378	192,755
9	Other employee benefits	10,986,796	9,150,512	1,228,269	608,015
10	Payroll taxes	4,069,416	3,426,917	443,177	199,322
11	Fees for services (non-employees)				
;	a Management				
ı	b Legal	438,808		438,808	
,	c Accounting	173,925		173,925	
	d Lobbying				
	e Professional fundraising services See Part IV, line 17	25,000			25,000
1	f Investment management fees	2,078,625		2,078,625	
,	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,395,392	1,661,292	371,543	362,557
12	Advertising and promotion	39,099	30,924	8,175	
13	Office expenses	4,630,477	3,738,197	503,593	388,687
14	Information technology	2,969,080	1,686,138	1,240,078	42,864
15	Royalties	5,000	5,000		
16	Occupancy	8,883,567	8,430,035	382,307	71,225
17	Travel	2,413,104	1,862,697	295,172	255,235
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	625,212	527,783	63,594	33,835
20	Interest	5,037,841	5,037,841		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,362,695	9,977,702	278,873	106,120
23	Insurance	1,333,834	1,284,280	35,895	13,659
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a FOOD AND ENTERTAINMENT	4,820,066	4,252,401	225,637	342,028
	b TUITION EXPENSE	3,868,247	3,867,251	996	
	c REPAIRS AND MAINTENANCE	1,337,051	1,328,971	8,080	

902,289

2,809,830

182,185,251

902,289

2,315,792

160,596,855

438,166

16,004,532

55,872

5,583,864

Form **990** (2016)

d BOOKSTORE

e All other expenses

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)

Page **11**

190,434,591

32,725,114

389,636,048

7.138.344

20.642.782

692,335,621

9.929.518

2,722,656

2.419.269

6.218.157

161,704,647

348.101.228

61,826,471

120.703.275

530,630,974

692.335.621

Form **990** (2016)

140,415,047

Form 990 (2016)

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

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

Investments—publicly traded securities .

Intangible assets

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11 .

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 .

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

	beginning of year		□ □ □ or year
1 Cash-non-interest-bearing	729,539	1	152,441
2 Savings and temporary cash investments	21,826,075	2	22,820,853
3 Pledges and grants receivable, net	21,150,162	3	23,715,311
4 Accounts receivable, net	1,985,218	4	2,494,666
5 Loans and other receivables from current and former officers, directors,			

trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 305.287 Inventories for sale or use . 1,122,287 8

Assets 302.374 1,120,253 1.152.844 1.198.635 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other 331,934,266 basis Complete Part VI of Schedule D 10a

10b

141.499.675

189.217.013

28.998.392

361,385,152

635,090,371

8,397,817

3,834,305

2.128.395

7.116.865

142,663,221

325,203,223

51.390.886

115.833.041

492,427,150

635,090,371

121,185,839

7.172.445

166

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

2c

3a

3b

Yes

Yes

Yes (2016)

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

Audit Act and OMB Circular A-133?

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

Additional Data

Software ID:

Software Version:

EIN: 23-1365954

Name: DICKINSON COLLEGE

Form 990 (2016)

Form 990, Part III, Line 4a:

EDUCATING STUDENTS - DICKINSON COLLEGE IS COMMITTED TO MAKING A TOP-TIER EDUCATION IN THE LIBERAL ARTS AND SCIENCES ACCESSIBLE REGARDLESS OF FAMILIES' ECONOMIC MEANS ALL ADMITTED STUDENTS FROM THE MOST RECENT ENTERING CLASS, WHO DEMONSTRATED FINANCIAL NEED AND WHO MET APPLICATION DEADLINES, WERE OFFERED AID IN 2016-17, DICKINSON STUDENTS RECEIVED AN ESTIMATED \$66,909,478 IN FINANCIAL AID, OF WHICH \$51,369,697 WAS PROVIDED FROM THE COLLEGE'S FUNDS STATE AND FEDERAL AID PROGRAMS. PARENT LOANS AND OTHER OUTSIDE SOURCES PROVIDED THE REMAINING FUNDS CONTINUED ON SCHEDULE OIN FALL 2016, THE COLLEGE EMPLOYED 246 FULL-TIME EQUIVALENT FACULTY 93% OF FULL-TIME FACULTY MEMBERS HOLD A DOCTORATE OR OTHER TERMINAL DEGREE OF THIS GROUP, FULL PROFESSORS COMPRISED 24%, ASSOCIATE PROFESSORS 39%, ASSISTANT PROFESSORS 28%, AND INSTRUCTORS 9% THE STUDENT-TO-FACULTY RATIO FOR FALL 2016 WAS 9 1 TO SUPPORT ITS ACADEMIC, STUDENT LIFE AND AUXILIARY PROGRAMS, THE COLLEGE ALSO EMPLOYS 296 PROFESSIONAL ADMINISTRATIVE STAFF PERSONNEL (294 FT, 2 PT) AND 385 SUPPORT STAFF PERSONNEL (321 FT, 64 PT) DICKINSON CONTINUES TO RECEIVE FAVORABLE AND FREQUENT MEDIA ATTENTION AND ATTRACT GREATER LEVELS OF STUDENT INTEREST EACH YEAR AS THE NUMBER OF APPLICATIONS AND THE QUALITY AND DIVERSITY OF RECENT ENTERING CLASSES DEMONSTRATE, DICKINSON HAS A SECURE NATIONAL AND INTERNATIONAL REPUTATION AS A TOP QUALITY LIBERAL ARTS COLLEGE THE INCREASED LEVEL OF INTEREST THE COLLEGE HAS SEEN IN RECENT YEARS PUTS THE COLLEGE IN A GOOD POSITION TO CONTINUE TO ANALYZE AND BETTER UNDERSTAND THE PROFILE OF STUDENTS WHO ENROLL AND REMAIN AT DICKINSON IN ORDER TO IMPROVE SELECTIVITY, YIELD AND RETENTION 2,420 STUDENTS WERE ENROLLED FOR FALL 2016, INCLUDING 244 STUDENTS STUDYING OFF-CAMPUS AT THE COLLEGE'S CENTERS IN THE U.S. AND ABROAD FOR FALL 2016, STUDENTS CAME FROM 38 U.S. STATES AND TERRITORIES AND 43 FOREIGN COUNTRIES. THE OFFICE OF ADMISSIONS ADMITTED 2.667 FIRST-YEAR STUDENTS REFLECTING AN ACCEPTANCE RATE OF 43%, SELECTED FROM THE LARGEST APPLICANT POOL (6,172) IN THE COLLEGE'S HISTORY FIRST-YEAR ENROLLMENT FIGURES REFLECT THE COLLEGE'S ONGOING COMMITMENT TO ACADEMIC QUALITY (AVERAGE SAT SCORES OF 1,304) AND DIVERSITY (34% STUDENTS OF COLOR AND INTERNATIONAL STUDENTS) FRESHMAN TO SOPHOMORE RETENTION WAS 90%, AND APPROXIMATELY 80% OF ENTERING FIRST-YEAR STUDENTS GRADUATE WITHIN FOUR YEARS. THE MOST RECENT DATA AVAILABLE INDICATE THAT ONE YEAR AFTER GRADUATION, 95% OF THE COLLEGE'S GRADUATES ARE WORKING FULL-TIME AND/OR ARE IN GRADUATE OR PROFESSIONAL SCHOOL PROGRAMS WITHIN FIVE YEARS AFTER GRADUATION, 98% OF DICKINSON ALUMNI ARE WORKING FULL-TIME AND/OR ARE CURRENTLY ENROLLED IN OR HAVE COMPLETED GRADUATE OR PROFESSIONAL SCHOOL PROGRAMS DICKINSON STUDENTS MAY SELECT EITHER OF TWO BROAD DEGREE ORIENTATIONS WITHIN THE CURRICULUM. THE BACHELOR OF ARTS OR THE BACHELOR OF SCIENCE DEGREE. GENERAL EDUCATION REQUIREMENTS ARE THE SAME IN EITHER CASE, ONLY STUDENTS WITH THE CONCENTRATION IN ONE OF THE NATURAL OR MATHEMATICAL SCIENCES MAY BE CANDIDATES FOR THE BACHELOR OF SCIENCE DEGREE COURSES ARE OFFERED IN TWO SEMESTERS, EACH COMPRISING 14 WEEKS OF CLASSES FOLLOWED BY FINAL EXAMINATIONS THE FALL SEMESTER BEGINS IN LATE AUGUST AND CONCLUDES IN DECEMBER STUDENTS HAVE A READING PERIOD OF A FEW DAYS AT THE END OF CLASSES IN WHICH TO PREPARE FOR THE FINAL EXAMINATIONS AND PAPERS WHICH ARE SCHEDULED DURING THE SUBSEQUENT WEEK SPRING SEMESTER BEGINS NEAR THE END OF JANUARY AND RUNS THROUGH MID MAY, FOLLOWING THE SAME PATTERN OF CLASSES AND EXAMINATIONS AS THE FALL SEMESTER SEEKING A BALANCE BETWEEN THE FULL BREADTH OF LIBERAL LEARNING AND DEPTH REPRESENTED BY ONE DISCIPLINED APPROACH TO KNOWLEDGE, EACH DICKINSON STUDENT IS REQUIRED TO TAKE A MINIMUM OF 32 COURSES, COMPLETE A SERIES OF ALL-COLLEGE REQUIREMENTS, AND SELECT A MAJOR CONCENTRATION GENERAL REQUIREMENTS FOR THE DEGREE INCLUDE A FIRST-YEAR SEMINAR, ONE "WRITING IN THE DISCIPLINE" COURSE AND ONE "QUANTITATIVE REASONING" COURSE ADDITIONAL REQUIREMENTS FOR GRADUDATION INCLUDE DISTRIBUTION COURSES (AT LEAST ONE COURSE IN THE ARTS, HUMANITIES, SOCIAL SCIENCES AND LABORATORY SCIENCE), CROSS-CULTURAL STUDIES (COURSES IN FOREIGN LANGUAGES, U.S. DIVERSITY AND COMPARATIVE CIVILIZATIONS), ONE COURSE IN SUSTAINABILITY AND FOUR BLOCKS OF PHYSICAL EDUCATION DICKINSON'S FACULTY TEACH FIVE COURSES ANNUALLY, AS IS THE NORM FOR HIGHLY SELECTIVE NATIONAL LIBERAL ARTS COLLEGES WHERE EXPECTATIONS FOR FACULTY RESEARCH AND STUDENT FACULTY INTERACTION ARE HIGH INTRODUCTION OF A FIVE COURSE LOAD IN 2007 IN PLACE OF THE PREVIOUS EXPECTATION THAT SIX COURSES WOULD BE TAUGHT EACH YEAR WAS DESIGNED TO SUSTAIN AND ENRICH THE HIGH QUALITY AND VITALITY OF THE COLLEGE'S ACADEMIC PROGRAM. THE NEW TEACHING LOAD HAS ENABLED THE COLLEGE TO - MAINTAIN EXCELLENCE IN TEACHING, INCLUDING INNOVATION THROUGH NEW. OFTEN LABOR INTENSIVE PEDAGOGIES - OFFER A RICH CURRICULUM, INCLUDING THE EXPLORATION OF NEW FIELDS OF STUDY (RECENT INTRODUCTION OF MAJORS IN AFRICANA STUDIES, MIDDLE EAST STUDIES AND LATIN AMERICAN, LATINO, & CARIBBEAN STUDIES, A NEW MINOR IN PORTUGUESE AND BRAZILIAN STUDIES, AND CERTIFICATES IN FOOD STUDIES. HEALTH STUDIES AND SECURITY STUDIES ARE EXAMPLES) - LAUNCH A MAJOR INITIATIVE IN THE STUDY OF SUSTAINABILITY THAT HAS GIVEN DICKINSON A POSITION OF NATIONAL LEADERSHIP IN THIS FIELD - SUSTAIN THE FACULTY'S IMPRESSIVE RECORD OF SCHOLARSHIP AND ARTISTIC CREATIVITY BY MEETING PROFESSORS' CURRENT CONCERNS FOR MORE TIME FOR THEIR RESEARCH ACTIVITY - MAINTAIN THE VITAL ROLE OF THE FACULTY IN THE COLLEGE'S COLLEGIAL GOVERNANCE SYSTEM - ENHANCE DICKINSON'S COMPETITIVE POSITION IN THE RECRUITMENT OF OUTSTANDING NEW FACULTY - CONTINUE THE COLLEGE'S RECORD OF STRONG FACULTY RETENTION.

