efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

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

DLN: 93493135077868 OMB No 1545-0047

Open to Public

Department of the Treasur Internal Revenue Service

▶ Information about Form 990 and its instructions is at www IRS gov/form990 Inspection For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017 C Name of organization LAFAYETTE COLLEGE D Employer identification number ☑ Address change 24-0795686 ☐ Name change Doing business as ☐ Initial return Deturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 730 SULLIVAN ROAD 030 MARQUIS HALL. ☐ Amended return (610) 330-5957 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code EASTON, PA 180421798 G Gross receipts \$ 369,174,578 F Name and address of principal officer H(a) Is this a group return for DR ALISON BYERLY ☐Yes ☑No subordinates? 730 SULLIVAN ROAD 030 MARQUIS HALL H(b) Are all subordinates EASTON, PA 180421798 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW LAFAYETTE EDU L Year of formation 1826 M State of legal domicile PA Summary 1 Briefly describe the organization's mission or most significant activities PROVÍSION OF EDUCATIONAL SERVICES AS AN ACCREDITED FOUR-YEAR UNDERGRADUATE COLLEGE Activities & Governance Check this box 🕨 🗌 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 2,473 Total number of volunteers (estimate if necessary) . . . 6 2,195 7a Total unrelated business revenue from Part VIII, column (C), line 12 . -12,404 **7**b **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 27,747,289 8 Contributions and grants (Part VIII, line 1h) . 40,798,536 **9** Program service revenue (Part VIII, line 2g) . . . 149,725,635 158,075,417 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 48,150,680 60,364,121 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,342,548 2,224,245 226,966,152 261,462,319 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 40,424,445 43,500,173 Benefits paid to or for members (Part IX, column (A), line 4) . 88,407,811 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 85,378,421 250,792 250,792 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶5,178,463 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 71,211,887 76,322,653 197,265,545 208,481,429 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 52,980,890 19 Revenue less expenses Subtract line 18 from line 12 . 29,700,607 Assets or d Balances **Beginning of Current Year End of Year** 1,332,988,727 20 Total assets (Part X, line 16) . 1,169,089,515 391,197,376 21 Total liabilities (Part X, line 26) . 312,617,204 856,472,311 941,791,351 22 Net assets or fund balances Subtract line 21 from line 20 . Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-05-15 Signature of officer

Paid **Preparer** Use Only

Sign Here

Print/Type preparer's name KAREN GRIES Preparer's signature KAREN GRIES Date PTIN Check \Box if P00078514 self-employed Firm's name CLIFTONLARSONALLEN LLP Firm's EIN ► 41-0746749 Firm's address ► 610 W GERMANTOWN PIKE STE 400 Phone no (215) 643-3900 PLYMOUTH MEETING, PA 19462 May the IRS discuss this return with the preparer shown above? (see instructions) . ✓ Yes 🗆 No

CRAIG BECKER ASSOC VP - FINANCE & BUSINESS

Type or print name and title

Form	990 (2	016)					Page 2
Par	t III	Statement of	f Program Servi	ce Accomplis	hments		
		Check If Schedu	le O contains a resp	onse or note to	any line in this Part III		<u>V</u>
1	Briefly	describe the org	anızatıon's mıssıon				
SEE S	SCHEDU	JLE O					
2	Dıd th	e organization un	idertake any signific	ant program ser	vices during the year wh	nich were not listed on	
	the pr	or Form 990 or 9	990-EZ?				🗌 Yes 🗹 No
	If "Yes	s," describe these	new services on Sc	hedule O			
3					changes in how it condu	ıcts, any program	
							☐ Yes ☑ No
			changes on Schedu				
4	Sectio	n 501(c)(3) and !		ons are required	I to report the amount o	largest program services, as mea f grants and allocations to others	
4a	(Code) (Expenses \$	146,533,363	including grants of \$	43,500,173) (Revenue \$	127,054,679)
	See Ad	ldıtıonal Data					
4b	(Code) (Expenses \$	30,884,171	ıncludıng grants of \$	0) (Revenue \$	31,020,738)
	See Ad	ldıtıonal Data					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-						
4d			s (Describe in Sched	•			
	• •	nses \$		luding grants of) (Revenue \$)
4e	Total	program servic	e expenses 🟲	177,417,5	i34		

or X as applicable

ete

Par	t IV 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," comple

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

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?

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

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

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

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

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

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

Yes

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4

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

Nο

Νo

No

Nο

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Nο

Nο

Page 3

No

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 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

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,

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

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of 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,"

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

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

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

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

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

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

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

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,

Yes

Nο No

6 7 Yes R Yes 9 10 Yes

Yes Yes No Yes

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Form	990 (2016)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	.0a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	оь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	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	.4a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	4ь		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?	.4с		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	4d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			

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

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

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

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

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 🛸

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

If "Yes," complete Schedule N, Part II

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

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

complete Schedule L, Part I 🥞

instructions for applicable filing thresholds, conditions, and exceptions)

25a No

Nο

Νo

Nο

Νo

No

Nο

Nο

Nο

Nο

Nο

Nο

Νo

25b

26

27

28a

28b

28c

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30

31

32

33

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35a

35b

36

37

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Yes

Yes

Yes

Yes

Yes

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•		
_	5 · · · · · · · · · · · · · · · · · · ·	$\overline{}$	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2,278 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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 2.473			
L	this return	2 _b	Yes	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►BD , CJ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
·	If res, to fine 3a of 3b, did the organization me Form 6660-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	 		110
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
3		1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
а	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
a b	additional information the organization must report on Schedule O 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	13a		
a b c	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		No

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Part	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to li	
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Sec	tion 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 1a 34		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 33			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	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
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b .	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
Sec	t ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>∍ Code</u>		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	4.2	V	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	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	
	Did the organization have a written whistleblower policy?	13	Yes	
	Did the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	166		
Sac	ction C. Disclosure	16b		
	List the States with which a copy of this Form 990 is required to be filed			
18	PA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection Indicate how you made these available. Check all that apply			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ▶CRAIG BECKER 730 SULLIVAN ROAD 030 MARQUIS HALL EASTON, PA 180421798 (610) 330-5957			
				- /224

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
La Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's	tax

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(C)

(D)

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

(F)

(E)

1325 CLAY ST BETHLEHEM, PA 18018

compensation from the organization ▶ 87

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Form 990 (20	•													Page 8
Part VII	Section A. Officers, Direct	ors, Trustees	, Key I	Emp	loye	:es,	and	High	nest Compen	sate	d Employees (con	tınued)	
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	Position (do not check more than one box, unless person is both an officer and a director/trustee)						on (W-	(E) Reportable compensation from related organizations (V	w-	Estima amount o compens from	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	- 2/1099-MIS	,	2/ 1057-11130/	,	organizati relati organiza	ed
See Additiona	l Data Table				\vdash			\dagger				+		
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	om continuation sheets to Pa	art VII, Section		· .			*	<u> </u>	. 272 76			1		
2 Total r	number of individuals (including ortable compensation from the	but not limited	l to thos				e) who	rec	4,979,76 eived more tha			0		753,884
 [_	Yes	No
	e organization list any former o a? <i>If "Yes," complete Schedule J</i>						oyee, d	or hi	ghest compens	ated	employee on	3		No
	y individual listed on line 1a, is zation and related organization: dual										the	4	Yes	
	ny person listed on line 1a receives rendered to the organization									r ındı	vidual for	5		No
	B. Independent Contract				_	_		_						
	ete this table for your five higher he organization Report comper											npen	sation	
		(A) and business addre				<u> </u>	111	<u>·</u>			(B)		(C Compen	
BON APPETIT N	MANAGEMENT COMPANY	.Hu bushicii	:55						DININ		•			,404,014
PO BOX 41763 BOSTON, MA	· -				_			_				_		
DEL VALLEY PR	ROPERTIES INC								CONS	TRUCT	ION		5	,659,298
379 RT 3 31 N RINGOES, NJ IRWIN & LEIGH	08551								CONS	TRUCT	TON		3	3,519,809
KING OF PRUS	ENTAL DRIVE 1 SSIA, PA 19406													
290 CONGRESS	S ST								CONST	FRUCT	ION		3,	3,336,287
WEST SIDE HA	MMER ELECTRIC INC								CONST	TRUCT	ION		1	,248,682

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

		. (2010)											rage s
Part	V							D 1 1/77					
		Check if Schedul	e O contains	a respo	onse or note	e to any	(A			(B)	• •	c)	
							Total re		Rela	ited or	Unre	elated	Revenue
										empt action		iness enue	excluded from tax under sections
	1.			1 1						enue			512-514
र र	1	La Federated campaig		1a									
anjan		b Membership dues		1 b									
وَ ق		c Fundraising events		1c		50,300							
fts,		d Related organizatio	ns	1d									
tributions, Gifts, Grants Other Similar Amounts		e Government grants (co	ontributions)	1e	2,5	21,870							
Contributions, Gifts, Grants and Other Similar Amounts		f All other contributions,											
atio er		and similar amounts n above	ot included	1 f	38,2	26,366							
혈		g Noncash contribution	ons included										
Conti		ın lınes 1a-1f \$		3,13	<u>86,574</u>								
<u>ت</u> ک		h Total. Add lines 1a-1	.f		>	<u> </u>	40,7	98,536					
<u> 1</u>					E	Business	Code						
₩.	2	a TUITION AND FEES					611710	124,	412,387	124,41	.2,387		
Service Revenue	ı	b AUXILIARY SERVICES					611710	31,	020,738	31,02	.0,738		
<u>ر</u> و	•	ATHLETICS/SPORTS NE	TWORK				611710		751,158		1,158		
Ž	١	d CENTER FOR TALENTED	YOUTH				611710	-	891,134	89	1,134		
Ε		e ———		_									
Program	1	f All other program se	rvice revenue	2									
Æ	ç	Total.Add lines 2a-2f	f		>	158,0	75,417						
	3	Investment income (ii	ncluding divid	lends, ı	nterest, an	d other	1						
		sımılar amounts) .		•		>	<u> </u>	8,574,01	7			-33,008	8,607,02
		Income from investme		-	ond proceed								
	5	Royalties											
	ے	a Cross routs	(ı) Rea	ıl	(II) Per:	sonal	-						
	0	a Gross rents		317,540									
		b Less rental expenses	!	570,088									
		Dantal masses an		247 452			_						
		c Rental income or (loss)		247,452									
		d Net rental income o	r (loss)			•	1	247,45	2				247,452
			(ı) Securi	ties	(II) Ot	her							
	7	a Gross amount from sales of	157/	227 020		0.220]						
		assets other	157,0	027,029		9,329							
		than inventory											
		b Less cost or other basis and	105,2	246,254		C	,						
		sales expenses	51	780,775		9,329	-						
		c Gain or (loss)d Net gain or (loss)					1	51,790,10	4				51,790,104
		a Gross income from fi				<u> </u>	<u> </u>						,,
<u>a</u>		(not including \$	50,300	of									
Other Revenue		contributions reporte See Part IV, line 18	ed on line 1c)	. a	ļ	111,381							
e		b Less direct expense		. и Ь		39,010	-						
<u>ب</u> ت		c Net income or (loss)			ents	· •	J	72,37	1				72,37:
the		a Gross income from g					1						
0		See Part IV, line 19			ļ								
				a			_						
		b Less direct expense		b			_						
		c Net income or (loss) Pa Gross sales of invent		activit		<u> </u>	1						
	_	returns and allowand											
				а	1	,928,504							
		b Less cost of goods s	sold	b	1	,856,907							
		c Net income or (loss)		finvent		<u> </u>		71,59	7			6,229	65,368
	L	Miscellaneous			Business		_						
	1	1afees, fines and C	OST RECOVE	RY		900099	'	418,25	5			14,375	403,880
		b											
												l	
		с											
												l	
		d All other revenue .						1,414,57	0				1,414,570
		e Total. Add lines 11a	-11d			>		1 022 02	_				
	1	2 Total revenue. See	Instructions					1,832,82					
							[2	261,462,31	9	158,075,417	'[-12,404	62,600,770 Form 990 (2016

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	lete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	43,344,289	43,344,289		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	155,884	155,884		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,643,337	510,680	2,804,365	328,292
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	62,291,254	51,439,892	8,399,469	2,451,893
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	5,817,135	4,588,766	976,960	251,409
9 Other employee benefits	12,036,875	9,472,341	2,039,653	524,881
10 Payroll taxes	4,619,210	3,643,800	775,774	199,636
11 Fees for services (non-employees)				
a Management				
b Legal	648,357	9,700	616,812	21,845
c Accounting	153,253		153,253	
d Lobbying	252 722			250 700
e Professional fundraising services See Part IV, line 17	250,792		704.045	250,792
f Investment management fees	701,945	10.202.226	701,945	407.200
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,855,496	10,203,336	2,464,772	187,388
12 Advertising and promotion	125,084	80,486	40,298	4,300
13 Office expenses	2,315,005	1,490,053	536,820	288,132
14 Information technology	1,398,601	250,647	1,146,645	1,309
15 Royalties	4,856,806	4,733,652	123,154	
16 Occupancy		4,604,537	797,447	272.000
17 Travel	5,674,053	4,604,537	797,447	272,069
19 Conferences, conventions, and meetings	1,431,326	716,626	453,739	260,961
20 Interest	9,535,093	9,326,171	208,922	
21 Payments to affiliates		, ,	,	
22 Depreciation, depletion, and amortization	15,892,497	14,545,732	1,346,765	
23 Insurance	1,340,622	777,401	559,572	3,649
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 AUXILIARY SERVICES	8,404,919	8,404,919		
b MISCELLANEOUS EXPENSES	7,450,195	6,503,682	814,606	131,907
c NON OFFICE SUPPLIES	2,645,049	2,614,940	30,109	
d ALLOCATION OF INDIRECT	894,352		894,352	
e All other expenses				
Total functional expenses. Add lines 1 through 24e	208,481,429	177,417,534	25,885,432	5,178,463
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)				
	1			