Form 990, Part III, Line 4b: AUXILIARY SERVICES - AUXILIARY SERVICES PROVIDED BY THE COLLEGE INCLUDE HOUSING AND DINING SERVICES (FOR 2,126 ON-CAMPUS STUDENTS), CAMPUS STORES, AND OTHER SERVICES PROVIDED TO SUPPORT STUDENTS AND EMPLOYEES

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 organizations and a director/trustee) organization from the for related (W-2/1099-(W- 2/1099organization and Highest comp employee individual tru or director Former key employe Institutiona related organizations MISC) MISC) below dotted organizations line)

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

		- इस्टा	Trustee		Ġ.	pensated			
JENNIFER WARD REYNOLDS	10 00	×		x			0	0	
TRUSTEE/CHAIR		^							
THOMAS L KALARIS	6 00	×		×		·	0	0	

		_ ^	^		١	۱ ۷	
TRUSTEE/CHAIR							
THOMAS L KALARIS	6 00						
		X	X		0	. 0)	
TRUSTEE/VICE CHAIR							
NEAL B ABRAHAM	4 00						
		Х			o	ı ol	
TRUSTEE/COMMITTEE CHAIR							

4 00

2 00

4 00

2 00

2 00

Х

Х

Х

Х

Х

0

.....

................

......

......

......

MICHAEL A BLOOM

MARK S BURGESS

JAMES D CHAMBERS

RICHARD A CHESLEY

MICHAEL W DONNELLY

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE/COMMITTEE CHAIR

TRUSTEE/COMMITTEE CHAIR

		I X	ı x ı		 I ()	1 ()	(
TRUSTEE/VICE CHAIR			,		Ů	,	,
NEAL B ABRAHAM	4 00	v			0	0	
TRUSTEE/COMMITTEE CHAIR		_ ^			Ĭ		
PETER J ANDERSON	2 00	×			0	0	
TRUSTEE		^					

THE B FISH WITH		l x				0	0	0
TRUSTEE/COMMITTEE CHAIR		_ ^					Ü	
PETER J ANDERSON	2 00	×				0	0	0
TRUSTEE						,	Ŭ	
ETHAN L ANDREWS	2 00							
		l x				0	0	0

			I	 	ı	 1		
PETER J ANDERSON	2 00	×				0	0	0
TRUSTEE		,						,
ETHAN L ANDREWS	2 00					0	0	0
TRUSTEE		^				٥	0	0

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) MISC) related below dotted organizations line) Trustee

ERIC DENKER	2 00	×			0	0
TRUSTEE		^			0	
STEVEN GALLEN EDERSHEIM	2 00	,				
TRUSTEE		_ ^			٥	0
RUTH L FERGUSON	4 00	V			0	0
TRUSTEE/COMMITTEE CHAIR		^			0	0
	3.00					

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

RUTH L FERGUSON	4 00	×			0	o	
TRUSTEE/COMMITTEE CHAIR							
GEORGE V HAGER JR	2 00	×			0	0	
TRUSTEE					Ţ		
CAROL CAMPBELL HAISLIP	2 00						

FRUSTEE/COMMITTEE CHAIR							ĺ
GEORGE V HAGER JR	2 00	×			0	0	
FRUSTEE		^				Ĭ	
CAROL CAMPBELL HAISLIP	2 00	l			0	0	
TRUSTEE		^			Ĭ	Ĭ	ĺ

4 00

4 00

2 00

Х

Х

Х

......

......

......

TRUSTEE/COMMITTEE CHAIR

TRUSTEE/COMMITTEE CHAIR

TRUSTEE/COMMITTEE CHAIR

JOHN E JONES III

MARK I LEHMAN

TRUSTEE

WILLIAM L MUELLER

IRUSTEE								
CAROL CAMPBELL HAISLIP	2 00					0	0	0
TRUSTEE						,	,	
FRANK E JAMES III	4 00					0	0	
TRUSTEE/COMMITTEE CHAIR		l ^				l "	U	i

0

0

0

0

0

INUSTEE								
FRANK E JAMES III	4 00							
TRUSTEE/COMMITTEE CHAIR		*				١	0	
JULIE I JOHNSON	4 00	l						
		I X	ı			1 0	1 0	

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per 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- 2/1099-Highest compo organization and Individual trust or director Office Former key employee Institutional organizations MISC) MISC) related below dotted organizations line)

		វិច្ចម	rustee	•	ensated			
KAYLA J MUIRHEAD	2 00					0	0	
TRUSTEE		^					Ů	
AMY L NAUIOKAS	2 00	×				0	0	
TRUSTEE						Ĭ	Ĭ	

Х

Х

Х

Х

Х

Х

Х

0

4 00

4 00

2 00

4 00

2 00

2 00

2 00

.....

......

......

......

......

......

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

AYLA J MUIRHEAD	2 00	х			
RUSTEE		^			
MY L NAUIOKAS	2 00	>			
RUSTEE		^			
ELLIE L NEWTON	2 00				•

TRUSTEE

DOUGLAS J PAULS

TARUN SAINI

SYLVIA J SMITH

MARJORIE A SPEERS

ROBERT T SYMINGTON

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

CRAIG C WEEKS

TRUSTEE/COMMITTEE CHAIR

TRUSTEE/COMMITTEE CHAIR

TRUSTEE/COMMITTEE CHAIR

MICHELE MAHONEY RICHARDSON

......

......

......

Compensated Employees, and Independent, Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related

(F)

Estimated

compensation from the

38,308

22,779

22,781

0

0

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

	any hours	and	a dır	ecto	r/tr	ustee)	organization	organizations	from the
	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
NEIL B WEISSMAN INTERIM PRESIDENT	40 00	x		×				364,549	0	37,765
BRONTE D BURLEIGH-JONES VP FINANCE & ADMIN AND TREASURER	40 00			x				283,767	0	28,571

					🖰			
NEIL B WEISSMAN	40 00	_	¥			364,549	0	37,765
INTERIM PRESIDENT		^	^			304,343		37,703
BRONTE D BURLEIGH-JONES	40 00		v			283,767	0	28,571
VP FINANCE & ADMIN AND TREASURER			^			203,707		20,371
SEAN M WITTE	40 00						_	
AVD ENIANCE AND ACCT TREACHRED			X			160,566	0	17,295

BRONTE D BURLEIGH-JONES	40 00		v		283,767	0	28,571
VP FINANCE & ADMIN AND TREASURER			_		203,707	0	20,371
SEAN M WITTE	40 00		V		160.566	0	17,295
AVP FINANCE AND ASST TREASURER					160,366	0	17,295
KAREN NEELY FARYNIAK	40 00		v		155.299	0	27,685
CHIEF OF STAFF AND SECRETARY					155,299	0	27,663
ASHELY M PERZYNA	40 00						_

SEAN M WITTE AVP FINANCE AND ASST TREASURER	40 00		х		160,566	0	17,295
KAREN NEELY FARYNIAK CHIEF OF STAFF AND SECRETARY	40 00		X		155,299	0	27,685
ASHELY M PERZYNA ASST CHF OF STAFF & ASST SECRETARY	40 00		×		63,536	0	19,461

CHIEF OF STAFF AND SECRETARY			ĺ ^			155,255		27,003
ASHELY M PERZYNA	40 00		x			63,536	0	19.461
ASST CHF OF STAFF & ASST SECRETARY						33,333	· ·	
ROBERT P WINSTON	40 00			x		169,685	0	33,451
INTERIM PROVOST AND DEAN				Ľ,		103,000	, and the second	33,131

Х

Х

236,555

221,779

180,751

ASST CHF OF STAFF & ASST SECRETARY	•••••		×			63,536	0	19,461
ROBERT P WINSTON	40 00			x		169,685	0	33,451
INTERIM PROVOST AND DEAN				^		103,003	9	33,431
JOYCE A BYLANDER	40 00			x		217,882	0	31.288
	i		- 1	_ ^\	ı	 1 217,002	ı •	, 31,200

40 00

40 00

40 00

......

.....

VP STUDENT LIFE

STEFANIE D NILES

ROBERT E RENAUD

KIRK I SWENSON

VP ADVANCEMENT

VP AND CIO

VP ENROLLMENT MANAGEMENT

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation week (list person is both an officer from the from related any hours and a director/trustee) organization organizations

(F)

Estimated

amount of other

compensation

from the

34,023

26,749

32,040

26,582

41,443

60,239

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

	for related organizations below dotted line)	0 ==	Institutional Trustee	Qf i	<u> </u>	Highest compensated	 (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DANA E SCADUTO GENERAL COUNSEL	40 00					X	280,377	0	21,739
MICHAEL E REED VP INSTITUTIONAL INITIATIVES	40 00					×	216,418	0	30,407
BRIAN J WHALEN	40 00								

GENERAL COUNSEL							
MICHAEL E REED	40 00			Х	216,418	0	
VP INSTITUTIONAL INITIATIVES				^	210,410	9	
BRIAN J WHALEN	40 00			х	213.303	0	
PRES/CEO FORUM ON EDUC ABROAD				^	213,303	· ·	

Х

Х

Х

Х

Х

167.086

165,608

122,291

441,775

188,187

40 00

40 00

40 00

0 00

40 00

.

................

......

......

DAVID G STRAND

PROFESSOR

BRIAN G FALCK

BRENDA K BRETZ

NANCY A ROSEMAN

FORMER PRESIDENT

KENNETH E SHULTES

FORMER VP CAMPUS OPERATIONS

AVP COLLEGE ADVANCEMENT

FORMER ASST SECRETARY

efile	GR/	APHIC prin	t - DO NOT PROCES	S As Filed Data -			DLN: 9	3493113008078
SCH	IED	ULE A	Public	c Charity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047
(Forn	n 99(organization is a sect				2016
990E	Z)			4947(a)(1) nonexe ▶ Attach to Form				2010
		the Treasury	► Information at	oout Schedule A (Form	990 or 990-EZ		uctions is at	Open to Public Inspection
lame	of th	ue Service ie organiza	tion	<u>www.irs.g</u>	ov/form990.		Employer identific	<u>_</u>
ICKIN	SON C	OLLEGE					23-1365954	
Par			for Public Charity St					
	ganız:		a private foundation becar	`	-			
1		•	onvention of churches, or			. , , ,	(A)(ı).	
2	✓		scribed in section 170(b		,			
3		·	or a cooperative hospital s	•				
4		name, city,	esearch organization ope and state	-	-			
5			ation operated for the ben (iv). (Complete Part II)	nefit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(A	A)(v).	
7			ation that normally received (O(b)(1)(A)(vi). (Compl		s support from a	governmental ι	unit or from the gener	al public described in
8		A communi	ty trust described in sect	ion 170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization rant college of agriculture					ege or university or a
LO		from activit	ation that normally receivences related to its exempt income and unrelated busines section 509(a)(2).	functions—subject to cer isiness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
1	П		ation organized and opera		r public safety S	ee section 509)(a)(4).	
.2		more public	ation organized and opera ly supported organization through 12d that describ	ns described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization of n(s) the power to regular Part IV, Sections A and	perated, supervised, or colly appoint or elect a majo	ontrolled by its s	upported organı	zation(s), typically by	
b		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections	supervised or controlled i nization vested in the sar				
С		Type III f	unctionally integrated. organization(s) (see instru	A supporting organizatio				ted with, its
d		Type III n functionally	on-functionally integra integrated The organiza i) You must complete I	ited. A supporting organ ition generally must satis	zation operated fy a distribution	in connection wi	th its supported organ	
e		Check this	box if the organization red or Type III non-functiona	ceived a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organization		organization			
g	Provid	de the follow	ing information about the	supported organization(s)			
(i)Na	me of	f supported o	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(i) Is the organiz your governir		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No	1	
Γotal			tion Act Notice, see the					

Sch	nedule A (Form 990 or 990-EZ) 2016						Page 2
	Part II Support Schedule for	Organizations	Described in Se	ctions 170(b)	(1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you ch						under Part
	III. If the organization fa	ails to qualify un	der the tests liste	ed below, please	e complete Part	III.)	
	Section A. Public Support						
	Calendar year (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	16,140,110	10,461,605	9,748,581	7,420,512	11,449,581	55,220,389
_	include any "unusual grant ") Tax revenues levied for the						
2	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	16,140,110	10,461,605	9,748,581	7,420,512	11,449,581	55,220,389
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly supported organization) included on						4,568,759
	line 1 that exceeds 2% of the						, ,
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5						
•	from line 4						50,651,630
_ 5	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	16,140,110	10,461,605	9,748,581	7,420,512	11,449,581	55,220,389
8	_	10,110,110	10,101,003	3,7 10,301	7,120,312	11,115,501	33,220,303
Ū	dividends, payments received on	1,626,234	1,468,635	1,083,301	1,550,099	1,549,254	7,277,523
	securities loans, rents, royalties and	1,020,234	1,400,033	1,005,501	1,550,099	1,549,254	7,277,323
9	income from similar sources Net income from unrelated business						
9	activities, whether or not the		308,778				308,778
	business is regularly carried on						
10		2.457.676	2 424 622	2 440 402	2 540 220	2 477 455	12 000 355
	or loss from the sale of capital assets (Explain in Part VI)	2,157,676	2,124,603	3,110,182	3,519,339	2,177,455	13,089,255
11							75,895,945
	10						
	Gross receipts from related activities,					12	742,220,953
13	First five years. If the Form 990 is fo	or the organization'	s first, second, thir	d, fourth, or fifth	tax year as a secti	on 501(c)(3) orga	nization,
	check this box and stop here					<u></u>	
	Section C. Computation of Public						
	Public support percentage for 2016 (III			lumn (f))		14	66 740 %
	Public support percentage for 2015 Sc					15	65 880 %
16	a 33 1/3% support test—2016. If the				14 is 33 1/3% or	more, check this b	_
	and stop here. The organization quali						▶ ☑
ı	b 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	•			13.16 16	11 44	▶□
17	a 10%-facts-and-circumstances test is 10% or more, and if the organizatio						
	in Part VI how the organization meets						

ightharpoons

ightharpoons

Schedule A (Form 990 or 990-F7) 2016

b 10%-facts-and-circumstances test-2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 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

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

organization

instructions

supported organization

20

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	the organization rans to						
Se	ction A. Public Support		Г	1		1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
•	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	A						
D	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support						
	Calendar year				(d)2015	() > 0 ()	407 L
		(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(f)lotal
•	(or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(4)2015	(e)2016	(f)Total
9	(or fiscal year beginning in) ► Amounts from line 6	(a)2012	(b) 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a)2012	(b) 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	(b) 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a)2012	(b) 2013	(c)2014	(4)2015	(e)2016	(†)Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(f) lotal
10a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(f) lotal
10a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,						ganization,
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11 12 13 14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo	r the organization	's first, second, th				ganization,
10a b c 11 12 13 14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fift			ganization,
10a b c 11 12 13 14 See	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization Support Perce e 8, column (f) d	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
10a b c 11 12 13 14 Se 15 16	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public sepublic support percentage from 2015 S	r the organization Support Perce e 8, column (f) d schedule A, Part I	's first, second, the second by line 13, II, line 15	nird, fourth, or fift		ection 501(c)(3) or	ganization,
10a b c 111 12 13 14 Se 15 16 Se	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investor	r the organization Support Perce ie 8, column (f) d Schedule A, Part I: ment Income	's first, second, the second by line 13, II, line 15 Percentage	nird, fourth, or fift	h tax year as a se	25 16	ganization,
10a b c 111 12 13 14 See 15 16 See 17	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization Support Perce e 8, column (f) d ichedule A, Part I: ment Income 16 (line 10c, column	's first, second, the second by line 13, II, line 15 Percentage mn (f) divided by	nird, fourth, or fift	h tax year as a se	15 16 17	ganization,
10a b c 11 12 13 14 Se 15 16 Se 17 18	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public services Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015 Investment income percentage from 2015 Investment income percentage from 2015	r the organization Support Perce e 8, column (f) d ichedule A, Part I: ment Income 16 (line 10c, colui 015 Schedule A,	i's first, second, the second by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17	column (f))	h tax year as a se	15 16 17 18	ganization,
10a b c 111 12 13 14 See 17 18 19a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization Support Perce ie 8, column (f) di Schedule A, Part II ment Income 16 (line 10c, colui 015 Schedule A, organization did r	a's first, second, the stage invided by line 13, II, line 15 Percentage in (f) divided by Part III, line 17 into check the box	column (f)) line 13, column (f	h tax year as a se	15 16 17 18 133 1/3%, and line	ganization, ▶ □

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

ightharpoons

ightharpoons

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

answer line 10b below

the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

Page 4

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)

below 3а 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

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 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 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 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections

501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document) 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

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6 supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," 8 complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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

organization had an interest? If "Yes," provide detail in Part VI. 9b

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

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

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

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a

D,	art IV Supporting Organizations (continued)			
	Supporting Organizations (continues)		Yes	No
	Use the surrougher seconds of sufficient surbule, then forms only of the fellowing surrough		165	NO
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
				l
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	1		
_	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		\vdash		
		1		
S	Section D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
		3		
S	Section 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 instruct	ions)		
	a			
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the	0		
	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.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		

3 Subtract line 2 from line 1d Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6)

1 2

3

4 5

6

Section C - Distributable Amount

Enter 85% of line 1

Enter greater of line 2 or line 3

instructions)

Income tax imposed in prior year

temporary reduction (see instructions)

2

5

Adjusted net income for prior year (from Section A, line 8, Column A)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Current Year

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

Explanation

OTHER REVENUES 2012 \$2,157,676 2013 \$2,124,603 2014 \$3,110,182 2015 \$3,519,339 2016 \$2,177,455

Return Reference

PART II, LINE 10 OTHER INCOME

TOTAL \$13,089,255

Schedule A (Form 990 or 990-EZ) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493113008078

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number DICKINSON COLLEGE 23-1365954 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-3 5

	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:			
	Not over \$500,000	20% of the amount on line	1e	<u> </u>		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the e	excess over \$500,000	1		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the e	excess over \$1,000,000	1		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the ex	cess over \$1,500,000	1		
	Over \$17,000,000	\$1,000,000		1		
g h i j	(Some organizations that made a	yeraging Period Uno section 501(h) elec	ler section 501(l	n) to comple		☐ Yes ☐ No
	columns below. See t	he separate instruc	tions for lines 2	a through 2	.f.)	
	Lobbying Expe	enditures During 4-	Year Averaging	Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a	Lobbying nontaxable amount					
Ь	Lobbying ceiling amount (150% of line 2a, column(e))					
	Total lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Grassroots nontaxable amount

Grassroots lobbying expenditures

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

Form 5768 (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Nο Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Nο Media advertisements? Nο Mailings to members, legislators, or the public? Nο d Publications, or published or broadcast statements? Nο Grants to other organizations for lobbying purposes? Nο Direct contact with legislators, their staffs, government officials, or a legislative body? Nο Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Nο Other activities? Yes Total Add lines 1c through 1i 2a 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6). Yes No 1 1 Were substantially all (90% or more) dues received nondeductible by members? 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year 2c c Total 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information Return Reference Explanation PART II-B, LINE 1 THE COLLEGE DOES NOT DIRECTLY ENGAGE IN LOBBYING ACTIVITY HOWEVER. A PORTION OF THE DUES

PAID TO PROFESSIONAL ORGANIZATIONS MAY BE USED FOR LOBBYING ON BEHALF OF MEMBER

INSTITUTIONS

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990,

OMB No 1545-0047

DLN: 93493113008078

Open to Public

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** DICKINSON COLLEGE 23-1365954 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 68,000 2,548,853 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Sche	dule D	(Form 990) 2016													Page 2
Par	t III	Organizations M	aintaining Col	lections of	f Art, His	torica	l Tre	easur	res, or Ot	ther S	imilar A	Assets (c	ontınu	ed)	
3		g the organization's acq s (check all that apply)	uisition, accession	n, and other	records, ch	neck any	y of tl	he foll	owing that	are a s	significant	use of its	collect	ion	
а	\checkmark	Public exhibition				d [Loan o	r exchange	e progr	ams				
b	✓	Scholarly research				e [Other							
c	✓	Preservation for future	e generations												
4	Provi Part	de a description of the XIII	organization's col	lections and	explain hov	w they	furthe	er the	organizatio	n's exe	empt purp	ose in			
5		ng the year, did the org s to be sold to raise fur									lar	☐ Ye	s [Z N	0
Pai	rt IV	Escrow and Cust Complete if the or X, line 21.			on Form	990, F	art I	IV, lın	e 9, or re	ported	d an amo	unt on F	orm 9	90,	Part
1a		e organization an agent ded on Form 990, Part		an or other II	ntermediar	y for co	ntribi	utions	or other as	ssets n	ot	☐ Ye	s E	Z N	o
b	τ ε "∨-	es," explain the arrange	ement in Dart YIII	and complet	te the follow	wing to	hle					Amount			_
С		es, explain the arrange ining balance	ament in Fait Alli	and complet	re me iono	wing ta	חוכ		10			Amount			-
d	_	ining balance lions during the year							10	_					-
e		ibutions during the year	.						10	_					_
f		- ,							1	_					_
		ng balance he organization include	an amount on Eo	000 Dart	t V line 21	for on	cross	or cuc			sulutsu 2				_
2a b		es," explain the arrange									·	☑ Ye		_ м. √	0
Pa	rt V	Endowment Fun	ds. Complete ıf	the organi	zation ans	swered	"Ye	s" on	Form 990), Part	IV, line	10.			
				(a)Current		(b)Prior		_	c) Two years		(d)Three ye		(e)Fou		
1a	Beginr	ning of year balance .			956,152		,533,		430,82			3,627,404		-	506,362
b	Contri	butions		-	938,597		,655,			51,809		2,483,050			256,457
		vestment earnings, gair			654,988		3,746,		·	21,746		1,660,389			28,627
		or scholarships		7,	074,886		,859,	099	6,69	95,518		5,011,792		5,4	172,787
	and pr	expenditures for faciliti ograms	es		372,710		8,881,		8,10	02,093	7	7,592,347		7,0)52,759
f	Admın	istrative expenses .		-	707,179	3	3,746,	072		58,653	3	3,340,291		3,7	738,496
g	End of	year balance		441,	394,962	407	,956,	152	439,53	33,704	430	0,826,413		383,6	527,404
2	Provi	de the estimated perce	ntage of the curre	ent year end	balance (lu	ne 1g, (colum	nn (a))	held as						
а	Boar	d designated or quasi-e	ndowment >	59 720 %											
b	Perm	anent endowment 🟲	27 350 %												
С	Temp	porarily restricted endo	wment ► 12.9	930 %											
		percentages on lines 2a		•											
3а		here endowment funds nization by	not in the posses	sion of the o	rganization	n that a	re hel	ld and	administer	ed for	the		Г	'es	No
	-	nrelated organizations										3a		es /	110
		elated organizations					٠. ٠							es /	
b		es" on $3a(\pi)$, are the re		ns listed as re	equired on	Schedu	٠ le R?							'es	
4	Desc	ribe in Part XIII the inte	ended uses of the	organization	n's endowm	nent fun	ds						I		
Pai	rt VI	Land, Buildings,	and Equipmen	nt.											
		Complete if the or													
	Descr	iption of property	(a) Cost or oth (investme		(b)Cost or o	other bas	sis (ot	her)	(c)Accumul	ated de	preciation	(d) Book	value	l
1 a	Land			5,686,339		1	1,441	1,495						17	,127,834
b	Buildir	ngs				26	59,718	3,366		1	15,962,538			153	,755,828
c	Leasel	nold improvements					1,736	5,734			848,462				888,272
d	Equipr	nent				2	22,787	7,238			19,205,942			3	,581,296