Form **990** (2016)

Page **11**

4,685,202

3.041.578

4.828.432

88.019.357

391,197,376

289,448,387

322,626,734

329.716.230

941,791,351

1.332.988.727

Form **990** (2016)

276,152,536

Form 990 (2016)

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Liabilities 22

Fund Balances

Assets or 30

Net

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

Tax-exempt bond liabilities

persons Complete Part II of Schedule L . .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

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

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

check in Schedule & contains a response of flote to any line in this rate ix		•	· · · · · —
	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	29,564	1	41,926
2 Savings and temporary cash investments	28,835,264	2	46,662,760
3 Pledges and grants receivable, net	19,414,998	3	31,261,878

Accounts receivable, net . . . 3,666,570 3,492,356 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part 5 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 Assets Notes and loans receivable, net Inventories for sale or use . . . 655.619 8 694.381 2.997.291 9 3,225,588 Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other 544,137,644 10a basis Complete Part VI of Schedule D 232.589.864 293.284.051 10c 311,547,780 b Less accumulated depreciation 10b 217.726.058 273.481.876 11 Investments—publicly traded securities . 11

594.532.379 579,227,396 12 12 Investments—other securities See Part IV, line 11 . 1.452.694 3.341.463 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 6.495.027 15 15 80.011.323 Other assets See Part IV, line 11 1,169,089,515 1,332,988,727 16 Total assets. Add lines 1 through 15 (must equal line 34) . . 16 17 Accounts payable and accrued expenses 9,968,143 17 12,403,571 18 2,142,044 18 2,066,700 Grants payable . . .

5,362,682

2.590.483

4.643.997

95.067.736

312,617,204

251.031.675

293.805.832

311.634.804

856,472,311

1.169.089.515

192,842,119

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

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

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

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

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

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

☐ Both consolidated and separate basis

2b

2c

3a

3b

Yes

Yes

Yes

Yes (2016)

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

Name: LAFAYETTE COLLEGE

EIN: 24-0795686

Form 990 (2016)

Form 990, Part III, Line 4a:

LAFAYETTE COLLEGE IS A LIBERAL ARTS COLLEGE OFFERING BACHELOR OF ARTS AND BACHELOR OF SCIENCE DEGREES IN FOUR DISCIPLINES IN HUMANITIES. ENGINEERING, NATURAL SCIENCES, AND SOCIAL SCIENCES IN FALL 2016, THE 2,550 FULL-TIME STUDENTS CAME FROM 45 STATES AND 59COUNTRIES THE STUDENT-TO-FACULTY RATIO AT THE COLLEGE IS APPROXIMATELY 10 TO 1 224 OF THE 229 FULL-TIME FACULTY HOLD A DOCTORATE OR OTHER TERMINAL DEGREE APPROXIMATELY 47% OF THE STUDENTS ATTENDING LAFAYETTE COLLEGE RECEIVE FINANCIAL ASSISTANCE 591 STUDENTS WERE AWARDED AN UNDERGRADUATE DEGREE LAFAYETTE COLLEGE HAS A FOUR-YEAR GRADUDATION RATE OF 86% AND SIX-YEAR GRADUATION RATE OF 90%. APPROXIMATELY 96% OF THE COLLEGE'S

GRADUATES WERE EMPLOYED, IN GRADUATE SCHOOL, OR SECURED INTERNSHIPS WITHIN 6 MONTHS AFTER GRADUATION

AS A RESIDENTIAL COLLEGE, LAFAYETTE STUDENTS COMPLIMENT THEIR ACADEMIC SCHOLARSHIP WITH MYRIAD OPPORTUNITIES TO CONNECT WITH ONE ANOTHER AND LEARN FROM THE LARGE WORLD REPRESENTED ON THE COLLEGE'S CAMPUS AS PART OF THEIR EXPERIENCE AT A RESIDENTIAL COLLEGE, LAFAYETTE STUDENTS ARE DEEPLY ENGAGED ACADEMICALLY AND HAVE SIGNIFICANT OPPORTUNITIES TO ENGAGE IN A VAST OFFERING OF EXTRACURRICULAR AND CO-CURRICULAR

POSSIBILITIES LAFAYETTE COLLEGE OFFERS MORE THAN 250 STUDENT CLUBS AND ORGANIZATIONS, 23 NCAA DIVISION 1 ATHLETIC PROGRAMS, AND NUMEROUS

EXPERIENCES IN THE FINE ARTS AND PERFORMING ARTS ALL OF WHICH ARE COMPLIMENTED BY A STRONG STUDENT LIFE PROGRAM THAT ENHANCES THE LAFAYETTE EXPERIENCE BEYOND THE CLASSROOM

Form 990, Part III, Line 4b:

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related 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 Institutional organizations MISC) MISC) related below dotted organizations line)

EDWARD W AHART	5 00	x	Х		0	0	
CHAIR		,,	^				
ROBERT E SELL	5 00	X	Х		0	0	
VICE CHAIR		,	^		J		
NANCY J KUENSTNER	5 00		(

ROBERT E SELL	5 00	×	Ų			
VICE CHAIR		_ ^	^			
NANCY J KUENSTNER	5 00	l ,	v		0	
SECRETARY		_ ^	^			
SAMUEL R CHAPIN	3 00					

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BARBARA LEVY

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

DONALD E MOREL JR

ANGEL L MENDEZ

ELISABETH H MACDONALD

NANCY J KUENSTNER	5 00	×	×		0	0	
SECRETARY		^			3	3	
SAMUEL R CHAPIN	3 00				0	0	
EXECUTIVE COMMITTEE		_ ^			0	0	
JAMES R FISHER	3 00						

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LEO A HELMERS	3 00						

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

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STEPHEN D PRYOR EXECUTIVE COMMITTEE	3 00	×			0	0	(
JB REILLY	3 00	×			0	0	
EXECUTIVE COMMITTEE		_ ^				0	·
SYLVIA DANIELS WEAVER	3 00						

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EXECUTIVE COMMITTEE		,,	
JB REILLY	3 00		
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EXECUTIVE COMMITTEE		,	
SYLVIA DANIELS WEAVER	3 00		
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EXECUTIVE COMMITTEE		,,	
JAMES L BENJAMIN	2 00		

TRUSTEE

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JOHN A FRY

MICHAEL C HEANEY

SUSAN L FOX

JAMES R BIRLE JR

HARRY S CHERKEN

LINDA ASSANTE CARRASCO

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

				_			
GEORGE M JENKINS TRUSTEE	2 00	×			0	0	
HAROLD N KAMINE TRUSTEE	2 00	x			0	0	
CLAUDINE C LILIEN TRUSTEE	2 00	x			0	0	
JUDSON C LINVILLE	2 00	V			0	0	

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KEVIN R MANDIA

CYNTHIA Y PAIGE

PAMELA S PASSMAN

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DAVID A REIF

S KENT ROCKWELL

TRUSTEE						
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BRUCE MAGGIN	2 00	,			0	
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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 person is both an officer week (list from the from related any hours and a director/trustee) organization organizations

(F)

Estimated

compensation

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

	any hours for related		a dır	ecto	r/tr	ustee)	organization	organizations	from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DAVID M ROTH	2 00	x						0	0	0	
TRUSTEE											
WYNNE A WHITMAN TRUSTEE	2 00	x						0	0	0	
	2.00			$\overline{}$							

DAVID M ROTH	2 00	×			0	0	
TRUSTEE		^					
WYNNE A WHITMAN	2 00	l 🗸			0	0	
TRUSTEE		_ ^			Ĭ		
ALVIN M YEARWOOD	2 00	l 🗸			0	0	
TRUSTEE		_ ^			٥		

		Ιx			l	l n	l n	i
TRUSTEE		^						
ALVIN M YEARWOOD	2 00	V				0	0	
TRUSTEE		^				0	0	
ALISON R BYERLY	50 00	v	Y			566,526	0	94,73
PRESIDENT		^	^			300,320	Ĭ	54,75

ALVIN M YEARWOOD	2 00	l _v			_	٥	0
TRUSTEE		_ ^				J	
ALISON R BYERLY	50 00	v	v		566,526	0	94,735
PRESIDENT		_ ^			300,320	0	94,733
JOSEPH S BOHRER	50 00		Ų		607,377		35,267
CHIEF INVESTMENT OFFICER			^		607,377	0	33,267

ALISON R BYERLY	30 00	_v	ν l		566,526	ا	94,735
PRESIDENT		_ ^			300,320	Ĭ	54,755
JOSEPH S BOHRER	50 00						
CHIEF INVESTMENT OFFICER			*		607,377	0	35,267
ROGER A DEMARESKI	50 00		Ţ		341,891	0	48,170
VP OF FINANCE & ADMINISTRATION/TREASURER			^		341,691	١	48,170

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202,031

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ANNETTE DIORIO

MICHAEL D KISER

LESLIE F MUHLFELDER

MART EYERLY

VP OF CAMPUS LIFE/SR DIVERSITY OFFICER

VP OF MARKETING & COMMUNICATIONS

VP OF MARKETING & COMMUNICATIONS

VP OF HUMAN RESOURCES & GENERAL COUNSEL

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 related from the and a director/trustee) any hours organization organizations

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

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
JAMES F KRIVOSKI VP & LIAISON TO BOARD OF TRUSTEES	50 00			×				197,929	0	28,141
GREGORY V MACDONALD VP OF ENROLLMENT MANAGEMENT	50 00			×				251,525	0	45,571

		ਜ਼ਰੀਨਾ	Trustee		Ď	pensated			
JAMES F KRIVOSKI VP & LIAISON TO BOARD OF TRUSTEES	50 00			x			197,929	0	28,14
GREGORY V MACDONALD VP OF ENROLLMENT MANAGEMENT	50 00			×			251,525	0	45,57
JOHN I O'KEFFE	50 00								

(F)

Estimated

compensation

from the

47,518

32,436

42,175

0

0

VP & LIAISON TO BOARD OF TRUSTEES			`		157,525		20,141
GREGORY V MACDONALD VP OF ENROLLMENT MANAGEMENT	50 00		(251,525	0	45,571
JOHN L O'KEEFE VP & CHIEF INFORMATION OFFICER	50 00		(235,421	0	44,238
KIMBERLY A SPANG	50 00		,		256 539	0	46 201

VP OF ENROLLMENT MANAGEMENT			,		251,525		13,371
JOHN L O'KEEFE VP & CHIEF INFORMATION OFFICER	50 00		x		235,421	0	44,238
KIMBERLY A SPANG VP OF DEVELOPMENT & COLLEGE RELATIONS	50 00		x		256,539	0	46,201
SAIYID A RIZVI	50 00		X		316,877	0	46,931

JOHN L O'KEEFE	50 00		v		235,421	0	44,238
VP & CHIEF INFORMATION OFFICER			^		233,421		44,236
KIMBERLY A SPANG	50 00		V		256 520		46.204
VP OF DEVELOPMENT & COLLEGE RELATIONS			Х		256,539	U	46,201
SAIYID A RIZVI	50 00		V		316,877	0	46.021
PROVOST			^		316,877		46,931
CDATG BECKER	50 00						

VF & CHIEF IN ORMATION OFFICER									
KIMBERLY A SPANG	50 00		x				256,539	0	46,201
VP OF DEVELOPMENT & COLLEGE RELATIONS			^				250,555	0	+0,201
SAIYID A RIZVI	50 00		x				316,877	0	46,931
PROVOST							310,677	0	+0,551
CRAIG BECKER	50 00			,			220 227		46 547
		ı	ı 1	IXI	ı	1	1 239.337		l 46.517

SAIYID A RIZVI	50 00		x			316,877	0	46.931
PROVOST			, ,			310,017	, and the second	10,551
CRAIG BECKER	50 00			,		220 227		46 517
ASSOCIATE VP FOR FINANCE & BUSINESS				*		239,337	l o	46,517

CRAIG BECKER	50 00				V			239,337	0	46 517
ASSOCIATE VP FOR FINANCE & BUSINESS								239,337	l o	46,517
MERVIN A BURTON	50 00									
		l .	l			l v	1 1	376 912	٥	24 167

Χ

Х

Х

214,611

227,596

232,597

ASSOCIATE VP FOR FINANCE & BUSINESS			X		239,337	0	
MERVIN A BURTON	50 00			¥	376.912	0	
DIRECTOR OF INVESTMENTS				^	370,312	Ŭ	

45 00

45 00

45 00

......

......