20,564,094

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

15,081,361

190,434,591

5,482,733

•

Part VII	Investments—Other Securities. Complete if t See Form 990, Part X, line 12.	he organization answered	l 'Yes' on Form 990, Pa	rt IV, line 11b.
	(a) Description of security or category (including name of security)	(b)Book value	(c)Method of v Cost or end-of-year	
1)Financial				
2) Closely-n 3) Other <u> </u>	eld equity interests	240,484,429	F	
	EQUITY FUNDS	103,797,723		
	SET FUNDS	31,944		
	HELD IN TRUSTS BY OTHERS	45,278,286		
OTHER	ines a file of the control of the co	43,666	F	
E)		13,000	·	
=)				
5)				
H)				
	n (b) must equal Form 990, Part X, col (B) line 12)	389,636,048		
art VIII	Investments—Program Related. Complete if See Form 990, Part X, line 13.	the organization answere	ed 'Yes' on Form 990, F	art IV, line 11c.
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-year	
1)				
2)				
3)				
4)				
5)				
5)				
7)				
3)				
9)				
otal. (Columr	n (b) must equal Form 990, Part X, col (B) line 13)	b		
Part IX	Other Assets. Complete if the organization answere (a) Descriptio		line 11d See Form 990, I	Part X, line 15 (b) Book value
1)				
2)				
3)				
1)				
5)				
5)				
7)				
3)				
9)				
otal. (Colui Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a	answered 'Yes' on Form 9		
•	See Form 990, Part X, line 25. (a) Description of liability	(b) Book v	alue	
L) Federal ır	ncome taxes			
NNUITIES F	PAYABLE		2,801,030	
	NMENT ADVANCES REFUNDABLE		2,478,274	
BLIGATION	IS UNDER CAPITAL LEASES		938,853	
)				
5)				
7)				
>)				
9) otal. (Column	n (b) must equal Form 990, Part X, col (B) line 25)		6,218,157	

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c 2d

4a

4b

Explanation

1

Donated services and use of facilities . . . Prior year adjustments

Other (Describe in Part XIII)

Supplemental Information

Other losses

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

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 . . .

Add lines **4a** and **4b**

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,

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) 2016

Part XI

2

е

b

C

Part XIII

See Additional Data Table

3

2e 3 4c 5

2,078,627

49,364,599

130,742,025

Page 4

51,443,226 182,185,251

Schedule D (Form 990) 2015

	Schedule D (Form 990) 2015
Supplemental Information (continued)	Part XIII Supplemental Info
Return Reference Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: **Software Version:**

> **EIN:** 23-1365954 Name: DICKINSON COLLEGE

Supplemental Information

PART III, LINE 4

Return Reference	Explanation
III, LINE 4	THE EMIL R WEISS CENTER FOR THE ARTS HOUSES THE TROUT GALLERY, WHICH IS USED FOR A VARIET Y OF EXHIBITIONS, LECTURES, AND DEMONSTRATIONS RELATING TO THE COLLEGE'S FINE ARTS COLLECT ION THE TROUT GALLERY SERVES AS A CONTINUOUS DISPLAY OF ART EXHIBITS AND IS LOCATED IN SU CH AN AREA OF THE CAMPUS SO AS TO STIMULATE GENERAL STUDENT INTEREST AND BE A SERVICE TO THE HUMANITIES

Supplemental Information	
Return Reference	Explanation
	FUNDS HELD IN CUSTODY FOR OTHERS INCLUDE FUNDS RECEIVED FROM OFFICIALLY RECOGNIZED STUDENT ORGANIZATIONS AND OTHER ORGANIZATIONS SPECIFICALLY APPROVED BY THE VICE PRESIDENT FOR FIN ANCE AND ADMINISTRATION RELATED ASSETS ARE REPORTED ON FORM 990, PART X AND ARE ACCOUNTED FOR IN A MANNER CONSISTENT WITH THE COLLEGE'S REPORTING SYSTEM

Supplemental Information					
Return Reference	Explanation				
PART V, LINE 4	THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 900 INDIVIDUAL FUNDS ESTABLISHED FOR A V ARIETY OF PURPOSES INCLUDING FINANCIAL AID, FACULTY SALARIES AND BENEFITS, LIBRARY RESOURC ES, BUILDING MAINTENANCE, STUDENT LOANS AND OTHER PROGRAMMATIC SUPPORT NET ASSETS ASSOCIA TED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPO SED RESTRICTIONS THE COLLEGE HAS ADOPPED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT A SSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS UNDER THIS POLICY, AS APPROVED BY THE BOARD OF TRUSTEES, THE ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE RESULTS THAT EXCEED THE ENDOWMENT SPENDING RATE PLUS INFUNCATION, DEFINED AS THE CONSUMER PRICE INDEX PLUS 1%, WHILE ASSUMING A MODERATE LEVEL OF INVESTMENT RISK IN FY'17, SPENDING FROM THE ENDOWMENT PROVIDED APPROXIMATELY 12 2% OR \$15 5 MILLION OF DICKINSON'S OPERATING BUDGET REVENUES, WITH ANOTHER \$3 7 MILLION GOING TO REST RICTED FUNDS THE POOLED ENDOWMENT POSTED RETURNS OF 13 0% FOR THE FISCAL YEAR ENDED JUNE 30, 2017 AND HAS AVERAGED ANNUAL RETURNS OF 6 0% OVER THE PAST DECADE, PLACING DICKINSON INTHE 90TH PERCENTILE (OR TOP 10%) OF LONG-TERM PERFORMANCE FOR OVER 620 INSTITUTIONS REPORTING TO THE 2017 NACUBO-COMMONFUND STUDY OF ENDOWMENTS				

Supplemental Information				
Return Reference	Explanation			
PART X, LINE 2	THE COLLEGE HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INC OME TAX UNDER SECTION 501(C)(3) OF THE U S INTERNAL REVENUE CODE, EXCEPT FOR TAXES ON INC OME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE ACCORDINGLY, THE COLLEGE IS NOT SUBJE CT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE NO PROVISIONS FOR INCOME TAXES HAVE BEEN MADE IN THE ACCOM PANYING FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2017 OR 2016 ACCOUNTING PRINCIP LES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE COLLEGE AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE COLLEGE HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXA MINATION BY THE IRS MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE COLLEGE, AND H AS CONCLUDED THAT AS OF JUNE 30, 2017, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS			

applemental Information						
Return Reference	Explanation					
PART XI, LINE 2D - OTHER ADJUSTMENTS	STUDENT AID OFFSETTING REVENUES IN FINANCIAL STATEMENTS -49,364,599					

-

upplemental Information						
Return Reference	Explanation					
PART XII, LINE 4B - OTHER ADJUSTMENTS	STUDENT AID INCLUDED WITH GRANTS ON THE 990 49,364,599					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493113008078 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 oscanization **Employer identification number** DICKINSON COLLEGE 23-1365954 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 No 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)

Notalli Notorchice	Explanation
SCHEDULE E, PART I, LINE 3	THE COLLEGE'S POLICY ON NONDISCRIMINATION IS INCLUDED IN ALL PRINTED SOLICITATION MATERIALS AND IS MAINTAINED FOR PUBLIC ACCESS VIA THE COLLEGE WEB SITE
SCHEDULE E, PART I, LINE 6	BEYOND THE NUMEROUS INDIVIDUAL RESEARCH GRANTS AWARDED TO OUR FACULTY, DICKINSON COLLEGE HAS RECEIVED SEVERAL NATIONALLY COMPETITIVE INSTITUTIONAL AWARDS IN RECENT YEARS THESE GRANTS ARE SIGNIFICANT NOT ONLY BECAUSE OF THE FUNDING THEY PROVIDE TO SUPPORT PEDAGOGICAL INNOVATION AND NEW PROGRAM INITIATIVES, BUT ALSO BECAUSE THEY PROVIDE EXTERNAL VALIDATION FOR THE EXCELLENCE OF OUR ACADEMIC ENTERPRISE THEY REFLECT THE COLLEGE'S STRATEGIC VISION OF AN ACADEMIC CURRICULUM THAT COMBINES A STRONG COMMITMENT TO THE BEST TRADITIONS OF THE LIBERAL ARTS WITH A DESIRE TO INNOVATE AND INTRODUCE PROGRAMMING THAT SPEAKS TO CONTEMPORARY CONCERNS

efile GRAPHIC prin	t - DO NOT I	PROCESS	As Filed Data	-	DLN	: 93493113008078
SCHEDULE F (Form 990)	State	ement of	ent of Activities Outside the United States			OMB No 1545-0047
(1 01111 000)		► Complet	•	n answered "Yes" to Form	990,	2016
		- A++		14b, 15, or 16. See separate instructions.		Open to Public
Department of the Treasury Internal Revenue Service	▶ Informa			and its instructions is at wi	vw.irs.gov/form990.	Inspection
Name of the organization DICKINSON COLLEGE	1				Employer ide	ntification number
DICKINSON COLLEGE					23-1365954	
	Information , Part IV, line		s Outside the l	Jnited States. Comple	te if the organization a	answered "Yes" to
1 For grantmaker	s.Does the org	ganızatıon maı	ntain records to s	substantiate the amount	of its grants and	
other assistance,	the grantees'	eligibility for t	he grants or assis	stance, and the selection	criteria used	
to award the gran	nts or assistan	ce?				☑ Yes ☐ No
2 For grantmaker outside the Unite		Part V the org	anızatıon's proce	dures for monitoring the	use of its grants and ot	her assistance
3 Activites per Regio	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region
(1) See Add'l Data						
(2)						
(3)						
(4)						
(5)						<u> </u>
3a Sub-total b Total from continua	tion sheets to		0 2 7 157			59,096,920 9,980,122
Part I c Totals (add lines 3	a and 3b)		7 159			69,077,042
For Paperwork Reduction		the Instruction	ns for Form 990.	Cat	No 50082W Schedu	le F (Form 990) 2016

(9)

(10) (11) (12) (13) $\overline{(14)}$ (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2016

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

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.