WILLIAM M CRAIN

JOHN KINCAID

BRUCE A MURPHY

SIMON PROFESSOR OF ECONOMICS

PROFESSOR/DIRECTOR OF MEYNER CENTER

KIRBY PROFESSOR OF GOVERNMENT & LAW

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the and

	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	13	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ñ- 2/1099- MISC)	organization and related organizations	
FRANCIS B O'HANLON	45 00					×		242,694	0	68,816	

HEAD MEN'S BASKETBALL COACH

efile	e GRA	APHIC prin	nt - DO NOT PRO	DCESS	As Filed Data -	<u></u>		DLN: 9	3493135077868
SCH	IED	ULE A	Pi	ıblic C	harity Statu	s and Pub	olic Sunn	ort	OMB No 1545-0047
(For	m 990			if the org	janization is a secti	ion 501(c)(3) c	organization o		2016
990E	(Z)				1947(a)(1) nonexe ▶ Attach to Form 9				2010
•		the Treasury	► Informat		Schedule A (Form			ıctions is at	Open to Public Inspection
Name	e of th	ue Service ne organiza	tion		www.ms.gc	<u>, , , , , , , , , , , , , , , , , , , </u>		Employer identific	<u></u>
AFAYI	ELLEC	OLLEGE						24-0795686	
Pai					s (All organizations			See instructions.	
ne o 1	rganız		•		t is (For lines 1 thro	•		/A)/:)	
		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) . A school described in section 170(b)(1)(A)(ii) . (Attach Schedule E (Form 990 or 990-EZ))							
2	✓					,	• • • • • • • • • • • • • • • • • • • •		
3		•	·	•	ce organization descr				
4		name, city,	and state	-		-		170(b)(1)(A)(iii). E	·
5			ation operated for th (iv). (Complete Par		of a college or univer	sity owned or op	erated by a gov	rernmental unit descri	bed in section 170
6		A federal, s	tate, or local gover	nment or <u>c</u>	governmental unit des	scribed in sectio	on 170(b)(1)(<i>t</i>	۱)(v).	
7			ation that normally i 'O(b)(1)(A)(vi). (0			s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described ir	section	170(b)(1)(A)(vi)(Complete Part I	[)		
9					cribed in 170(b)(1) e instructions Enter t			with a land-grant coll college or university	ege or university or a
LO		from activit	ies related to its ex	empt func	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	s, membership fees, a than 331/3% of its su sses acquired by the c	pport from gross
1		•			exclusively to test for	public safety S	ee section 509	(a)(4).	
2		more public	ly supported organ	ızatıons de		09(a)(1) or sec	tion 509(a)(2	s of, or to carry out th). See section 509(a s 12e, 12f, and 12g	
а		Type I. A so	supporting organization	tion operat	ted, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting organiza	ation supei organizat	ion vested in the sam			organization(s), by ha ge the supported orga	
С		Type III fo	unctionally integr	ated. A su				nd functionally integra	ted with, its
d		Type III n functionally	on-functionally in integrated The org	i tegrated. ganization	. A supporting organi	zation operated i y a distribution i	in connection wi	th its supported organ an attentiveness req	
e		Check this	box if the organizat	on receive	-	ation from the IF	RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		of supported organ						
g				ut the sup	ported organization(5)			
(i)Na	ame of	f supported o	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
				+					
Γotal			tion Act Notice, se			Cat No 11285		Schedule A (Form 9	

F	(Complete only if you ch III. If the organization for	ecked the box o	n line 5, 7, 8, or	9 of Part I or If	the organization	n failed to qualify	
_	ection A. Public Support	ans to quality uni	uer the tests list	eu below, piedSt	e complete Part	111.)	
	Calendar year	(-)2012	(1-)2012	(-)2014	(I) 201 F	(-)2016	(6)T-1-1
	(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 include any "unusual grant")	23,448,552	39,023,899	25,830,722	27,747,289	40,798,536	156,848,998
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
4	the organization without charge Total. Add lines 1 through 3 The portion of total contributions by	23,448,552	39,023,899	25,830,722	27,747,289	40,798,536	156,848,998
5	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						13,563,535
6	(f) Public support. Subtract line 5 from line 4						143,285,463
S	ection 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	23,448,552	39,023,899	25,830,722	27,747,289	40,798,536	156,848,998
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,841,194	12,754,814	14,508,841	9,000,126	9,391,557	58,496,532
9	Net income from unrelated business activities, whether or not the business is regularly carried on				88,267		88,267
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,400,584	1,153,077	1,875,752	867,269	1,832,825	7,129,507
11	Total support. Add lines 7 through 10						222,563,304
12	Gross receipts from related activities,	etc (see instructio	ns)	I	I	12	730,657,527
	First five years. If the Form 990 is fo	or the organization'	s first, second, thu	rd, fourth, or fifth	tax vear as a sect		
	check this box and stop here	-			•	· · · · · · <u>-</u>	
	ection C. Computation of Public						
14	Public support percentage for 2016 (III	• • •		olumn (f))		14	64 380 %
	Public support percentage for 2015 Sc	, , ,	•	(.,,,		15	60 660 %
	33 1/3% support test—2016. If the			n line 13. and line	14 is 33 1/3% or		
_Ua	and stop here. The organization qual					,	▶ ☑
b	33 1/3% support test— 2015. If th	e organization did	not check a box or	n line 13 or 16a, a	nd line 15 is 33 1/	3% or more, check	this
17 a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	t— 2016. If the org	janization did not c -and-circumstance	theck a box on line s" test, check this	box and stop her	e. Explain	▶□
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organiz Explain in Part VI how the organization	zation meets the "f	acts-and-circumsta	ances" test, check	this box and stop	here.	▶ □
	supported organization						ightharpoons

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2016

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

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

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

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8

10a

Schedule A (Form 990 or 990-EZ) 2016

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

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	1 - '		l

	(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	L
	m section 305(a)(1) or (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	
	below	Г
•	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	

	III Section 309(a)(1) or (2)	2	i	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			

	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below		
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewers commented	\Box	

		30	l		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use				
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b ın Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections				
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				

	to the foleigh supported organization was used exclusively for section 170(e)(2)(b) purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by		
	amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

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9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

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

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

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

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

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

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

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

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

the organization had excess business holdings)

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

provide detail in Part VI.

answer line 10b below

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

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

Par	** Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
C-	ection B. Type I Supporting Organizations			
se	ection B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗀	1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
			•	•
Se	ection C. Type II Supporting Organizations		Yes	N.
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
				•
Se	ection D. All Type III Supporting Organizations		Τ.,	
	Did the appropriate any would be each of the grown what a manufacture has the last through a COL manufacture.	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of			
	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?	<u> </u>	-	<u> </u>
2	Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported arrangement	n 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)	<u> </u>		
_	Divinion of the valeting described in (2) did the surround of	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
			1	
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)		
a				
b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))
2	Activities Test Answer (a) and (b) below.	_	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3		
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>		
	substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the			
	organization's position that its supported organization(s) would have engaged in these activities but for the organization	s		
_	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	\vdash	1	
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		,	1	

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

e Excess from 2016. . . .



Political Campaign and Lobbying Activities

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

2016 Open to Public Inspection

OMB No 1545-0047

DLN: 93493135077868

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C

(Form 990 or 990-

www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

If the	Section 501(c) (other than section Section 527 organizations Comple e organization answered "Yes" o Section 501(c)(3) organizations that Section 501(c)(3) organizations that	mplete Parts I-A and B Do not complete 501(c)(3)) organizations Complete Part ete Part I-A only on Form 990, Part IV, Line 4, or Form 91 thave filed Form 5768 (election under sat have NOT filed Form 5768 (election under sat have filed filed Form 5768 (election under sat have filed	s I-A and C below 990-EZ, Part VI, Iir section 501(h)) Co nder section 501(h	ne 47 (Lobby i omplete Part II o)) Complete I	i ng Activiti -A Do not Part II-B Do	ies), then complete Part o not complete	e Part II-A
(Pro	xy Tax) (see separate instruction	ns), then	, (,		· · · · · · · · · · · · · · · · · · ·	,
	Section 501(c)(4), (5), or (6) organime of the organization	zations Complete Part III		En	nnlover ide	entification i	number
	AYETTE COLLEGE				• •		
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is		-0795686 27 orga r	nization.	
1 2	<u> </u>	nization's direct and indirect political cai	mpaign activities ir	n Part IV	•	\$	0
3	Volunteer hours						0
Par	t I-B Complete if the orga	nization is exempt under section	on 501(c)(3).			·	
1	Enter the amount of any excise t	ax incurred by the organization under s	ection 4955		>	\$	0
2	Enter the amount of any excise t	ax incurred by organization managers u	ınder section 4955		>	\$	0
3	If the organization incurred a sec	ction 4955 tax, did it file Form 4720 for	this year?			☐ Ye	es 🗌 No
4a	Was a correction made?					☐ Ye	es 🗆 No
ь	If "Yes," describe in Part IV						
Pai	rt I-C Complete if the orga	nization is exempt under section	on 501(c), exce	ept section	501(c) (3	3).	
1	Enter the amount directly expend	ded by the filing organization for section	n 527 exempt funct	tion activities	>	\$	
2	Enter the amount of the filing org function activities	ganization's funds contributed to other o	organizations for se	ection 527 exe	empt •	\$	
3	Total exempt function expenditu	res Add lines 1 and 2 Enter here and o	n Form 1120-POL,	line 17b	>	\$	
4	Did the filing organization fileFor	m 1120-POL for this year?					es 🗆 No
5	organization made payments Fo of political contributions received	employer identification number (EIN) o r each organization listed, enter the am I that were promptly and directly deliver tee (PAC) If additional space is needed,	ount paid from the red to a separate p	e filing organiz political organi:	ation's fund	ds Also enter	the amount
	(a) Name	(b) Address	(c) EIN		nization's ione, enter	contribut and pro directly of separa organizar	unt of political closs received omptly and delivered to a steep olitical tion. If none, ter -0-
2							
3							
4							
5							
6 For F	Paperwork Reduction Act Notice. see	the instructions for Form 990 or 990-EZ.	Cat	No 50084S	Schedule (C (Form 990 or	· 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

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

Grassroots nontaxable amount

Grassroots lobbying expenditures

	dule C (Form 990 or 990-EZ) 2016 rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi	lad			Pa	age 3	
Fæ	Form 5768 (election under section 501(h)).	ieu					
or e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	1		(b))	
ctiv	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Δ	moun	t	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
а	Volunteers?		No				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No				
c	Media advertisements?		No	1			
d	Mailings to members, legislators, or the public?		No				
е	Publications, or published or broadcast statements?		No				
f	Grants to other organizations for lobbying purposes?		No				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				60,687	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No				
i	Other activities?		No				
j	Total Add lines 1c through 1i					60,687	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No				
b	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?						
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) (6).	(5), o	r secti	on 5)	
			_		Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		_	1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3			
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				601(c)(6)	
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).						
a	Current year	2a					
b	Carryover from last year	2b					
c	Total	2c					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3					

expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information

the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

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 IS A MEMBER OF THE AMERICAN COUNCIL ON EDUCATION, THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES OF PENNSYLVANIA, THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES AND THE LEHIGH VALLEY ASSOCIATION OF INDEPENDENT COLLEGES THROUGH THESE ORGANIZATIONS, THE COLLEGE MAY, FROM TIME TO TIME, LOBBY THE CITY OF EASTON, THE COMMONWEALTH OF PENNSYLVANIA OR THE FEDERAL GOVERNMENT IN SUPPORT OF

ASSISTANCE IN SECURING FEDERAL AND STATE GRANTS

HIGHER EDUCATION ISSUES AND LEGISLATION OR IN THE ASSISTANCE IN PROCURING GRANTS THE COLLEGE NEITHER EMPLOYS A LOBBYIST OR LOBBYING FIRM NOR INCURS LOBBYING EXPENSES FOR LEGISLATION ON THE COLLEGE'S BEHALF THE COLLEGE EMPLOYS THE DELTA DEVELOPMENT GROUP FOR

4

5

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Department of the Treasury

Internal Revenue Service

As Filed Data -

Supplemental Financial Statements

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

Attach to Form 990.