(2) (3)

(4) (5)

(6) (7) (8)

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 Comis 3320 and 3320 my	☐ 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)		
	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

Schedule F (F	orm 990) 2016 Page 5
	Eupplemental 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 Reference	Explanation
PART I, LIN	THE COLLEGE'S INSTITUTIONAL METHODOLOGY USED TO DETERMINE ELIGIBILITY FOR GRANT FUNDS IS OUTLINED IN SCHEDULE I, PART IV GRANT FUNDS PROVIDED TO INDIVIDUALS OUTSIDE OF THE UNITED STATES INCLUDE

Additional Data

CENTRAL AMERICA AND THE

CENTRAL AMERICA AND THE

CARIBBEAN

CARIBBEAN

Software ID: Software Version:

EIN: 23-1365954

Name: DICKINSON COLLEGE

52,990

57,396,702

Form	000 Schodula	E Dart T _ A	rtivitiae Auteida	The United States

(a) Region	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0		GLOBAL STUDY ABROAD PROGRAMS	91,650

0 GRANTS AND OTHER

ASSISTANCE

0 INVESTMENTS

(h) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

Form 990 Schedule F Part I - Activities Outside The United 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					
CENTRAL AMERICA AND THE CARIBBEAN	0	0	RESEARCH AND DEVELOPMENT		2,296					
EAST ASIA AND THE PACIFIC	0	2	I and the second	GLOBAL STUDY ABROAD PROGRAMS	906,720					
EAST ASIA AND THE PACIFIC	0	_	ADMISSIONS RECRUITING		10,654					

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) EAST ASIA AND THE PACIFIC 0 IGRANTS AND OTHER 625.048 lassistance. EAST ASIA AND THE PACIFIC 0 RESEARCH AND 10.860 IDEVELOPMENT EUROPE (INCLUDING ICELAND 110 PROGRAM SERVICES IGLOBAL STUDY ABROAD 4.287.433 & GREENLAND) **IPROGRAMS**

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 ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) EUROPE (INCLUDING ICELAND 0 ADMISSIONS 2.349 & GREENLAND) RECRUITING EUROPE (INCLUDING ICELAND 0 FUNDRAISING 7.047 & GREENLAND) EUROPE (INCLUDING ICELAND 0 IGRANTS AND OTHER 2.912.250 & GREENLAND) ASSISTANCE

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) EUROPE (INCLUDING ICELAND 0 INVESTMENTS 1.047.405 & GREENLAND) EUROPE (INCLUDING ICELAND 0 RESEARCH AND 87.907 & GREENLAND) IDEVELOPMENT MIDDLE EAST AND NORTH 0 PROGRAM SERVICES IGLOBAL STUDY ABROAD 134.610 AFRICA **IPROGRAMS**

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) MIDDLE EAST AND NORTH 0 ADMISSIONS 1.216 AFRICA RECRUITING MIDDLE EAST AND NORTH 0 IGRANTS AND OTHER 90.976 AFRICA IASSISTANCE MIDDLE EAST AND NORTH 0 RESEARCH AND 2.852 AFRICA DEVELOPMENT

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region 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) NORTH AMERICA - CANADA 0 ADMISSIONS 2,301 AND MEXICO RECRUITING NORTH AMERICA - CANADA 0 RESEARCH AND 14.339 AND MEXICO IDEVELOPMENT RUSSIA AND THE 18 PROGRAM SERVICES IGLOBAL STUDY ABROAD 151.403 NEIGHBORING STATES IPROGRAM.

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) RUSSIA AND THE 0 IGRANTS AND OTHER 140.861 NEIGHBORING STATES lassistance. RUSSIA AND THE 0 RESEARCH AND 808 NEIGHBORING STATES IDEVELOPMENT 1 PROGRAM SERVICES IGLOBAL STUDY ABROAD 290.383 SOUTH AMERICA IPROGRAM.

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 FUNDRAISING 2.587 295,738 SOUTH AMERICA 0 IGRANTS AND OTHER LASSISTANCE SOUTH AMERICA 0 RESEARCH AND 2,856 IDEVELOPMENT

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region 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 services, grants to service(s) in region region recipients located in the region) SOUTH ASIA 0 PROGRAM SERVICES IGLOBAL STUDY ABROAD 151.066 **IPROGRAMS** SOUTH ASIA 0 ADMISSIONS 2.382 RECRUITING SOUTH ASIA 0 IGRANTS AND OTHER 130.997 ASSISTANCE

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region ın region (by type) (i e , offices in the employees or 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 ASIA 0 RESEARCH AND IGLOBAL STUDY ABROAD 4.237 IDEVELOPMENT **IPROGRAMS** SUB-SAHARAN AFRICA 28 PROGRAM SERVICES IGLOBAL STUDY ABROAD 122.903 **IPROGRAMS** SUB-SAHARAN AFRICA 0 IGRANTS AND OTHER 91.570 ASSISTANCE

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (ı e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) 0 RESEARCH AND 1.646 SUB-SAHARAN AFRICA IDEVELOPMENT

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	CENTRAL AMERICA AND THE CARIBBEAN	3			,	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER			
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	EAST ASIA AND THE PACIFIC	37			,	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
SCHOLARSHIPS FOR STUDENTS STUDYING	EUROPE (INCLUDING ICELAND & GREENLAND)	176				NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER		
CCHOLARCHIRE FOR	MIDDLE EAST AND NORTH AFRICA	8			•	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
COLIOI ADCLITEC FOR	RUSSIA & THE NEIGHBORING STATES	8			,	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER		
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	SOUTH AMERICA	16			·	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (h) Method of (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) INSTITUTIONAL 130,997 NON-CASH CREDIT OTHER SOUTH ASIA SCHOLARSHIPS FOR ITO STUDENT **LACCOUNTS** STUDENTS STUDYING ABROAD INSTITUTIONAL 91,570 NON-CASH CREDIT OTHER ISUB-SAHARAN SCHOLARSHIPS FOR ITO STUDENT AFRICA STUDENTS STUDYING IACCOUNTS. ABROAD

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493113008078 OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

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.

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

DICKINSON COLLEGE Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations ✓ Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
1 GENERATION 502 UNION STREET HUDSON, NY 12534	COLLEGE ADVANCEMENT BRANDING AND MARKETING MODEL DEVELOPMENT		No	0	25,000	-25,000	
2							
3							
4							
5							
6							
7							
8							
9							
0							
otal	•		•		25,000	-25,000	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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. (a)Event #1 (b) Event #2 (c)Other events (d) Total events (add col (a) through (event type) (event type) (total number) col (c)) Revenue 1 Gross receipts. 2 Less Contributions. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) 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. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes 3 Noncash prizes Direct 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 If "Yes," explain _

sche	dule G (Form 990 or 990-EZ) 2016					F	age
L 1	Does the organization conduct gaming	activities with nonmember	s [?]		☐ Yes	□No	
.2	Is the organization a grantor, beneficing formed to administer charitable gamin		a member of a partnership or other entity		□Yes	□No	
.3	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			
4	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	cords			
	Name						
	Address •						
5a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			ganization $lacktriangle$ $\$$ and the	ne			
	amount of gaming revenue retained b	y the third party $ hildsymbol{\blacktriangleright}$ \$					
c	If "Yes," enter name and address of the	ie third party					
	Name ►						
	Address ►						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation $ ightharpoonup$ \$						
	Description of services provided						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under staretain the state gaming license?	te law to make charitable di	stributions from the gaming proceeds to		П.,	П.,	
b		ured under state law distribi	uted to other exempt organizations or spent		☐ Yes	⊔ No	
•	in the organization's own exempt activ						
Par	t IV Supplemental Information	on. Provide the explanat .5c, 16, and 17b, as app	tions required by Part I, line 2b, column dicable. Also complete this part to provid				_
	Return Reference		Explanation				_
		_1	Sched	ule G (F	orm 990 or	990-F7)	20

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN: 93493113008078
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Co	Governments mplete if the organize	Other Assistance and Individuals ation answered "Yes," o Attach to Form le I (Form 990) and its	s in the United on Form 990, Part IV, 1990.	d States , line 21 or 22.		OMB No 1545-0047 2016 Open to Public Inspection
Name of the organization						Employer i	identification number
DICKINSON COLLEGE						23-13659	54
Part I General Inform	ation on Grants	and Assistance					
the selection criteria used	to award the grants	or assistance?			for the grants or assistance	e, and	☑ Yes ☐ No
2 Describe in Part IV the org	· ·	_					
			ind Domestic Governme ditional space is needed	ents. Complete if the or	ganization answered "Yes"	on Form 990, Part	IV, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descriptio non-cash assist	
		-					2
						<u> ▶</u>	
For Paperwork Reduction Act Noti-	ce, see the Instructio	ns for Form 990.		Cat No 50055	iP		Schedule I (Form 990) 2016

Part III can be duplicated if additional space is needed

Schedule I (Form 990) 2016

Part IV Return Reference

PART I, LINE 2

SCHEDULE I, PART III

(d) Amount of

non-cash assistance

Explanation

BEING REQUESTED

STUDYING ABROAD

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

(c) Amount of

cash grant

TOWARD COLLEGE COSTS STUDENTS ARE ALSO EXPECTED TO CONTRIBUTE A PORTION OF THEIR ASSETS EACH YEAR FOR EDUCATIONAL EXPENSES SOME STUDENTS RECEIVE EDUCATIONAL BENEFITS FROM GOVERNMENTAL AGENCIES SUCH AS THE VETERANS' ADMINISTRATION AND STATE BUREAUS OF VOCATIONAL

GRANTS AND ASSISTANCE ARE APPLIED TO STUDENT ACCOUNTS AFTER THE START OF EACH SEMESTER OR TERM DOMESTIC GRANTS AND ASSISTANCE TO INDIVIDUALS REPORTED ON SCHEDULE I INCLUDE FINANCIAL AID PROVIDED TO STUDENTS STUDYING AT THE MAIN CAMPUS IN CARLISLE OR AT OTHER DOMESTIC PROGRAM LOCATIONS FOREIGN GRANTS AND ASSISTANCE TO INDIVIDUALS REPORTED ON SCHEDULE F INCLUDE FINANCIAL AID PROVIDED TO STUDENTS

REHABILITATION OR FROM PARENTS' EMPLOYERS IN THE FORM OF TUITION REMISSION. SUCH BENEFITS MUST BE TAKEN INTO CONSIDERATION WHEN DETERMINING THE FINANCIAL AID PACKAGE THE FINANCIAL AID AWARD NOTICE WILL LIST ALL THE FINANCIAL AID PROGRAMS FOR WHICH THE STUDENT IS ELIGIBLE THE AMOUNT OF FINANCIAL AID THAT THE STUDENT RECEIVES FROM THESE PROGRAMS DEPENDS ON THE STUDENT'S COMPUTED NEED. THE AMOUNT OF DICKINSON GRANT AND SCHOLARSHIP AID MAY ALSO BE INFLUENCED BY THE ACADEMIC ACHIEVEMENT AND PROMISE OF THE APPLICANT STUDENTS' FINANCIAL NEED IS RECALCULATED FOR EACH YEAR OF ATTENDANCE, AS A RESULT, AWARDED AMOUNTS OF NEED-BASED AID MAY VARY AS NEED CHANGES THE COLLEGE ATTEMPTS TO MAINTAIN APPROXIMATELY THE SAME AMOUNT OF DICKINSON GRANT FUNDS FROM YEAR TO YEAR UNLESS NEED CHANGES SIGNIFICANTLY THE STUDENT IS REQUIRED TO SUBMIT A PROFILE APPLICATION IF, AS A RESULT OF A SIGNIFICANT CHANGE IN FAMILY CIRCUMSTANCES, ADDITIONAL ASSISTANCE IS

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. DURING 2016-17, 71% OF THE TOTAL DICKINSON STUDENT BODY RECEIVED FINANCIAL AID FROM THE COLLEGE SINCE MOST OF THE COLLEGE'S GRANT AWARDS ARE MADE TO STUDENTS WITH DEMONSTRATED FINANCIAL NEED, THE MAJORITY OF THESE FUNDS SUPPLEMENTED THE CONTRIBUTION THAT ELIGIBLE FAMILIES MADE TOWARD TUITION, FEES, ROOM AND BOARD CHARGES THE COLLEGE'S INSTITUTIONAL METHODOLOGY USED TO DETERMINE ELIGIBILITY FOR GRANT FUNDS

CONSIDERS ADDITIONAL FACTORS BEYOND THE DATA ITEMS REQUESTED ON THE FAFSA THESE INCLUDE (BUT ARE NOT LIMITED TO) HOME EQUITY, A CONTRIBUTION FROM THE NONCUSTODIAL PARENT, AND IN THE CASE OF A FAMILY WITH MORE THAN ONE STUDENT IN COLLEGE, AN EVALUATION OF THE ACTUAL COSTS INVOLVED IN SUPPORTING THE OTHER STUDENT(S) PARENTS IN COLLEGE AND SIBLINGS IN GRADUATE SCHOOL ARE NOT NORMALLY COUNTED AS OTHER FAMILY MEMBERS IN COLLEGE DICKINSON EXPECTS EACH FINANCIAL AID RECIPIENT TO WORK DURING THE SUMMER AND CONTRIBUTE A MINIMUM OF \$2,000

Page 2

(f) Description of non-cash assistance

Schedule I (Form 990) 2016

Additional Data

CARLISLE, PA 17013

DOWNTOWN CARLISLE

53 WEST SOUTH STREET CARLISLE, PA 17013

ASSOCIATION

Software ID: Software Version: EIN: Name:

23-2224862

EIN: 23-1365954

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

Name: DICKINSON COLLEGE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
BOROUGH OF CARLISLE 53 WEST SOUTH STREET	23-6002842	GOVERNMENT	50,000		FMV		PAYMENT IN LIEU OF TAXES	

IFMV

GENERAL SUPPORT

52,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance GENERAL SUPPORT

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

OMB No 1545-0047

DLN: 93493113008078

2015

Open to Public Inspection

Department of the Treasury Internal Revenue

Schedule J (Form 990)

Employer identification number Name of the organization DICKINSON COLLEGE 23-1365954

Pa	art I Questions Regarding Compensation				
				Yes	No
la	Check the appropiate box(es) if the organization provided any of the 990, Part VII, Section A, line 1a Complete Part III to provide and				
	┌ First-class or charter travel ┌ House	ng allowance or residence for personal use			
	┌ Travel for companions ┌ Paym	ents for business use of personal residence			
	┌ Tax idemnification and gross-up payments ┌ Healt	h or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Perso	nal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization folloreimbursement or provision of all of the expenses described above		1 b	Yes	
2	Did the organization require substantiation prior to reimbursing or directors, trustees, officers, including the CEO/Executive Director	- '	2	Yes	
3	Indicate which, if any, of the following the filing organization used torganization's CEO/Executive Director Check all that apply Donused by a related organization to establish compensation of the CE	ot check any boxes for methods			
	Compensation committee	n employment contract			
	☐ Independent compensation consultant ☐ Comp	ensation survey or study			
	Form 990 of other organizations Appro	oval by the board or compensation committee			
Ļ	During the year, did any person listed on Form 990, Part VII, Sector a related organization	tion A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualifie	ed retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compens	ation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the appli	cable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must con	nplete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the compensation contingent on the revenues of				
a	The organization?		5a		Νo
	Any related organization?	<u> </u>	5b		No
_	If "Yes," on line 5a or 5b, describe in Part III	<u> </u>			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the compensation contingent on the net earnings of	ne organization pay or accrue any			
а	The organization?		6 a		Νo
b	Any related organization?		6b		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 payments not described in lines 5 and 6? If "Yes," describe in Par		7		Νo
3	Were any amounts reported on Form 990, Part VII, paid or accure	<u> </u>			
	subject to the initial contract exception described in Regulations s				
	ın Part III		8		Νo
•	If "Yes" on line 8, did the organization also follow the rebuttable pr	resumption procedure described in Regulations			
	section 53 4958-6(c)?		9		

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation i
	Base	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	(i) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prio
	(i) compensation	compensation	compensation				Form 990

See Additional Data Table

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015	Page 3								
Part III Supplemental Info	art 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								
PART I, LINE 1A	SCHEDULE J, PART I, LINE 1A COLLEGE OWNED HOUSING IS PROVIDED TO THE PRESIDENT AS A CONDITION OF EMPLOYMENT THE PRESIDENT'S HOUSE MANAGER IS RESPONSIBLE FOR KEEPING THE HOUSE SECURE, WELL-MAINTAINED, AND PHYSICALLY AND AESTHETICALLY COMFORTABLE FOR THE RESIDENTS AND VISITORS THIS PART-TIME POSITION IS ALSO RESPONSIBLE FOR SUPERVISING HOUSEKEEPERS, PROJECT CREWS, CATERING CREWS, OUTSIDE VENDORS PERFORMING WORK ON THE PROPERTY AND IN THE HOUSE, AND HOME REPAIR AND IMPROVEMENT CREWS THE FAIR VALUE OF HOUSING AND RELATED SERVICES ARE REPORTED IN COLUMN (D) AS NONTAXABLE COMPENSATION IN PART II FOR THE FORMER PRESIDENT (THE INTERIM PRESIDENT DID NOT RESIDE IN THE HOUSE)								
PART I, LINE 4A	PART I, LINE 4A - THE FOLLOWING INDIVIDUAL RECEIVED A SEVERANCE PAYMENT THIS AMOUNT IS INCLUDED IN REPORTABLE COMPENSATION ON SCHEDULE J, PART II NANCY A ROSEMAN \$217,812								

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 23-1365954

Name: DICKINSON COLLEGE

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

Form 990, Schedule J, Pa	art I	I - Officers, Direc	ctors, Trustees, Ke	ey Employees, and	d Highest Compen	sated Employees	5	
(A) Name and Title		(B) Breakdown of (i) Base Compensation	f W-2 and/or 1099-MIS (ii) Bonus & Incentive	(iii) O ther reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1NEIL B WEISSMAN	(1)	350,871	compensation 0	compensation 13,678	20,134	17,631	402,314	0
INTERIM PRESIDENT	(11)	0	0	0	0			0
1 BRONTE D BURLEIGH-JONES	(1)	281,514	0	2,253	20,217	0 8,354	312,338	0
VP FINANCE & ADMIN AND TREASURER	(11)	0	0	0	0	-		0
2SEAN M WITTE AVP FINANCE AND ASST	(1)	160,038	0	528	12,494	4,801	177,861	0
TREASURER	(11)	0	0	0	0			0
3KAREN NEELY FARYNIAK CHIEF OF STAFF AND	(1)	154,119	0	1,180	12,220	15,465	182,984	0
SECRETARY	(11)	0	0	0	0	0		0
4ROBERT P WINSTON INTERIM PROVOST AND DEAN	(1)	165,768	0	3,917	12,067	21,384	203,136	0
	(11)	0	0	0	0	0	- 0	0
5 JOYCE A BYLANDER VP STUDENT LIFE	(1)	212,205	0	5,677	16,524	14,764	249,170	0
COTTENANT DAVIS	(11)	0	0	0	0	0	0	0
6STEFANIE D NILES VP ENROLLMENT MANAGEMENT	(I) (II)	236,032	0	523	18,371	19,937	274,863	0
7ROBERT E RENAUD		217.027	0	U	0	0	0	
VP AND CIO	(I) (II)	217,027 0	0	4,752	14,184	8,595 	244,558	0
8KIRK I SWENSON	(1)	149,214	0	21.527	12.004	0	0	0
VP ADVANCEMENT	(11)	0		31,537	12,094	10,687 	203,532	0
9DANA E SCADUTO	(1)	253,688	0	26,689	19,316	2,423	302,116	0
GENERAL COUNSEL	(11)	0	0	0	0			0
10MICHAEL E REED VP INSTITUTIONAL	(1)	213,357	0	3,061	16,619	0 13,788	246,825	0
INITIATIVES	(11)	0	0	0	0			0
11BRIAN J WHALEN PRES/CEO FORUM ON EDUC	(1)	209,155	1,100	3,048	16,396	17,627	247,326	0
ABR OAD	(11)	0	0	0	0		-	0
12DAVID G STRAND PROFESSOR	(1)	162,880	0	4,206	12,798	13,951	193,835	0
	(11)	0	0	0	0			0
13BRIAN G FALCK AVP COLLEGE ADVANCEMENT	(1)	165,269	0	339	12,725	19,315	197,648	0
	(11)	0	0	0	0	- 0	- 0	0
14BRENDA K BRETZ FORMER ASST SECRETARY	(1)	120,580	0	1,711	9,797	16,785	148,873	0
	(11)	U	0	0	0	0	0	0
15NANCY A ROSEMAN FORMER PRESIDENT	(i) (ii)	211,636 	0	230,139	9,405	32,038	483,218	0
16KENNETH E SHULTES	1.1	107 224	0	0	0	0	0	0
FORMER VP CAMPUS OPERATIONS	(1)	187,221 0	0	966	14,917	45,322 	248,426	0
					ا	0	0	

efi	le GRAPHIC print - DO N	NOT PROCESS	As Filed Data -									DLN: 9	3493	11300	8078
	hedule K orm 990)			Information o					crintions				No 154		·
		r Complete ii		s, and any additional	informatio			Tovide des	criptions,						
	rtment of the Treasury nal Revenue Service	▶Informa	tion about Schedule	► Attach to Form 99 K (Form 990) and its		s is at <u>ı</u>	www.ir	rs.gov/fori	<u>11990</u> .				en to P nspect		
Name	e of the organization KINSON COLLEGE									Employ	er ident	tificatio	numbe	er	
										23-13	55954				
Pa	art I Bond Issues			T											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Description	on of purpose	e (g) De	feased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
Α	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	23061NCP0	03-31-2008	18,2	277,445	REFINA	ANCING			Х		X		X
В	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	23061NCR6	09-30-2009	10,0	000,000	CONST	TRUCTION			Х		Х		Х
	CUMBERLAND COUNTY	23-6003119	230614GB9	09-06-2012	40.4	180,007	REFINA	ANCING AN	D		Х		X		X
_	MUNICIPAL AUTHORITY	25 5555225			,	,	1	TRUCTION	-						^
D	CUMBERLAND COUNTY	23-6003119	230614KD0	03-31-2016	47,8	842,881	REFINA	ANCING			Х		Х		Х
	MUNICIPAL AUTHORITY														
Pa	rt III Proceeds	•	<u>'</u>				<u> </u>			' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		<u> </u>			
	A					A		E	3	С				D	
1	Amount of bonds retired. Amount of bonds legally determined.														
2	Total proceeds of issue .					10.37	7 40 4		10.000.000		10 501	620		47.	242.402
4	Gross proceeds in reserve fi					18,277	49		10,000,386		40,504,	90		47,8	343,102
 -	Capitalized interest from pr						49		17			90			222
6	Proceeds in refunding escro					18,048	211				15,028,	501		47	503,693
-	Issuance costs from procee					-	8,798		120,141		433,				338,853
8	Credit enhancement from p						3,730		120,141		733,	,,,,,,			330,033
9	Working capital expenditure														
10	Capital expenditures from p	roceeds							9,880,228		25,042,	.005			
11	Other spent proceeds						336		, ,		<u>, , , , , , , , , , , , , , , , , , , </u>				334
12	Other unspent proceeds .														
13	Year of substantial completi	on			2	800		20	10	201	.4			2016	
					Yes	No	,	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as p	art of a current refund	ding issue?		×				X	Х			Χ		
15	Were the bonds issued as p	art of an advance refu	unding issue?		Х				Х	Х			Х		
16	Has the final allocation of p	roceeds been made? .			Х			X		Х			Х		
17	Does the organization main proceeds?				Х			Х		Х			Х		
Par	TITTE Private Business	Use													
						A N		V		C			V	D	N.
1	Was the organization a part	ner in a partnership.	or a member of an LLC.	which owned property	Yes	No		Yes	No	Yes	No		Yes		No
_	financed by tax-exempt bor	nds?				X			X					4	
2	Are there any lease arrange property?			e of bond-financed		X			X						
For	Paperwork Reduction Act N)_	Ca	t No 5	0193F				S	chedul	K (Fo	rm 990) 2016

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?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

Arbitrage

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?......