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

DLN: 93493135077868 OMB No 1545-0047

Open to Public **Inspection** Employer identification number

	me of the organization AYETTE COLLEGE			Empl	oyer identifi	cation num	ber
LAF	ATETTE COLLEGE			24-07	795686		
Pa	Organizations Maintaining Donor Complete if the organization answere			or Acco	ounts.		
		(a) Donor advised funds		(b) F	unds and othe	er accounts	
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor funds are the organization's property, subject to t			advised		☐ Yes	□ N
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?				rpose	☐ Yes	□ N
Pa	rt III Conservation Easements. Complet			rm 990,	Part IV, line	e 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that ap	pply)				
	Preservation of land for public use (e g , rec	reation or education)	Preservation of a	an historio	ally importan	t land area	
	Protection of natural habitat		Preservation of a	a certified	historic struc	ture	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year	neld a qualified conservation co	ntribution in the f	form of a_	conservation Held at the	End of the	Year
а	Total number of conservation easements			2a			
b	Total acreage restricted by conservation easement			2b			
С	Number of conservation easements on a certified	•	•	2c			
d	Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/1//06, and no	ot on a historic	2d			
3	Number of conservation easements modified, trar tax year ▶	sferred, released, extinguished	, or terminated b	y the org	anızatıon durıı	ng the	
4	Number of states where property subject to conse	rvation easement is located 🕨					
5	Does the organization have a written policy regard and enforcement of the conservation easements i		spection, handlin	g of violat		Yes 🗆	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violation	ns, and enforcing	conserva	tion easement	ts during the	year
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, ar	nd enforcing cons	ervation e	asements dur	ring the year	•
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	e 2(d) above satisfy the require	ements of section	170(h)(4)(B)(ı)	Ves 🗆	No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organizat			ement, and		
Par	Organizations Maintaining Collect Complete if the organization answere	ions of Art, Historical Tr		ther Sin	nilar Assets	5.	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to its	AS 116 (ASC 958), not to repo ld for public exhibition, educati	rt in its revenue s on, or research in	n furthera			of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items						
(i) Revenue included on Form 990, Part VIII, line 1				▶ \$		
(i	i)Assets included in Form 990, Part X				▶ \$	3,22	4,104
2	If the organization received or held works of art, I following amounts required to be reported under			nancıal ga			
а	Revenue included on Form 990, Part VIII, line 1				> \$		
b	Assets included in Form 990, Part X				▶ \$		

Cat No 52283D

Schedule D (Form 990) 2016

 ${f d}$ Equipment .

e Other .

	1111	Organizations Ma	aintaining Collections	Of Art His	ctoric	- I T		~ · · · Oth ~ · ·			
_											
3		g the organization's acq s (check all that apply)	juisition, accession, and othe	er records, c		ny of t	he followir	ng that are a	significant us	se of its col	lection
а	✓	Public exhibition			d	✓	Loan or ex	change prog	rams		
b	✓	Scholarly research			е		Other				
С	✓	Preservation for future	e generations								
4	Provi Part :		organization's collections an	d explain ho	ow they	furthe	er the orga	nization's ex	empt purpos	e in	
5			anization solicit or receive d nds rather than to be mainta						ıılar	☐ Yes	☑ No
Par	rt IV		todial Arrangements. ganization answered "Ye	s" on Form	າ 990,	Part I	:V, line 9	, or reporte	ed an amour	nt on Forn	n 990, Part
1a	Is the	e organization an agent	t, trustee, custodian or other	r intermedia	ry for c	ontrib	utions or c	ther assets	not		
	includ	ded on Form 990, Part 1	X7							☐ Yes	✓ No
	TE 1117	II		1 - k - k - 6 - 11 -		-1-1-			Α		
b c		, ,	ement in Part XIII and comp	lete the follo	owing t	able		1c	An	nount	
d	-	nning balance						1d			
		ions during the year						1e			
e f		ibutions during the year	ŗ					1f			
		ng balance								_	
2a	Dia ti	ne organization include	an amount on Form 990, Pa	art X, line 2	ı, for e	scrow	or custodia	al account lia	ibility	✓ Yes	∐_No
b	If "Y∈	es," explain the arrange	ement in Part XIII Check he	re if the exp	lanatio	n has	been provi	ded in Part)	KIII		✓
Pa	rt V	Endowment Fund	ds. Complete if the orgai	nızatıon ar	iswere	d "Ye	s" on For	m 990, Par			
			(a)Curre			or year		o years back	(d)Three year		our years back
1a	Beginn	ning of year balance .		4,730,899		09,061,		832,811,462	· ·	31,061	681,536,166
b	Contrib	butions		1,203,342		13,123,		2,547,962	·	66,810	12,952,840
С	Net inv	vestment earnings, gair	ns, and losses	8,282,832		-7,354,	992	9,573,228	109,/	77,933	86,688,907
d	Grants	or scholarships		8,041,278		7,654,	691	7,142,699	7,0	64,627	6,912,692
		expenditures for facilitions of the contract o		0,368,897	-	28,795,	873	26,383,005	24,7	22,271	22,709,903
f	Admını	istrative expenses .		2,737,141		3,648,	716	2,345,561	2,3	77,444	2,524,257
g	End of	year balance		3,069,757	77	74,730,	899	809,061,387	832,8	11,462	749,031,061
2	Provi	de the estimated perce	ntage of the current year en	nd balance (I	lıne 1g,	colum	nn (a)) hel	d as			
а	Board	d designated or quasi-e	endowment ▶ 26 730 %								
b	Perm	anent endowment 🟲	33 690 %								
С	Temp	porarily restricted endov	wment ▶ 39 580 %								
	The p	percentages on lines 2a	, 2b, and 2c should equal 10	00%							
3а		here endowment funds nization by	not in the possession of the	organizatio	n that	are he	ld and adn	ninistered fo	r the		Yes No
	(i) uı	nrelated organizations								3a(i)	Yes
		elated organizations .				• •				3a(ii)	No
		` ''	lated organizations listed as	•						3b	
4			ended uses of the organization	on's endowr	nent fu	nas					
Par	rt VI	Land, Buildings,	and Equipment. ganization answered 'Yes	s' on Form	ggn i	Dart I\	/ line 11	a See For	n 990 Dar+	X line 10)
	Descri	iption of property	(a) Cost or other basis	(b)Cost or				Accumulated d			ook value
	. =	. 1 1 1	(investment)			,					
12	Land					7,748	3,632				7,748,63
	Buildin					392,870	-		155,061,687		237,808,77
		nold improvements		1		55,306	-		25,502,080		29,804,44

72,458,340

15,753,683

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

20,432,243

15,753,683

52,026,097

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he organization ar	swered 'Yes' on F	Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	Cost	(c)Method of valuation or end-of-year market value
(1)Financial derivatives			·
(2)Closely-held equity interests	172,671,39	96	F
(B) EVENT DRIVEN/DISTRESSED	47,014,00		
(C) LONG/SHORT EQUITY	85,015,00		
(D) MULTI-STRAT /ABS RETURN	126,731,00		F
(E) REAL ESTATE	21,621,00		F
(F) PRIVATE EQUITY	65,408,00		F
(G) FIXED INCOME INSTIT MUTUAL FUNDS	60,767,00		
(G)	00,707,00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Г
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Complete if See Form 990, Part X, line 13.	the organization a	answered 'Yes' on	Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book valu		(c) Method of valuation or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization answered (a) Description	d 'Yes' on Form 990,	Part IV, line 11d S	ee Form 990, Part X, line 15 (b) Book value
(1) DEPOSITS WITH BOND AND OTHER TRUSTEES (1)			80,011,32
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			90.011.22
Part X Other Liabilities. Complete if the organization a		Form 990, Part I	
See Form 990, Part X, line 25. 1. (a) Description of liability	(b)	Book value	
(1) Federal income taxes			
DESERBED CIVING LIABILITY		32.052.745	
DEFERRED GIVING LIABILITY		23,953,745	
POST RETIREMENT BENEFITS		47,892,000	
COND ASSET RETIREMENT OBLIGATION		1,777,579	
INT RATE HEDGE/SWAP AGREEMENTS (5)		14,396,033	
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	88,019,357	
2. Liability for uncertain tax positions In Part XIII, provide the text of		organization's finar	
organization's liability for uncertain tax positions under FIN 48 (ASC	/40) Check here if t	ne text of the footh	ote has been provided in Part XIII 💆

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

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

2a

2b

2c 2d

4a 4b

Explanation

Page 4

-1,770,277

261.462.319

167,079,963

2,472,222

164,607,741

43,873,688

208,481,429

Schedule D (Form 990) 2015

4c

5

2e

3

4c

5

2,472,222

701,945

43,171,743

Add lines **4a** and **4b** c 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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 . . .

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

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

Donated services and use of facilities

Other (Describe in Part XIII)

Supplemental Information

Prior year adjustments

Other losses

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Schedule D (Form 990) 2016

Part XI

Part XII

1

2

е

3

4

b

c

Part XIII

See Additional Data Table

5

Page 5		Schedule D (Form 990) 2015
	ation (continued)	Part XIII Supplemental Infor
	Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software Version: **EIN:** 24-0795686

Name: LAFAYETTE COLLEGE

THE COLLEGE MAINTAINS AGENCY FUNDS FOR THE INVESTMENT CLUB AND THE ALUMNI ASSOCIATION

PART IV, LINE 2B

Supplemental Information

Return Reference Explanation

Software ID:

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE INTENT OF THE COLLEGE'S INVESTMENT GUIDELINES FOR ITS ENDOWMENT IS TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO THE COLLEGE'S PROGRAMS FROM THE ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 1,300 ENDOWED FUNDS THAT ARE ESTABLISHED FOR A VARIETY OF PURPOSES ENDOWMENT CONTRIBUTIONS INCLUDE GIFTS AS WELL AS TRANSFERS TO BOARD DESIGNATED FUNDS EARNINGS ON ENDOWMENT FUNDS ARE DESIGNATED FOR SCHOLARSHIPS, PROFESSORSHIPS, CHAIRS, STUDENT LOANS, INSTRUCTIONAL PROGRAMS, LIBRARY PURCHASES, GENERAL OPERATIONS, AND OTHER DESIGNATED PURPOSES

Cupplemental Information

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE COLLEGE'S ACCOUNTING POLICY PROVIDES THAT A TAX EXPENSE/BENEFIT FROM AN UNCERTAIN TAX POSITION MAY BE RECOGNIZED WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING RESOLUTIONS OF ANY RELATED APPEALS OR LITIGATION PROCESSES, BASED ON TECHNICAL MERITS THE COLLEGE DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE UNCERTAIN TAX POSITIONS

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Supplemental Information Return Reference Explanation PART XI, LINE 2D - OTHER SCHOLARSHIPS AND FELLOWSHIPS -43,171,743 CHANGE IN ANNUITIES PAYABLE ESTIMATE 953,169 ADJUSTMENTS CHANGE IN FV OF INTEREST RATE HEDGE/SWAP AGREEMENTS 5,405,255 CHANGE IN POST RETIREMENT BENEFIT COST 4,379,000 LOSS ON DEFEASEMENT -3,383,509

Supplemental Information		
Return Reference	Explanation	
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL REVENUES TO EXTENT EXPENDED -570,088 COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED -1,856,907 DIRECT SPECIAL EVENT EXPENSES -45,227	

Supplemental Information	
Return Reference	Explanation
	RENTAL REVENUES TO EXTENT EXPENDED 570,088 COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED 1,856,907 DIRECT SPECIAL EVENT EXPENSES 45,227

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND FELLOWSHIPS 43,171,743

S

Supplemental Information	
Return Reference	Explanation
FORM 990, SCHEDULE D, PART III, LINE 4	AMONG THE RICH RESOURCES PROVIDED FOR STUDENTS IS A FINE, SMALL ART COLLECTION THE COLLECTION INCLUDES EIGHTEENTH-THROUGH EARLY TWENTY-FIRST CENTURY AMERICAN AND EUROPEAN PAINTING S, PRINTS, AND SCULPTURE, VINTAGE PHOTOGRAPHS, AND CONTEMPORARY AMERICAN SCULPTURE AND PAINTINGS RECENT ACQUISITIONS BUILD ON THE STRENGTH OF THE EXISTING COLLECTIONS THE MISSION STATEMENT FOR THE ART COLLECTIONS IS TO DOCUMENT, PRESERVE FOR FUTURE GENERATIONS, EXHIBIT, AND MAKE ACCESSIBLE THE COLLEGE'S ART COLLECTION TO THE STUDENTS, PUBLIC, AND SCHOLARS THROUGH EXHIBITIONS, PUBLICATIONS, REPRODUCTIONS, AND BY GRANTING ACCESS FOR RESEARCH PURP OSES THE ADMINISTRATION OF THE ART COLLECTION COMPLIES WITH MUSEUM-FIELD WIDE STANDARDS OF CARE (SEE AMERICAN ALLIANCE OF MUSEUMS, AAM) STUDENTS HAVE CURATED EXHIBITIONS FROM THE COLLECTIONS, WHEN APPROPRIATE, ARTWORK IS LOANED TO OTHER INSTITUTIONS FOR EXHIBITIONS OF SCHOLARLY IMPORTANCE, IMAGES OF ARTWORK ARE READILY AVAILABLE FOR REPRODUCTIONS IN COMMER CIAL (EX TEXT BOOKS) AND ACADEMIC-SCHOLARLY PUBLICATIONS (GENERALLY AT NO CHARGE OR A NOM INAL FEE) THE LAFAYETTE COLLEGE'S SPECIAL COLLECTIONS AND COLLEGE ARCHIVES ARE HOME TO AP PROXIMATELY 20,000 RARE BOOKS AND MORE THAN 2,000 CUBIC FEET OF MANUSCRIPTS AND ARCHIVES THE HOLDINGS INCLUDE MANUSCRIPTS, RARE BOOK COLLECTIONS ON STEPHEN CRANE, ANGLING, MINIATU RE BOOKS, AND ARTIST'S BOOKS, PAPERS OF FORMER TREASURY SECRETARY WILLIAM E SIMON, NEW JE RESEY GOVERNOR ROBERT E MEYNER AND CONGRESSWOMAN HELEN MEYNER, THE EARLY RECORDS OF THE EA STON-BASED DIXIE CUP COMPANY AND THE PAPERS OF NOTED ILLUSTRATOR AND ARTIST HOWARD CHANDLE R CHRISTY THE COLLEGE ARCHIVES SERVE AS THE REPOSITORY FOR THE RECORDS OF LAFAYETTE COLLE GE, DATING BACK TO THE FOUNDING OF THE COLLEGE IN 1824-1826 IT IS CHARGED WITH RECORDS MA NAGEMENT RESPONSIBILITIES FOR CURRENT COLLEGE FOR THE RECORDS OF THE RECORD OF THE FOUNDING OF THE COLLEGE OF THE TODOUGH THE THE OFFICE OF THE TODOUGH THE OWNER AND CONTRAD AND HAS GROWN THROUGH THE GIFTS OF MANY PRIVATE COLLECTION TO THE DOPOGR

Supplemental Information	
Return Reference	Explanation
III, LINE 4	ER 2 7 BILLION YEARS AGO AND THE ORBICULAR TEXTURE EARNED IT THE INFORMAL NAME OF THE LEOP ARD ROCK THE COLLECTION IS ENJOYED BY THE LAFAYETTE COMMUNITY, ELEMENTARY AND SECONDARY S TUDENTS, YOUTH GROUPS, AND THE COMMUNITY AT LARGE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135077868 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **Employer identification number** LAFAYETTE COLLEGE 24-0795686 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2016) CEE CLIDDLEMENTAL DACE

CCHEDITIE E DADTI LINE 2

SCHEDULE E, PART I, LINE 3	SEE SUFFLEMENTAL FAGE
SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES FINANCIAL AID AND ASSISTANCE FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES UNDER THEIR RESPECTIVE STUDENT FINANCIAL AID ASSISTANCE PROGRAMS FEDERAL GRANT PROGRAMS INCLUDE PELL GRANTS, DIRECT LOAN PROGRAMS, WORK-STUDY, THE PERKINS LOAN PROGRAM, AND FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS STATE PROGRAMS INCLUDE THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE AGENCY IN ADDITION, THE COLLEGE IS AWARDED DESEABLE OF AND OTHER PROJECT CRANTS BY WARDED

FORM 990, SCHEDULE E, PART I, LINE 3

THE COLLEGE'S RACIAL NONDISCRIMINATORY POLICY IS PUBLICIZED WITHIN THE COLLEGE'S CATALOG WHICH CAN BE FOUND AT HTTP //CATALOG LAFAYETTE EDU/ IN ADDITION, THE COLLEGE HAS A SEPARATE DIVERSITY AND INCLUSIVENESS STATEMENT WHICH IS ALSO INCLUDED WITHIN THE COLLEGE'S CATALOG AT

INCLUDED WITHIN THE COLLEGE'S CATALOG AT HTTP //CATALOG LAFAYETTE EDU/

efile GRAPHIC prin	t - DO NOT I	PROCESS	As Filed Data	-	DLN	: 93493135077868
SCHEDULE F (Form 990) Statement of Activities Outside the United States				ited States	OMB No 1545-0047	
(1 01111 000)		► Complet	_	n answered "Yes" to Form	990,	2016
		► Att		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					Employer ide	ntification number
LAFAYETTE COLLEGE					24-0795686	
	Information Part IV, line		s Outside the U	Jnited States. Comple	te if the organization a	answered "Yes" to
1 For grantmaker	s. Does the org	ganızatıon maı	ntaın records to s	substantiate the amount	of its grants and	
other assistance,	the grantees'	eligibility for tl	he grants or assis	stance, and the selection	criteria used	
to award the grar	nts or assistan	ce?				☑ Yes ☐ No
2 For grantmaker outside the United		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	employees, agents, and independent	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, 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	a (f) Total expenditures for and investments in region
(1) See Add'l Data				,		
(2)						
(3)						
(4)						
(5)						
3a Sub-total b Total from continua Part I	tion sheets to		0 0			351,255,812 1,188,134
c Totals (add lines 3			0 0			352,443,946
For Paperwork Reduction	Act Notice, see	e the Instruction	ns for Form 990.	Cat	No 50082W Schedu	lle F (Form 990) 2016

(3)							
(4)							
2 Enter total numb	or of recipient	organizations listed	above that are recor	anizod as charitios by	the fergion country	rocognized as tay-	

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2016

(2) (3) (4)

(5) (6) (7)

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

(13) (14)

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

Schedule F (Form 990) 2016

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

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.

(1)

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 Pry	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

Schedule F (Fo	orm 990) 2016 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return Reference	Explanation
PART I, LINE 2	THE AMOUNTS REPORTED ON PART I ARE IDENTIFIED ON A REASONABLE EFFORTS BASIS WHERE SUCH ACTIVITIES WERE NOT TRACKED SEPARATELY UNDER THE COLLEGE'S ACCOUNTING PROCEDURES THESE REASONABLE EFFORTS INCLUDE REVIEWS OF FINANCIAL RECORDS AND INTERVIEWS WITH COLLEGE PERSONNEL THE COLLEGE EXPENDS FUNDS OUTSIDE OF THE UNITED STATES ON VARIOUS STUDY ABROAD PROGRAMS STUDENTS ENROLLED IN STUDY ABROAD PROGRAMS PAY THEIR TUITION AND FEES DIRECTLY TO LAFAYETTE COLLEGE AND THE COLLEGE

REMITS PAYMENTS TO THE OVERSEAS PROGRAM ON STUDENTS' BEHALF

Return Reference	Explanation
	THE COLLEGE RECEIVES A GRANT FROM THE NATIONAL ENDOWMENT FOR HUMANITIES, UNDER THE TERMS OF WHICH LAFAYETTE IS REQUIRED TO SUBMIT THE FUNDS TO THE UNIVERSITY OF TORONTO, A FOREIGN UNIVERSITY, FOR LABOR TO DIGITIZE UNIQUE DOCUMENTS THE COLLEGE PERIODICALLY REVIEWS THE RESULTS OF THE GRANT AND ENSURES THAT EXPENDITURES ARE IN COMPLIANCE WITH THE INTENDED USE OF THE GRANT

Additional Data

EAST ASIA AND THE PACIFIC

NORTH AMERICA

Software ID: Software Version:

EIN: 24-0795686

Name: LAFAYETTE COLLEGE

35,008,183

54,612,019

orm 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 & CARIBBEAN	0	0	INVESTMENTS		246,622,556				

0 INVESTMENTS

0 INVESTMENTS

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) FUROPE 0 INVESTMENTS 15,000,000 CENTRAL AMERICA AND THE 0 MANAGEMENT AND INSTITUTIONAL SUPPORT 2,484 CARIBBEAN IGENERAL CENTRAL AMERICA AND THE 0 PROGRAM SERVICES STUDENT SERVICES 652 CARTBBEAN

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				
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	1,839				
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INSTRUCTION	8,079				
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH	3,618				

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 reaion service(s) in region services, grants to region recipients located in the region) EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES STUDENT SERVICES 6,454 **EUROPE** 4,535 0 MANAGEMENT AND INSTITUTIONAL SUPPORT IGENERAL **EUROPE** 0 PROGRAM SERVICES ACADEMIC SUPPORT 18,152

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) 0 PROGRAM SERVICES 301.203 EUROPE INSTRUCTION **EUROPE** 0 PROGRAM SERVICES IRESEARCH 10,190 FUROPE 0 PROGRAM SERVICES STUDENT SERVICES 6,261

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			
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	383			
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	3,150			
NORTH AMERICA	0		MANAGEMENT AND GENERAL	AUXILIARIES	3,030			

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 reaion service(s) in region services, grants to region recipients located in the region) 0 MANAGEMENT AND INSTITUTIONAL SUPPORT 23,231 NORTH AMERICA IGENERAL NORTH AMERICA 0 PROGRAM SERVICES ACADEMIC SUPPORT 5.183 NORTH AMERICA 0 PROGRAM SERVICES INSTRUCTION 16,430

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 services, grants to service(s) in region region recipients located in the region) 0 PROGRAM SERVICES RESEARCH 117.356 NORTH AMERICA NORTH AMERICA 0 PROGRAM SERVICES ISTUDENT SERVICES 500,550 SOUTH ASIA 0 PROGRAM SERVICES IINSTRUCTION 3,575

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 services, grants to service(s) in region region recipients located in the region) 0 PROGRAM SERVICES 2.066 SUB-SAHARAN AFRICA INSTRUCTION SUB-SAHARAN AFRICA 0 PROGRAM SERVICES IRESEARCH 797 SUB-SAHARAN AFRICA 0 PROGRAM SERVICES STUDENT SERVICES 6.052

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 describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICES INSTRUCTION SOUTH AMERICA NORTH AMERICA IGRANTS TO RECIPIENTS 155,884 LOCATED IN REGION

DLN: 93493135077868

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE G

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

Open to Public Inspection

(Form 990 or 990-EZ)

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

ame of the organization						Employer ide	entification number
AFAYETTE COLLEGE						24-0795686	
	ivities.Complete if	_	-	n answered "Yes" o	n Form 990	, Part IV, line :	17.
Indicate whether the organ	nization raised funds t	hrough a	any of the	following activities C	heck all that a	apply	
a 🗹 Mail solicitations				e 🗹 Solicitation of	f non-governr	nent grants	
b 🔽 Internet and email soli	citations			f Solicitation of	f government	grants	
c 🗹 Phone solicitations				g 🗹 Special fundr	aising events		
d 🗹 In-person solicitations							
 Did the organization have or key employees listed in If "Yes," list the ten highes to be compensated at least 	Form 990, Part VII) o t paid individuals or e	or entity i entities (f	in connec	tion with professional	fundraising se	ervices? 🗸 Y	es
to be compensated at least	. 35,000 by the organ	iizatioii					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont) Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or refundra	nount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
CRESENDO INTERACTIVE INC 110 CAMINO RUIZ	GIFT LEGACY SERVICE & UPGRADE		No		0	5,500	-5,500
CAMARILLO, CA 93012 2	CAMPAIGN						
STEEGE THOMSON COMMUNICATIONS 4606 SPRUCE STREET	MARKETING		No		0	136,365	-136,365
PHILADELPHIA, PA 19139	CAMPAICN						
WASHBURN & MCGOLDRICK 950 NEW LOUDON ROAD STE 210	CAMPAIGN CONSULTING		No		0	26,928	-26,928
LATHAM, NY 12110							
+							
5							
5							
7							
3							
9							
)							
otal	•	•	•			168,793	-168,793

Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$5	vent contributions and			
Revenue		(a)Event #1 MC GOLF OUTING (event type)	(b) Event #2 LACROSSE AUCTION (event type)	(c)Other events (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts 2 Less Contributions 3 Gross income (line 1 minus	71,251 35,765	·		161,681 50,300
	Inne 2) 4 Cash prizes 5 Noncash prizes	35,486 2,479			2,479
enses	6 Rent/facility costs	8,000			9,719
Direct Expenses	7 Food and beverages 8 Entertainment	5,034	15,710		20,744
Dire	9 Other direct expenses	3,287	2,781		6,068
	10 Direct expense summary Add lines 4 t	hrough 9 ın column (d)		>	39,010
	11 Net income summary Subtract line 10	• • • • • • • • • • • • • • • • • • • •		•	72,371
Pai	rt III Gaming. Complete if the orga on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part I	IV, line 19, or reported	i more than \$15,000
Revenue	,	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
Expenses	2 Cash prizes				
Direct E	4 Rent/facility costs				
ā	5 Other direct expenses				
	6 Volunteer labor	☐ Yes <u>%</u> ☐ No	☐ Yes <u>%</u> ☐ No	☐ Yes <u>%</u> ☐ No	
	7 Direct expense summary Add lines 2 t 8 Net gaming income summary Subtract				
9 a b	Enter the state(s) in which the organization licensed to conduct gas If "No," explain	on conducts gaming activ	ities these states?		☐ Yes ☐ No
10 a b	Were any of the organization's gaming lic		<u>-</u>	•	Yes No

Sche	dule G (Form 990 or 990-EZ) 2016					F	age 3
11	Does the organization conduct gaming	activities with nonmembers	57		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming		member of a partnership or other entity		□Yes	_	
13	Indicate the percentage of gaming acti	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
14	Enter the name and address of the per	son who prepares the orgar	nization's gaming/special events books and r	ecords			
	Name •						
	Address ►						
15a	Does the organization have a contract revenue?	with a third party from who	m the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming reamount of gaming revenue retained by			ne			
С	If "Yes," enter name and address of the	e thırd party					
	Name •						
	Address ►						
16	Gaming manager information						
	Name ► Gaming manager compensation ► \$						
	Description of services provided ►						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	Is the organization required under stat retain the state gaming license?	e law to make charitable dis	stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributions requi		ited to other exempt organizations or spent		Птез	шио	
Pai		- .	→ ions required by Part I, line 2b, column	s (III) an	d (v); a	nd Part	
		5c, 16, and 17b, as appl	icable. Also complete this part to provi				
	Return Reference		Explanation				
FORM	M 990, SCHEDULE G, PART I, LINE 3	BELIEVES IT IS GENERALLY	D AND LICENSED INSTITUTION OF HIGHER Y EXEMPT FROM THE REGISTRATION PROVISING FUNDS FOR CHARITABLE PURPOSES TO	SIONS TH	AT REQUI		