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

Has the organization or the governmental issuer entered into a qualified

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 nonqualified bonds of

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

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

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

C

d

6

Part IV

c

Page 2

D

D

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Schedule K (Form 990) 2016

C

0 %

0 %

0 %

C

No

Χ

Χ

Х

Х

Χ

Χ

Х

Yes

Х

Χ Χ Х Χ

0 %

0 %

0 %

В

Yes

Χ

Χ

No

Х

Χ

Χ

Χ

Χ

Х

Χ

Χ

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

		Yes	No	Yes	
	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		
,	Name of provider				

THE REBATE COMPUTATION WAS PERFORMED 03/31/2017

Yes

No

No

Page 3

No Χ

D

D

No

Yes

Χ

Yes

Χ

Χ Χ Х Χ

Part V Procedures To	Undertake Corrective Action						
		-	4		В		С
		Yes	No	Yes	No	Yes	
Has the organization esta federal tax requirements voluntary closing agreem applicable regulations?	X		Х		X		
Part VII Supplement	al Information. Provide additional information fo	r responses	to questions	on Schedule	K (see instru	ıctıons).	
Return Reference	Ехр	lanation					
	TOCHED NAME CHMBEDLAND COUNTY MUNICIPAL AUT	LODITY DATE	THE DEDATE O	CMPLITATION	WAS DEDECOME		

PERFORMED 05/01/2017 ISSUER NAME CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE

COMPUTATION WAS PERFORMED 06/30/2017 ISSUER NAME CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE

ISSUER NAME CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED. 03/31/2017 ISSUER NAME CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS

DATE REBATE COMPUTATION PERFORMED

period?

Schedule K (Form 990) 2016

requirements of section 148? . . .

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Return Reference	Explanation
	TOTAL PROCEEDS OF EACH ISSUE DIFFER FROM THE ISSUE PRICE DUE TO ACCRUED INTEREST RECEIVED AT CLOSING, INVESTMENT EARNINGS ON FUNDS HELD BY THE TRUSTEE, OR A COMBINATION THEREOF

efi	le GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	34931	1300	8078		
	hedule K orm 990)		e organization ans	Information o	990, Part 1	[V, line 24	a. Provide						No 1545 201				
D	rtment of the Treasury				onal information in Part VI. n 990.							Open to Public					
Inter	nal Revenue Service	▶Informatio	n about Schedule	K (Form 990) and its		s is at <u>ww</u>	w.irs.gov/	form990.				I	nspectio	on			
	e of the organization KINSON COLLEGE									' '		tification	number	,			
-	Band Farms									23-136	55954						
P	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	nrico	(f) Doss	ription of purpo		(g) De	foocod	(h)	<u></u>	(i) I			
	(a) Issuer Hame	(D) ISSUEL EIN	(6) COSIP #	(d) Date issued	(e) issue	price	(I) Desc	iption of purpo	5e	(g) De	ieaseu	beha		finan			
										34		ISSL					
	CUMBERLAND COUNTY	23-6003119	230614ME6	02-15-2017	35.1	25 731 RE	FINANCING	AND CONSTRU	ICTION	Yes	No X	Yes	No X	Yes	No X		
_	MUNICIPAL AUTHORITY	23 0003113	2300111120	02 13 2017	33,1	23,731		TAND CONSTIN	2011011		^				^		
Pa	rt III Proceeds																
						A		В		С				D			
1	Amount of bonds retired																
2	Amount of bonds legally defeas	ed															
3	Total proceeds of issue					35,136,16	55										
4	Gross proceeds in reserve funds						4										
5	Capitalized interest from procee	eds															
6	Proceeds in refunding escrows .					12,796,58	38										
7	Issuance costs from proceeds .					315,59	93										
8	Credit enhancement from proce																
9	Working capital expenditures from																
10	Capital expenditures from proce					1,379,48	32										
11	Other spent proceeds																
12	Other unspent proceeds					20,630,94	14										
13	Year of substantial completion .																
					Yes	No	Yes	No	Y	es	No		Yes	 '	No		
14	Were the bonds issued as part of	of a current refunding	jissue [?]	•	Х												
15	Were the bonds issued as part of	of an advance refundi	ing issue?			X											
16	Has the final allocation of proce	eds been made? .				X											
17	Does the organization maintain proceeds?				Х												
Pai	TTIII Private Business Us	se															
						A		В		Ç				D			
1	Was the organization a partner financed by tax-exempt bonds?				Yes	No X	Yes	No	Y	es	No		Yes	+-'	No		
2	Are there any lease arrangement property?	nts that may result in	private business us			Х											
For	Panerwork Reduction Act Notic			1	Ca	t No 5019	13F				Sí	hedule	K (For	m 990	1 2016		

b

C

d

6

Part IV

c

Page 2

D

D

Schedule K (Form 990) 2016

Nο

Yes

Yes

C

No

Yes

C

Nο

Yes

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

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 nonqualified bonds of

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

organization, or a state or local government

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

Penalty in Lieu of Arbitrage Rebate? . . .

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

Rebate not due yet?

Exception to rebate?

hedge with respect to the bond issue?

Arbitrage

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

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

Yes

Χ

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Nο

Χ

Χ

0 %

0 %

0 %

В

Nο

Yes

Х

Χ

Yes

No

Procedures To Undertake Corrective Action

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

Schedule K (Form 990) 2016

applicable regulations?

Part V

Part VI

D

No

Yes

Schedule K (Form 990) 2015

Yes

No

No

Yes

Yes

Page 3

No

5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	X					
ь	Name of provider						
С	Term of GIC						
d	Was the regulatory safe harbor for establishing the fair market value of						

Yes

Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor the requirements of section 148? . . .

Yes

Х

No

No

Yes

Yes

No

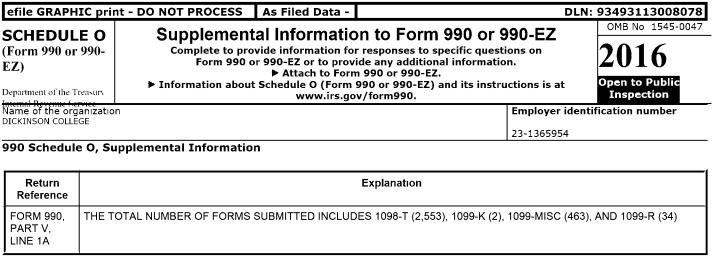
No

Х

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

efil	e GRAPHIC pr	int - DO NOT PF	ROCESS	As Filed Data -		DLN	9349311	3008	078
	IEDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)	▶Complete if the		ons answered "Yes" on Fo		9 or 30.	20	16)
		▶ Attach to Form	990.				_		
	tment of the Treasury al Revenue Service	▶Information abo	out Schedu	le M (Form 990) and its i	nstructions is at <u>www.irs</u>	a.gov/form990	Open to		
	e of the organizat INSON COLLEGE	ion				Employer iden	tification n	umbe	-
DICK	INSON COLLEGE					23-1365954			
Pa	rt I Types	of Property							
			(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) d of determi ontribution a		:s
1	Art—Works of art	t	Х	3	68,000	APPRAISED VA	LUE		
2	Art—Historical tr								
3	Art—Fractional ir				16.100	4.000 4.050 1/4			
4	Books and public Clothing and hou		X		16,108	APPRAISED VA	LUE		
5									
6	Cars and other v	ehicles							
7	Boats and planes	5							
8	Intellectual prope	•							
9	Securities—Public		X	64	233,577	FAIR MARKET	/ALUE		
	Securities—Close Securities—Partr	nership, LLC,							
12	or trust interest Securities—Misce								
	Qualified conserv contribution—Hi structures	vation istoric							
14	Qualified conserve contribution—Of	vation							
15	Real estate—Res	idential .							
16	Real estate—Cor								
17	Real estate—Oth				F 000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	=		
18	Collectibles . Food inventory		X	1	5,000	APPRAISED VA	LUE		
19 20	Drugs and medic								
21	Taxidermy .								
	Historical artifact	ts							
23	Scientific specim	ens							
24	Archeological art	ifacts							
	Other ▶ (ICAL INSTRUMEN	т \	X	1	17,500	APPRAISED VA	LUE		
26	Other • (
27	Other • (
28	Other ▶ ()							
29				ition during the tax year for B, Part IV, Donee Acknowled		29			5
	_					:		Yes	No
30a		-		y contribution any property r		-			
	ıt must hold for	at least three years	from the da	ate of the initial contribution,	, and which is not required t	to be used			
	for exempt purp	oses for the entire l	holding peri	od ⁷			. 30a		No
b	If "Yes," describ	e the arrangement	ın Part II						
31	Does the organi	zation have a gift ac	cceptance p	olicy that requires the review	v of any non-standard contr	ibutions?	31	Yes	
32a	Does the organi contributions?		nird parties	or related organizations to so	olicit, process, or sell nonca	sh • • •	32a	Yes	
b	If "Yes," describ	e ın Part II							
33	-	·	n amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								
For D	anerwork Peductic	on Act Notice, see the	- Instruction	s for Form 990	Cat No. 512271	Scha	dule M (Form	(100	2016)

Page 2 Schedule M (Form 990) (2016) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation THE NUMBER OF CONTRIBUTIONS REPORTED IN PART I, COLUMN (B) IS BASED ON THE NUMBER OF PART I, COLUMN (B) DONATIONS TO THE COLLEGE, AS OPPOSED TO THE NUMBER OF ITEMS DONATED PART I, LINE 32B MORGAN STANLEY'S BROKERAGE FIRM PROCESSES AND SELLS STOCK GIFTS RECEIVED BY THE COLLEGE Schedule M (Form 990) (2016)



Return Explanation
Reference

FORM 990, PART I, LINE FISCAL YEAR 2016-17 IN ADDITION TO MEMBERS OF THE BOARD OF TRUSTEES AND CAMPAIGN STEERING COMMITTEE, THE DICKINSON VOLUNTEER NETWORK INCLUDES OPPORTUNITIES IN ADMISSIONS, ADVANCEM ENT, COLLEGE RELATIONS AND THE CAREER CENTER

Doturn

Reference	Explanation
FORM 990,	THE FORM 990 IS PREPARED BY THE ASSISTANT CONTROLLER IN CONSULTATION WITH VARIOUS DEPARTME
PART VI,	NTS ON CAMPUS THE DRAFT 990 IS PRESENTED TO THE AVP OF FINANCE AND THE VP FOR FINANCE AND
SECTION B,	ADMINISTRATION, ALONG WITH THE COLLEGE'S TAX REVIEWERS AT KPMG LLP UPON COMPLETION OF TH
LINE 11B	EREVIEW AND ASSOCIATED REVISIONS, THE DRAFT 990 IS REVIEWED WITH THE SUBCOMMITTEE ON AUDI
	T AND COMPLIANCE VIA CONFERENCE CALL (AN ELECTRONIC COPY OF THE DRAFT IS PROVIDED TO EACH
	SUBCOMMITTEE MEMBER PRIOR TO THE CALL) THE FINAL DRAFT 990 IS THEN PROVIDED TO ALL VOTING
l	MEMBERS OF THE BOARD VIA THE TRUSTEE WEBSITE BEFORE FILING