Schedule G (Form 990 or 990-EZ) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493135077868 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) 2016 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** LAFAYETTE COLLEGE 24-0795686 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (g) Description of (book, FMV, appraisal, organization if applicable non-cash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

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

Schedule I (Form 990) 2016

Part III

(2) ACADEMIC PRIZES, AWARDS, AND FELLOWSHIPS	138	165,942	N/A	N/A
(2)				
(3)				
(4)				

(5) (6) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

(7) Part IV Explanation Return Reference

LAFAYETTE COLLEGE MAINTAINS A POLICY DEFINING ITS PROCEDURES FOR MONITORING THE USE OF SPONSORED FUNDS BY SUB-RECIPIENTS WHO ARE

CONDUCT THEIR PORTION OF SPONSORED PROJECTS IN COMPLIANCE WITH THE LAWS, REGULATIONS, TERMS AND CONDITIONS OF AWARDS AND SUB AWARDS, AND THAT REIMBURSEMENT COSTS INCURRED BY SUB-RECIPIENTS ARE ALLOWED

THE COLLEGE CONSIDERS THE AWARDING OF FINANCIAL AID (PRIMARILY GRANTS, SCHOLARSHIPS, LOANS, AND WORK-STUDY) TO ITS STUDENTS, INCLUDING

PART I, LINE 2 PERFORMING A PORTION OF A SPONSORED PROJECT EXTERNALLY AWARDED TO LAFAYETTE THIS POLICY PROVIDES GUIDANCE TO ENSURE THAT SUB-RECIPIENTS PART III, LINE 1 NON-RESIDENT ALIEN STUDENTS, TO BE A U.S. BASED ACTIVITY AS STUDENTS OF THE COLLEGE ARE DEEMED TO BE LIVING IN THE UNITED STATES THROUGHOUT THEIR COMPLETION OF THE COLLEGE'S ACADEMIC CURRICULUM AND SUPPORTING PROGRAMS. THE COLLEGE AWARDS SCHOLARSHIPS AND FELLOWSHIPS ON THE BASIS OF MERIT AND/OR FINANCIAL NEED THE SELECTION CRITERIA ARE BASED ON THE CALCULATED EXPECTED FAMILY CONTRIBUTION, WHICH IS DERIVED BY USING COMPLEX FORMULAS INVOLVING FAMILIES' INCOME. ASSETS. AND HOUSEHOLD SIZES INCLUDING. AMONG OTHER FACTORS. DEPENDENTS IN COLLEGE THE

COLLEGE'S FINANCIAL AID OFFICE ADMINISTERS AND MONITORS THESE AWARDS TO HELP ENSURE THAT THESE FUNDS ARE AWARDED TO ELIGIBLE RECIPIENTS IN ACCORDANCE WITH APPLICABLE FEDERAL, STATE, AND OTHER REQUIREMENTS, AS WELL AS RELEVANT INTERNAL COLLEGE POLICIES AND OPERATIONAL GUIDELINES ACADEMIC PRIZES, AWARDS, FELLOWSHIP, AND INTERNSHIPS ARE AWARDED BASED ON A REVIEW BY THE APPLICABLE ACADEMIC DEPARTMENT ALL AWARDED SCHOLARSHIPS ARE CREDITED TO THE STUDENT'S ACCOUNT AT THE COLLEGE AND ARE APPLIED TO BILLED CHARGES Schedule I (Form 990) 2016

Page **2**

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DLN: 93493135077868

OMB No 1545-0047

2015

Open to Public Inspection

Schedule J

Compensation Information

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

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

Department of the Treasury Internal Revenue Service

(Form 990)

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

Employer identification number Name of the organization LAFAYETTE COLLEGE 24-0795686 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4h Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4c** Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а Νo 5h Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 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 organization provide any non-fixed payments not described in lines 5 and 67 If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2015							Page Z		
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.									
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual									
(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990		

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See Additional Data Table

Schedule J (Form 990) 2015

PART I. LINE 1A

PART I, LINE 3

Page 3

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** TRAVEL FOR COMPANIONS - IN ACCORDANCE WITH COLLEGE POLICY, IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS

COMPANION WHEN THE COMPANION TRAVEL IS 11 FOR A BONA FIDE BUSINESS PURPOSE, AND 21 IMPORTANT TO THE ACHIEVEMENT OF THE COLLEGE'S PURPOSES THAT REQUIRE THE TRAVEL OF THE EMPLOYEE AND COMPANION TAX INDEMNIFICATION - DURING CALENDAR YEAR 2016, A \$2.851 TAX EOUALIZATION PAYMENT WAS MADE TO ALISON BYERLY (PRESIDENT) THE PAYMENT IS IN ACCORDANCE WITH THE EMPLOYMENT CONTRACT AND/OR AUTHORIZATIONS FROM THE BOARD OF TRUSTEES AND ARE SPECIFIC TO THE PRESIDENT HOUSING ALLOWANCE - AS PART OF THEIR EMPLOYMENT CONTRACT AND FOR THE CONVENIENCE OF THE COLLEGE, A COLLEGE-OWNED RESIDENCE WAS PROVIDED TO OFFICER ALISON BYERLY (PRESIDENT) THE HOUSING PROVIDED IS LOCATED ON COLLEGE PROPERTY AND ITS IN CONJUNCTION WITH THE OFFICER'S DUTIES. THE ESTIMATED ANNUAL VALUE OF THE HOUSING PROVIDED IS INCLUDED AS A ${\sf NONTAXABLE}$ BENEFIT IN THIS RETURN IN THE AMOUNT OF ${\sf \$43,264}$ FOR PRESIDENT BYERLY. IT IS THE POLICY OF THE COLLEGE'S BOARD OF TRUSTEES THAT THE PRESIDENT RESIDE ON COLLEGE PROPERTY. THE PRESIDENT DETERMINES IF THE DUTIES OF OTHER OFFICERS. REQUIRE THEM TO RESIDE ON COLLEGE PROPERTY PERSONAL SERVICES - IN ACCORDANCE WITH THE POLICY OF THE COLLEGE'S BOARD OF TRUSTEES AND THE PRESIDENT'S EMPLOYMENT CONTRACT, THE PRESIDENT OF THE COLLEGE IS REQUIRED TO RESIDE ON COLLEGE PROPERTY THE PRESIDENT'S HOUSE SERVES NOT ONLY AS A RESIDENCE, BUT ALSO AS A HOST LOCATION FOR MANY COLLEGE EVENTS AND THE COLLEGE PROVIDES STAFF TO MAINTAIN THE HOME FOR CALENDAR YEAR 2016. \$5,940 WAS THE PORTION OF THE PURPOSES, INCLUDING FUNDRAISING AND DONOR RELATION ACTIVITIES

PURPOSE FULFILLED BY THE COMPANION AND ANY REQUIRED PRIOR APPROVALS. THE COLLEGE WILL PAY FOR TRAVEL EXPENSES OF A

THE COMPENSATION COMMITTEE ESTABLISHES THE PRESIDENT'S COMPENSATION. THE COMMITTEE REVIEWS DATA OBTAINED FROM ITS

HOUSEKEEPER'S SALARY WAS DETERMINED TO BE FOR PERSONAL SERVICES AND INCLUDED AS REPORTABLE COMPENSATION, SOCIAL CLUB - THE COLLEGE MAINTAINS A SOCIAL CLUB MEMBERSHIP IN THE NAME OF THE PRESIDENT THAT IS PRIMARILY USED FOR BUSINESS

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 24-0795686

Name: LAFAYETTE COLLEGE

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

(A) Name and Title			W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
1ALISON R BYERLY PRESIDENT	(1)	472,884	30,000	63,642	25,175	69,560	661,261	0
FNLSIDENT	(11)	0	0	0	0			0
1JOSEPH S BOHRER CHIEF INVESTMENT OFFICER	(1)	348,019	250,000	9,358	25,175	10,092	642,644	0
	(11)	0	0	0	0			0
2ROGER A DEMARESKI VP OF FINANCE & ADMINISTRATION/TREAS	(1)	318,900	15,000	7,991	25,175	22,995	390,061	0
	(11)	0	0	0	0	-0	- 0	0
3ANNETTE DIORIO VP OF CAMPUS LIFE/SR DIVERSITY OFFI	(1)	200,445	0	1,586	19,343	10,555	231,929	0
	(11)	0	0	0	0	- 0	0	0
4 LESLIE F MUHLFELDER VP OF HUMAN RESOURCES &	(1)	295,453	3,000	47,484	25,175	24,115	395,227	0
GENERAL COUN	(11)	0	0	0	0	- 0		0
5JAMES F KRIVOSKI VP & LIAISON TO BOARD OF	(1)	192,922	0	5,007	18,542	9,599	226,070	0
TRUSTEES	(11)	0	0	0	0		0	0
6 GREGORY V MACDONALD VP OF ENROLLMENT	(1)	207,138	10,000	34,387	20,658	24,913	297,096	0
MANAGEMENT	(11)	0	0	0	0		-	0
7JOHN L O'KEEFE VP & CHIEF INFORMATION	(1)	211,728	3,000	20,693	21,812	22,426	279,659	0
OFFICER	(11)	0	0	0	0			0
8KIMBERLY A SPANG VP OF DEVELOPMENT &	(1)	247,184	0	9,355	24,225	21,976	302,740	0
COLLEGE RELATION	(11)	0	0	0	0			0
9 SAIYID A RIZVIPROVOST	(1)	296,395	15,000	5,482	25,175	21,756	363,808	0
	(11)	0	0	0	0			0
10CRAIG BECKER ASSOCIATE VP FOR FINANCE	(1)	217,496	1,500	20,341	21,563	24,954		0
& BUSINESS	(11)	0	0	0	0			0
11MERVIN A BURTON DIRECTOR OF INVESTMENTS	(1)	226,544	150,000	368	21,642	2,525	401,079	0
	(11)	0	0	0	0			0
12WILLIAM M CRAIN SIMON PROFESSOR OF	(1)	207,589	0	7,022	21,082	26,436	262,129	0
ECONOMICS	(11)	0	0	0	0		-	0
13JOHN KINCAID PROFESSOR/DIRECTOR OF	(1)	223,089	0	4,507	21,534	10,902	260,032	0
MEYNER CENTER	(11)	0	0	0	0			0
14BRUCE A MURPHY KIRBY PROFESSOR OF	(1)	223,171	0	9,426	21,800	20,375	274,772	0
GOVERNMENT & LAW	(11)	0	0	0	0		-	0
15FRANCIS B O'HANLON HEAD MEN'S BASKETBALL	(1)	234,034	0	8,660	22,976	45,840	311,510	0
COACH	(11)	0	0	0	0			0
						<u> </u>	I U	<u> </u>

efi	ile GRAPHIC print - DO	NOT PROCESS AS	Filed Data -									DLN:	93493	13507	7868	
(Fo	hedule K orm 990)	➤ Complete if t	he organization ans explanations	Information of the swered "Yes" to Form s, and any additional Attach to Form 99	n 990, Part informatio 0.	IV, line n in Par	24a. rt VI.	Provide des				4	201 201 pen to	16		
	nal Revenue Service (▶Information	on about Schedule	K (Form 990) and its	instruction	s is at	<u>www.</u>	.irs.gov/fori	<u>11990</u> .	Fn	nployer ide		Inspec			
	AYETTE COLLEGE										-0795686	TUTICALI	on numb	er		
D	art I Bond Issues									24	-0/93000					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price		(f) Description of purpose (g) [(g) Defeased		n) On nalf of suer		Pool ncing		
										Y	es No	Yes	No	Yes	No	
A	NORTHAMPTON CITY GPA (SERIES 2013 A)	23-3007498	66353LCF2	11-26-2013	35,1	46,792		ND SERIES 9 PROJECTS	8A, 98B, VAR		X		X		X	
В	NORTHAMPTON CITY GPA (SERIES 2010 A AND B)	23-3007498	66353LAY3	04-30-2010	26,6	89,800	REFU PROJI		OA, VAR CAP		X		Х		Х	
С	NORTHAMPTON CITY GPA (SERIES 2008)	23-3007498	66353LAK3	08-21-2008	98,6	38,389		ND SERIES 9 NOTES	7, 04, 04 2ND), 97	Х		X		X	
D	NORTHAMPTON CITY GPA (SERIES 2006)	23-3007498	66353LAG2	09-14-2006	15,1	00,000		STRUCT /REN LITIES	OV ATHLETIC	;	X		X		X	
Pa	rt II Proceeds						<u> </u>									
						Α		E	3		С			D		
1											75,05	5,000		4,	100,000	
2		defeased														
						35,14	5,146,792 26,690,421				98,650,001			1 15,312,344		
4_		e funds														
		proceeds													108,121	
<u>6</u>		eds														
7 8		proceeds				34	6,792									
-8 -9		res from proceeds										697			10.700	
10	• •	proceeds				10.22	2 606		4 400 431		6 21	1,304		15	10,709 193,514	
11						10,322,686 4,400,421 22,200,000 22,290,000				92,33			13,	193,314		
12				<u> </u>			7,314		22,290,000		92,33	3,000				
13		etion				2,20	,,,,,,,,,,	20	13		2011			2007		
					Yes	N	0	Yes	No	Yes	No.	,	Yes		No	
14	Were the bonds issued as	part of a current refundir	ng issue?			X	(Х		×				X	
15	Were the bonds issued as	part of an advance refun	dıngıssue?		l x			Х		Х					X	
16	Has the final allocation of	proceeds been made?.				X		X		X			X			
17	Does the organization ma		d records to support t	the final allocation of	X			X		X			X			
Pa	rt IIII Private Busine															
						Α		E	<u> </u>		С			D		
					Yes	N	o	Yes	No	Yes	N ₄)	Yes		No	
1	Was the organization a pa financed by tax-exempt b	artner in a partnership, or oonds?	a member of an LLC,	which owned property		×	·		Х		×				Χ	
2	Are there any lease arran	gements that may result i	n private business us	e of bond-financed		×	<		Х		X				X	
For	Paperwork Reduction Act)_	. C	t No 5	0193F					chedu	le K (Fo	rm 990)) 2016	

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Part IV

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Schedule K (Form 990) 2016

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Page 2

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?

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

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

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

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

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

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

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

DATE THE REBATE COMPUTATION WAS PERFORMED 03/16/2015

		Yes
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	
b	Name of provider	

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

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

requirements of section 148? . . .

applicable regulations?

Return Reference

DATE REBATE COMPUTATION

Schedule K (Form 990) 2016

period?

Part V

Part VI

PERFORMED

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

ISSUER NAME NORTHAMPTON CITY GPA (SERIES 2010 A AND B) DATE THE REBATE COMPUTATION WAS PERFORMED 02/13/2015 ISSUER NAME NORTHAMPTON CITY GPA (SERIES 2008) DATE THE REBATE

Explanation

COMPUTATION WAS PERFORMED 06/25/2012 ISSUER NAME NORTHAMPTON CITY GPA (SERIES 2006) DATE THE

REBATE COMPUTATION WAS PERFORMED 03/13/2015 ISSUER NAME NORTHAMPTON CITY GPA (SERIES 2003)

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No

Yes

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Yes

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Yes

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Return Reference	Explanation
FORM 990, SCHEDULE K, PART I, SUPPLEMENTAL INFORMATION	NORTHAMPTON COUNTY GPA (SERIES 2010 A AND B) IS ONE INTEGRATED STRUCTURE AS REPORTED ON IRS FORM 8038 IT IS COMPRISED OF TWO SUB-COMPONENTS, SERIES 2010 A WHICH HAD PROCEEDS OF \$22,289,379 FOR THE PURPOSE OF RETIRING THE SERIES 2000 BONDS WAS STRUCTURED AS VARIABLE RATE DEBT AND SERIES 2010B WHICH HAD PROCEEDS OF \$4,400,421 FOR VARIOUS CAPITAL PROJECTS AND IMPROVEMENTS WAS STRUCTURED AS FIXED RATE DEBT

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	THE DIFFERENCE FROM PART I(E) IS DUE TO INVESTMENT EARNINGS

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Return Reference	Explanation
FORM 990, SCHEDULE K, PART III	THE COLLEGE CONTRACTS WITH A FOR-PROFIT DINING SERVICE PROVIDER FOR THE MANAGEMENT OF THE DINING OPERATIONS ON CAMPUS THE CURRENT CONTRACT IS STRUCTURED SUCH THAT THE PREPONDERANCE OF FEES IS BASED ON A PER CAPITA CHARGE A SMALL PORTION OF THE PROCEEDS OF THE SERIES 2008 BONDS WERE USED TO RENOVATE ONE OF THE SEVEN DINING VENUES ON CAMPUS, BUT GIVEN ITS NATURE, THE COLLEGE, WITH THE ADVICE OF COUNSEL, BELIEVES THE CONTRACT WITH THE FOR-PROFIT DINING SERVICE PROVIDER IS A QUALIFIED MANAGEMENT CONTRACT AND NOT SUBJECT TO PRIVATE USE

Return Reference	Explanation
FORM 990, SCH K, PART IV, LINE 3, USE OF INTEREST RATE HEDGING CONTRACTS	THE COLLEGE HAS THREE INTEREST RATE HEDGING CONTRACTS IN PLACE THAT WERE ENTERED INTO TO MITIGATE THE COLLEGE'S INTEREST RATE RISK INHERENT WITH VARIABLE RATE STRUCTURED DEBT EACH OF THE HEDGING CONTRACTS REQUIRES THE COLLEGE TO PAY A FIXED RATE IN RETURN FOR A VARIABLE RATE THAT IS EXPECTED TO APPROXIMATE THE INTEREST RATE PAYABLE ON THE COLLEGE'S DEBT IN TYPICAL MARKETS NONE OF THE INTEREST RATE HEDGING CONTRACTS ARE STRUCTURED AS "QUALIFIED" HEDGES ON THE RECORDS OF THE ISSUING AUTHORITY FOR ANY OF THE COLLEGE'S DEBT ISSUANCES, WHICH IS THE NORTHAMPTON COUNTY GENERAL PURPOSE AUTHORITY AS SUCH, NONE OF THE INTEREST RATE HEDGES ARE INTEGRATED FOR TAX PURPOSES WITH A PARTICULAR DEBT ISSUANCE OF THE COLLEGE

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(Fo	orm 990)		pplemental Infor						ccrintions				7	201	6	
		P Complete ii tiii	explanations, and a	ny additional	informatio				scriptions,				_	'UI	U	
	rtment of the Treasury rnal Revenue Service	▶Informatio	► Atta n about Schedule K (Form	ch to Form 99 n 990) and its		s is at	www.	.irs.aov/foi	m990.					en to Pu nspectio		
Nam	e of the organization	7 2							<u></u> .		Employ	er ident		number		
LAFA	AYETTE COLLEGE										24-079	5686				
Pa	art I Bond Issues									ı						
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP # (d) [Date issued	(e) Issue	price		(f) Descript	on of purpose	((g) Det	feased		On		Pool
														alf of uer	fınar	ncing
											Yes	No	Yes	No	Yes	No
A	NORTHAMPTON CITY GPA (SERIES 2003)	23-3007498	66353LAA5 04-	02-2003	10,1	90,000	REFU	ND SERIES 9	93			Х		X		Х
В	NORTHAMPTON CITY GPA	23-3007498	66353LDE4 06-	14-2017	136.0	E0 000	CONT	EDUCTION/D	ARTIAL ADVANC			Х		X		X
ь	(SERIES 2017)	23-300/498	60353LDE4 06-	14-2017	136,0			NDING PRIO				^		^		^
Pa	rt II Proceeds		I I													
1	Amount of bonds retired					A			В		С			D		
	Amount of bonds legally defease															
	Total proceeds of Issue					10 19	0,000		136,050,000							
4	Gross proceeds in reserve funds					10,15	0,000		130,030,000							
5	Capitalized interest from procee															
6	Proceeds in refunding escrows .															
7	Issuance costs from proceeds .															
8	Credit enhancement from proce	eds														
9	Working capital expenditures fro															
10	Capital expenditures from proce															
11	Other spent proceeds					10,19	0,000									
12	Other unspent proceeds															
13	Year of substantial completion .				2	003										
					Yes	N ₁		Yes	No	Yes	s	No	_	Yes		No
14	Were the bonds issued as part of					X	(X							
15	Were the bonds issued as part of				X			X								
16	Has the final allocation of proce	eds been made? .			Х				Х							
17	Does the organization maintain proceeds?	adequate books and	records to support the final	allocation of	Х			×								
Pa	rt IIII Private Business Us															
						A	_		B Na	.	<u> </u>	B1 -			D	N-
1	Was the organization a partner financed by tax-exempt bonds?	ın a partnership, or a	a member of an LLC, which o	wned property	Yes	X		Yes	No X	Yes	5	No		Yes		No
2	Are there any lease arrangement property?	nts that may result in	private business use of bon	id-financed		X	(x							
For	Panerwork Reduction Act Notic				C:	at No. 5	01935	=				Sc	hadula	K (For	m 990) 2016

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

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?

hedge with respect to the bond issue?

Exception to rebate?

Arbitrage

Part IV

c

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

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

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

Page 2

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Schedule K (Form 990) 2016

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Yes

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No

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Yes

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No

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Yes

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Yes

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Nο

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2016

period?

Part V

D

D

No

Yes

Yes

Page 3

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of

No

Yes

No

Yes

No

Х

No

Yes

Yes

Yes

No

No

Yes

efile GRAPHI	C print - DO NO	T PROCES	S As Fi	iled Data -					DI	N: 93	4931	350	77868
Schedule L (Form 990 or 990	P-EZ)		► Compl rm 990, Pa	ns with li lete if the orga art IV, lines 2	anization ans 5a, 25b, 26, 3	swered 27, 28a, 28b,		ic,			MB No		
				990-EZ, Part							20	JΙ	O
Department of the Trea	asurv	ormation abo		ile L (Form 99 www.irs.gov	90 or 990-EZ		ructio	ns is	at	()pen Insp	to Pu pecti	
Name of the org LAFAYETTE COLLEC								•	yer ide 5686	entifica	ition r	umb	er
	ss Benefit Trar						rganız	ation:	s only)				
	lete if the organiza										1/4) C	
1 (a) Name of disquali	ned person	(0)	Relationship be	organization	ilfied person a	na		escripi ansacti			es	No No
Part II Loa Cor rep (a) Name of	mount of tax, if an ans to and/or I an plete if the organ orted an amount o (b) Relationship with organization	From Interestation answer n Form 990, F	ested Per red "Yes" or Part X, line (d) Loan	r sons. n Form 990-EZ 5, 6, or 22			90, Pai	(g) In default? A		line 26, or if t (h) Approved by board or committee?		the organizatio	
			То	From			Yes	No	Yes	No	Yes		No
										-			
Total Part IIII Gra	nts or Assistar	rce Benefiti	ina Inter		≻ \$ ns								
	nplete if the orga					line 27.							
(a) Name of Inter	rested person (b) Relationship erested persoi organizati	n and the	(c) Amount	of assistance	(d) Type	of assı	stand	e	(e) Pu	rpose (of assi	stance
									+				
									+				
or Danerwork Red	luction Act Notice s	ean the Instruc	tions for Fo	rm 000 or 000-l	7 C:	t No 500564		C-1		I (Form	000 0	000	F7\ 201

Complete if the organization	answered "Yes" on Forr	n 990, Part IV, line 28a	a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz rever	f ation's
				Yes	No
(1) DONNA KRIVOSKI	SPOUSE OF VICE PRESIDENT, J KRIVOSKI	46,704	SEE PART V		No

Explanation

Schedule L (Form 990 or 990-EZ) 2016

DONNA KRIVOSKI IS EMPLOYED BY THE COLLEGE AS THE DIRECTOR OF PARENT RELATIONS

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

Return Reference

SCH L, PART IV, BUSINESS

TRANSACTIONS INVOLVING INTERESTED PERSONS

Supplemental Information

Part V

efil	e GRAPHIC pr	int - DO NOT PF	ROCESS	As Filed Data -		DLN	l: 9349313	5077	868
	IEDULE M		- N	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							
	tment of the Treasury al Revenue Service	▶Information abo	out Schedu	le M (Form 990) and its i			Inspe	ectior	
	e of the organizat ÆTTE COLLEGE	ion				Employer ide	ntification n	umbe	•
DAI A	ETTE COLLEGE					24-0795686			
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) od of determi contribution a		:s
1	Art—Works of art	t	Х	3	674,900	APPRAISAL			
2	Art—Historical tr								
3	Art—Fractional in								
4	Books and public		X		8,116	APPRAISAL			
5	Clothing and hou goods								
6	Cars and other v								
7	Boats and planes	s							
8	Intellectual prope	erty							
9	Securities—Public	•	Х	55	5,623,619	HIGH/LOW OF	DAILY MV		
	Securities—Close Securities—Partr	nership, LLC,							
12	or trust interest Securities—Misce								
13		vation istoric							
	Qualified conserve contribution—Of	vation ther							
	Real estate—Res								
16	Real estate—Cor								
17 18	Real estate—Oth Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	ts							
23	Scientific specim	ens	Х	2	78,100	APPRAISAL			
	Archeological art	ifacts							
	Other ► (DS/SERVICES)		X	1	400	FMV			
26	Other ▶ (
27	Other ▶ (
28	Other ▶ (
29				tion during the tax year for 3, Part IV, Donee Acknowled		29			5
						_		Yes	No
30a	During the year	, did the organizatio	n receive by	contribution any property r	eported in Part I, lines 1 th	rough 28, that			
	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?			. 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 reviev	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		No
b	If "Yes," describ	e ın Part II							
33	If the organizati	·	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
For P		on Act Notice, see the	e Instruction	s for Form 990	Cat No. 512271	Sch	edule M (Form	000)	(2016)