Evolunation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH TRUSTEE, OFFICER, OR DESIGNATED PERSON IS EXPECTED TO REPORT PROMPTLY TO THE PRESIDEN TO THE COLLEGE OR TO THE CHAIRMAN OF THE BOARD OF TRUSTEES THE EXISTENCE OF ANY BUSINESS RELATIONSHIP OR INTEREST, AS IT ARISES, WHICH ACTUALLY OR POTENTIALLY INVOLVES OR MAY APP EAR TO INVOLVE A CONFLICT OF INTEREST EACH TRUSTEE, OFFICER AND DESIGNATED PERSON IS ASKE D TO SIGN A STATEMENT OF DISCLOSURE REFLECTING HIS OR HER AWARENESS AND UNDERSTANDING OF THE COLLEGE'S STATEMENT OF POLICY ON CONFLICTS OF INTEREST, AND COMPLIANCE WITH IT, ON AN A NNUAL BASIS DESIGNATED PERSONS INCLUDE, BUT ARE NOT LIMITED TO, KEY EMPLOYEES OF THE COLL EGE AS REPORTED ON FORM 990 EACH ACTUAL OR POTENTIAL CONFLICT SHALL BE ADDRESSED ON A CAS E-8Y-CASE BASIS IN CONTEXT OF THE PERTINENT FACTS NO CONTRACT OR TRANSACTION BETWEEN THE COLLEGE AND ONE OR MORE OF ITS TRUSTEES, OFFICERS OR DESIGNATED PERSONS SHALL BE VOID OR V OIDABLE SOLELY FOR SUCH REASON AS LONG AS ONE OF THE FOLLOWING CONDITIONS EXIST 1 WHERE THE NATURE OF THE CONFLICT IS SUCH THAT THE INDIVIDUAL INVOLVED IS NOT ABLE TO DISCLOSE THE DETAILS THEREOF WITHOUT BREACHING OTHER CONFIDENCES, HE MUST, UPON NOTICE TO THE PRESIDE NT OF THE COLLEGE OR THE CHAIRMAN OF THE BOARD OF TRUSTEES, REMOVE HIMSELF FROM ALL MEETIN GS, DISCUSSIONS, DELIBERATIONS AND ACTIONS AT WHICH THE MATTER IS CONSIDERED, 2 THE MATER IAL FACTS AS TO SUCH RELATIONSHIP OR INTEREST, AND AS TO THE CONTRACT OR TRANSACTION, ARE DISCLOSED OR ARE KNOWN TO THE BOARD AND THE BOARD IN THE BOARD AND THE BOARD OR RATIFIED BY THE BOA RD COMMON OR INTERESTED TRUSTEES ARE LESS THAN A QUORUM, OR 3 THE CONTRACT OR TRANSACTION WHEN IT I SAUTHORIZES. A PROVED THAT A CONFILE BOA RD THE THE BOA RD COMMON OR INTERESTED TRUSTEES WHICH AUTHORIZES A CONTRACT OR TRANSACTION WHEN IT I SCONCLUDED THAT A CONFILE BOA RD FROM THE BOARD OF FROM THE BOARD OF FROM THE BOARD OF FROM THE BOARD OF TRUSTEES WHICH AUTHORIZES A CONTRACT OR TRANSACTION WHEN IT I SCONCLUDED THAT A CONFILE

Return

Reference	·
PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES SUBCOMMITTEE ON EXECUTIVE COMPENSATION (THE "SUBCOMMITTEE") HOLDS A CONFERENCE CALL ON AN ANNUAL BASIS TO REVIEW THE TOTAL COMPENSATION PACKAGES FOR THE PRESI DENT AND SENIOR OFFICERS OF THE COLLEGE PRIOR TO THE CALL, SUBCOMMITTEE MEMBERS ARE PROVI DED WITH COMPARATIVE COMPENSATION DATA FROM TWO SEPARATE HIGHER EDUCATION EXECUTIVE COMPEN SATION SURVEYS THE SUBCOMMITTEE REVIEWS THE SURVEYS AND DISCUSSES A PROPOSED COMPENSATION PACKAGE FOR THE PRESIDENT (THE PRESIDENT PROPOSES COMPENSATION PACKAGES FOR SENIOR OFFICE RS) THE SUBCOMMITTEE'S RECOMMENDATIONS ARE PRESENTED TO THE BOARD OF TRUSTEES EXECUTIVE C OMMITTEE FOR APPROVAL DURING THE SPRING BOARD MEETINGS UPON APPROVAL, A LETTER FROM THE B OARD CHAIR IS SENT TO THE AVP FOR HUMAN RESOURCE SERVICES TO CONFIRM THE APPROVED COMPENSATION FOR THE PRESIDENT AND SENIOR OFFICERS FOR THE UPCOMING FISCAL YEAR BEGINNING JULY 1 THE AVP FOR HUMAN RESOURCE SERVICES MAINTAINS THE ORIGINAL COPY OF THE COMPENSATION LETTER , ALONG WITH ALL OTHER INFORMATION PROVIDED TO THE SUBCOMMITTEE IN SUPPORT OF ITS REVIEW MINUTES ARE DOCUMENTED FOR BOTH THE CALL AND THE MEETING

Explanation

Explanation Return Reference

FORM 990. FORM 1023, 990 AND 990-T ARE MADE AVAILABLE UPON REQUEST FORM 990 IS ALSO AVAILABLE ON PART VI. WWW GUIDESTAR ORG

SECTION C. LINE 18

990 Schedule O, Supplemental Information

Return Explanation
Reference

FORM 990, THE COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS A RE MADE AVAILABLE UPON REQUEST IN ADDITION, THE COLLEGE'S AUDITED FINANCIAL STATEMENTS AR SECTION C, LINE 19

Return Explanation
Reference

FORM 990, PART XI, LINE 9

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493113008078 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** DICKINSON COLLEGE 23-1365954 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity **(b)** Primary activity (c) Legal domicile (state (d) (e) End-of-year assets Total income or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	is Complete if the orga	anization answered "	Yes" on Form 990,	Part IV, line 34 be	cause it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	ntrolled ity?
(1)SANDIA FOUNDATION 6211 SAN MATEO BLVD NE SUITE 100 ALBUQUERQUE, NM 87109 85-6009907	FOUNDATION	NM	501(C)(3)	LINE 12D, III-O	N/A	Yes	No No
							_
For Paperwork Reduction Act Notice, see the Instructions for Form 9	990.	Cat No 50135			Schedule R (Form	990) 20	016

(a) Name, address, and E related organizatio		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(I Disprop alloca		(i) Code V-UI amount in b 20 of Schedule K (Form 106	oox ma pa -1	(j) neral or anaging artner?		nta
					1 31.7			Yes	No	1	Ye	s No	-	
												_		
						•								
						zation ansv	vered "Yes	" on F	orm 9	90, Part I	V, lın	e 34		
t IV Identification of Related Or because it had one or more rel (a) Name, address, and EIN of related organization		a corporation	on or tru (c) Legal omicile	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	vered "Yes (f) Share of total Income	Share	(g) e of end- year	-of- Per	(h) centag	le s	(i) Section 5 (13) cont	512 trol
because it had one or more rel (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	a corporation do do (state	(c) Legal Domicile For foreign Dountry)	st during th	(d) t controlling Typentity (C co	(e) e of entity	(f) Share of total	Share	(g) e of end	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	trol ty? N
because it had one or more rel (a) Name, address, and EIN of related organization	ated organizations treated as (b)	a corporation do do (state	(c) Legal omicile or foreign	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	512(trol l
because it had one or more rel (a) Name, address, and EIN of related organization ARITABLE REMAINDER TRUST (8)	ated organizations treated as (b) Primary activity	a corporation do do (state	(c) Legal Domicile For foreign Dountry)	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	trol ty? N
because it had one or more rel (a) Name, address, and EIN of related organization ARITABLE REMAINDER TRUST (8) OLED INCOME FUND (2)	ated organizations treated as (b) Primary activity ANNUITY	a corporation do (state	on or tru (c) Legal comicile or foreign cuntry) PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) configuration from the section from the	No
because it had one or more rel (a) Name, address, and EIN of related organization HARITABLE REMAINDER TRUST (8) POLED INCOME FUND (2)	ated organizations treated as (b) Primary activity ANNUITY ANNUITY	a corporation do (state	on or tru (c) Legal bricile or foreign buntry) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) configuration from the section from the	troll y ² No
because it had one or more rel (a) Name, address, and EIN of related organization ARITABLE REMAINDER TRUST (8) OLED INCOME FUND (2) RPETUAL TRUST (3)	ated organizations treated as (b) Primary activity ANNUITY ANNUITY	a corporation discontinuous contractions discontinuous contraction contraction contraction contraction contraction contraction co	on or tru (c) Legal bricile or foreign buntry) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	No
Decause it had one or more rel (a) Name, address, and EIN of related organization HARITABLE REMAINDER TRUST (8) DOLED INCOME FUND (2) REPETUAL TRUST (3)	ANNUITY PERPETUAL TRUST	a corporation discontinuous contractions discontinuous contraction contraction contraction contraction contraction contraction co	con or tru (c) Legal conicile or foreign country) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	No
because it had one or more rel (a) Name, address, and EIN of related organization ARITABLE REMAINDER TRUST (8) OLED INCOME FUND (2) RPETUAL TRUST (3)	ANNUITY PERPETUAL TRUST	a corporation discontinuous contractions discontinuous contraction contraction contraction contraction contraction contraction co	con or tru (c) Legal conicile or foreign country) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	No
Decause it had one or more rel (a) Name, address, and EIN of related organization HARITABLE REMAINDER TRUST (8) DOLED INCOME FUND (2) REPETUAL TRUST (3)	ANNUITY PERPETUAL TRUST	a corporation discontinuous contractions discontinuous contraction contraction contraction contraction contraction contraction co	con or tru (c) Legal conicile or foreign country) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	No
(a) Name, address, and EIN of	ANNUITY PERPETUAL TRUST	a corporation discontinuous contractions discontinuous contraction contraction contraction contraction contraction contraction co	con or tru (c) Legal conicile or foreign country) PA PA	st during th	(d) t controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h) centag	le s	Section 5 (13) cont entity Yes	No

Schedule R (Form 990) 2016		Pa	age 3
Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		\top	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	. 1	a	No
b Gift, grant, or capital contribution to related organization(s)	. 1	ь	No
c Gift, grant, or capital contribution from related organization(s)		c	No
d Loans or loan guarantees to or for related organization(s)		d	No
e Loans or loan guarantees by related organization(s)	1	e	No
f Dividends from related organization(s)	1	f	No
g Sale of assets to related organization(s)	1.	g	No
h Purchase of assets from related organization(s)	11	h	No
i Exchange of assets with related organization(s)	1	i	No

e	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No
		$\overline{}$	

	1 1	
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1 g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	10	No
	 	

g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	\vdash	No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	i	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p	\vdash	No
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No

Р	Reimbursement paid to related organization(s) for expenses				1p	No
q	Reimbursement paid by related organization(s) for expenses				1q	No
						i
r	Other transfer of cash or property to related organization(s)				1r	No
s	Other transfer of cash or property from related organization(s)				1s	No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, include	ding covered r	elationships and tra	nsaction thresholds		
	(a)	(b)	(c)	(d)		
		ansaction /pe (a-s)	Amount involved	Method of determining amo	unt involved	
		•				

Schedule R (Form 990) 2016

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g }	(k) Percentage ownership
		'	514)	Yes	No	<u> </u>	<u> </u>	Yes	No		Yes	No	
										Schedul	e R (Form	1 990)) 2016

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016