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										
	imber of contributions, the number of items received, or a combination of both. Also complete									
this part for any add	itional information.									
Return Reference	Explanation									
Schedule M (Form 990) (20										

efile GRAPH	IC print - DO NOT PROCESS	DLN: 93493135077868				
SCHEDUL (Form 990 or EZ)	990 or 990-EZ pecific questions on al information. and its instructions is at OMB No 1545-0047 2016 Open to Public Inspection					
Name of the org LAFAYETTE COLLECT	O, Supplemental Information	Employer identification number 24-0795686				
Return Reference	Explanation					
FORM 990, PART III, LINE 1 MISSION STATEMENT	URE THE INQUIRING MIND AND TO INTEGRATE INTELLECTUAL, SOCIAL, AND PERSONAL GROWTH THE COL LEGE STRIVES TO DEVELOP STUDENTS' SKILLS OF CRITICAL THINKING, VERBAL COMMUNICATION, AND Q SSION UANTITATIVE REASONING AND THEIR CAPACITY FOR CREATIVE ENDEAVOR, IT ENCOURAGES STUDENTS TO					

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	GOVERNANCE, MANAGEMENT, AND DISCLOSURE - GOVERNING BODY AND MANAGEMENT THE EXECUTIVE COMMITTEE OF THE BOARD CONSISTS OF THE CHAIR, VICE CHAIR, AND SECRETARY OF THE BOARD, THE CHAIR S OF THE STANDING COMMITTEES OF THE BOARD, THE PRESIDENT OF THE COLLEGE, AND THE IMMEDIATE PAST CHAIR OF THE BOARD FOR THE PERIOD OF ONE YEAR NEXT ENSUING THE TERMINATION OF HIS OR HER INCUMBENCY IN THAT OFFICE IN THE EVENT HE OR SHE CONTINUES TO SERVE DURING THAT PERIOD AS A MEMBER OF THE BOARD OF TRUSTEES THE EXECUTIVE COMMITTEE TRANSACTS SUCH BUSINESS AS MAY BE COMMITTED TO IT BY THE BOARD, AND, WHEN THE BUSINESS OF THE COLLEGE REQUIRES, IT MAY ACT FOR THE BOARD IN ALL MATTERS NOT ESPECIALLY RESERVED, SUBJECT TO APPROVAL BY THE BOARD AT ITS FIRST MEETING THEREAFTER THE COMMITTEE HAS THE FOLLOWING RESPONSIBILITIES DEVELOPMENT OF A LONG-RANGE MASTER PLAN FOR THE COLLEGE SUBJECT TO PERIODIC REVIEW AND REVISION, CONSIDER AND RECOMMEND POLICIES FOR FINANCIAL LONG-RANGE PLANNING, BUDGETING, PRICING AND FEES, NOMINATE CANDIDATES FOR THE BOARD COPIES OF THE MINUTES OF ITS TRANSACTIONS ARE CIRCULATED AMONG THE MEMBERS OF THE BOARD PRIOR TO THE NEXT ENSUING MEETING OF THE BOARD, AND, WHEN APPROVED, REPORTED AS TRANSACTIONS OF THE BOARD

Return Explanation
Reference

FORM 990,	GOVERNANCE, MANAGEMENT, AND DISCLOSURE - GOVERNING BODY AND MANAGEMENT FROM TIME TO TIME,
PART VI,	VARIOUS TRUSTEES MAY HAVE RELATIONSHIPS OCCURRING IN THE NORMAL COURSE OF BUSINESS THESE
SECTION A,	TRANSACTIONS ARE AT ARM'S LENGTH AND REPORTED TO THE COLLEGE IN COMPLIANCE WITH ITS CONFLI
LINE 2	CT OF INTEREST POLICY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	GOVERNANCE, MANAGEMENT, AND DISCLOSURE - POLICIES PROCESS FOR THE REVIEW OF FORM 990 THE F ORM 990 RETURN IS PREPARED BY THE COLLEGE'S ADMINISTRATION AND FORWARDED TO THE COLLEGE'S OUTSIDE TAX ADVISOR FOR REVIEW AND INPUT INTO ELECTRONIC MEDIA THE COLLEGE WILL DISCUSS T HE RETURN WITH ITS OUTSIDE TAX ADVISOR AND MAKE REVISIONS PRIOR TO PRINTING THE FIRST DRAF T RETURN THE AUDIT COMMITTEE REVIEWS THE FIRST DRAFT RETURN, RECOMMENDS CHANGES, WHICH AF E THEN INCORPORATED INTO A REVISED DRAFT RETURN THE AUDIT COMMITTEE REVIEWS THE SECOND DR AFT RETURN TO ENSURE THE COMMITTEE'S REQUESTED CHANGES WERE MADE THE ADMINISTRATION WILL THEN DISTRIBUTE THE SECOND DRAFT RETURN TO THE FULL BOARD OF TRUSTEES WITH A REQUEST FOR R EVIEW AND COMMENT IF ANY QUESTIONS OR COMMENTS ARE RECEIVED FROM A BOARD MEMBER AND THE ETURN IS REVISED AS A RESULT, THE ADMINISTRATION WILL ADVISE THE FULL BOARD OF THE CHANGE BEFORE FILING OF THE FINAL RETURN

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY FOR TRUSTEES, BOARD MEMBERS, OFFICERS OF THE ADMINISTRATIO N, AND OTHER KEY EMPLOYEES OF THE COLLEGE WAS APPROVED BY THE COLLEGE'S BOARD OF TRUSTEES ON OCTOBER 27, 1979 THIS POLICY IS PROVIDED TO ALL APPLICABLE INDIVIDUALS ANNUALLY FOR THE REVIEW AND DISCLOSURE OF BOTH ANY EXCEPTIONS TO THE POLICY AND ANY AFFILIATIONS FOR WHICH THE POLICY REQUIRES DISCLOSURE THE COLLEGE ALSO REQUIRES THE SAME INDIVIDUALS TO PREPARE A FORM 990 DISCLOSURE ANNUALLY ALL DISCLOSURES REQUIRED UNDER THIS POLICY MUST BE DIRECTED IN WRITING TO THE SECRETARY OF THE BOARD OF TRUSTEES WHO IS RESPONSIBLE FOR THE ADMINISTRATION OF THIS POLICY MATTERS UNDER THIS POLICY CONCERNING TRUSTEES ARE INITIALLY REPORTED TO THE CHAIRPERSON OF THE BOARD AND THE COLLEGE'S GENERAL COUNSEL FOR ACTION MATTER SCONCERNING STAFF ARE REFERRED INITIALLY TO THE COLLEGE'S GENERAL COUNSEL AND THEN TO THE PRESIDENT INFORMATION DISCLOSED TO THE SECRETARY (OR CHAIRPERSON OR PRESIDENT) IS HELD IN CONFIDENCE EXCEPT WHEN THE BEST INTEREST OF THE INSTITUTION IS SERVED BY DISCLOSING THE
	INFORMATION TO THE BOARD IN EXECUTIVE SESSION

990 Schedule O, Supplemental Information

Return
Reference

Explanation

FORM 990,	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE OFFICERS OF THE ADMINISTRATION THE PR
PART VI,	ESIDENT RECOMMENDS THE COMPENSATION FOR OFFICERS (VICE-PRESIDENTS) BASED ON A WRITTEN ANN
SECTION B,	UAL PERFORMANCE SUMMARY, EACH OFFICER'S COMPENSATION IS THEN ESTABLISHED BY THE COMPENSATI
LINE 15	ON COMMITTEE WHICH REVIEWS DATA OBTAINED FROM ITS EXTERNAL COMPENSATION CONSULTANT ON SALA
	RIES OF COMPARABLE OFFICERS FROM COMPARABLE INSTITUTIONS AND ADJUSTS THAT DATA THROUGH SUR
	VEYS AND OTHER AVAILABLE RESOURCES

Return Explanation
Reference

FORM 990,	THE COLLEGE'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S PUBLIC WEBSITE
PART VI,	THE COLLEGE'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE
SECTION C,	PUBLIC ON ITS WEBSITE REQUESTS FOR COPIES OF FORMS 990 AND 990T ARE PROVIDED PROMPTLY UP
LINE 19	ON REQUEST IN EITHER HARD-COPY OR ELECTRONIC FORMS, AND THE COLLEGE DOES NOT CHARGE FOR EI
	THER COPYING OR MAILING COSTS AFTER THE FILING OF THE FORM 990 RETURN FOR THE SAME TAX YE
	AR, THE COLLEGE WILL PROVIDE A COPY TO GUIDESTAR FOR PUBLICATION ON THEIR WEBSITE

Return Explanation

11010101100	
FORM 990,	CHANGE IN ESTIMATE ANNUITIES PAYABLE 953,169 CHANGE IN FV OF HEDGE/SWAPS 5,405,255 CHANG
PART XI,	E IN POSTRETIREMENT BENEFITS 4,379,000 LOSS ON DEFEASEMENT OF DEBT -3,383,509
LINE 9	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE R

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

OMB No 1545-0047

DLN: 93493135077868

Open to Public Inspection

Schedule R (Form 990) 2016

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

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

Name of the organization **Employer identification number** LAFAYETTE COLLEGE 24-0795686 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (b) (c) (e) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) (b) (c) (d) (f) (g) Section 512(b) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No (1)SCHAEFER BERTHA B UW PERPETUAL TRUST PA 501(C)(3) LAFAYETTE COLLEGE Yes **BNY MELLON PO BOX 185** PITTSBURGH, PA 15230 23-6293005 (2)WOLFE DUMONT PERPETUAL TRUST NC 501(C)(3) LAFAYETTE COLLEGE Yes 1 W 4TH ST 4TH FL WINSTON SALEM, NC 27101 23-6013820 (3) ANNA P DENLINGER TRUST PERPETUAL TRUST NC 501(C)(3) LAFAYETTE COLLEGE Yes 1 W 4TH ST 4TH FL WINSTON SALEM, NC 27101 22-6144493 (4)CHARLES W BLAIR PERPETUAL TRUST IL 501(C)(3) LAFAYETTE COLLEGE Yes 10 S DEARBORN CHICAGO, IL 60603 72-6130983 (5) EDWARD BRINKER TR FBO CLAUDIA PERPETUAL TRUST PΑ 501(C)(3) PF LAFAYETTE COLLEGE Yes BNY MELLON PO BOX 185 PITTSBURGH, PA 15230 25-6770250 (6) J H & R H RUMBAUGH FOUNDATION PERPETUAL TRUST NC LAFAYETTE COLLEGE 501(C)(3) Yes 1525 W HARRUS BLVD D1114-044 CHARLOTTE, NC 28262 59-6851866

Cat No 50135Y

(a) Name, address, and EIN related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomin income(relunrelate excluded tax und sections 5	ant Sh ated, total ed, from er	(f) nare of l income		(† Dispropi allocai	rtionate tions?	Code amour 20 Sched	(i) e V-UBI nt in box 0 of dule K-1 n 1065)	partr	al or ging ner?	(F Percei owne
					<u> </u>				Yes	No			Yes	No	
													-	$\overline{}$	
▼ Identification of Related Orga	nizations Taxable as a C	orporation	or Trus	t Complet	e if the org	anizatio	n answ	vered "Yes	" on Fo	orm 9	90, Pi	art IV,	line	34	
Identification of Related Organ because it had one or more relate (a) Name, address, and EIN of related organization		a corporation	(c) Legal omicile or foreign	st during t			entity :	vered "Yes (f) Share of total income	Share	(g) of end- year assets		art IV, (h Percer owner) ntage	Se (1	ent
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated as (b)	a corporation	on or tru (c) Legal omicile	st during t	he tax yea (d) ct controlling	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	(ction 3) co ent fes
because it had one or more relate (a) Name, address, and EIN of related organization RITABLE REMAINDER UNITRUSTS (37)	ed organizations treated as (b) Primary activity	a corporation	(c) Legal comicile or foreign country)	St during t	he tax yea (d) ct controlling entity	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	ent es
because it had one or more relate (a) Name, address, and EIN of related organization RITABLE REMAINDER UNITRUSTS (37)	ed organizations treated as (b) Primary activity INVESTMENTS	a corporation	on or tru (c) Legal omicile or foreign ountry) PA	St during t	he tax yea (d) ct controlling entity YETTE LEGE	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	ent /es es
because it had one or more relate (a) Name, address, and EIN of related organization	ed organizations treated as (b) Primary activity INVESTMENTS	a corporation	on or tru (c) Legal omicile or foreign ountry) PA	St during t	he tax yea (d) ct controlling entity YETTE LEGE	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	ent /es es
because it had one or more relate (a) Name, address, and EIN of related organization RITABLE REMAINDER UNITRUSTS (37)	ed organizations treated as (b) Primary activity INVESTMENTS	a corporation	on or tru (c) Legal omicile or foreign ountry) PA	St during t	he tax yea (d) ct controlling entity YETTE LEGE	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	eni /es es
because it had one or more relate (a) Name, address, and EIN of related organization RITABLE REMAINDER UNITRUSTS (37)	ed organizations treated as (b) Primary activity INVESTMENTS	a corporation	on or tru (c) Legal omicile or foreign ountry) PA	St during t	he tax yea (d) ct controlling entity YETTE LEGE	r. (e) Type of e (C corp, S	entity :	(f) Share of total	Share	(g) e of end- year		(h Percer) ntage	Se (1	es

(1)GEORGE C LAUB UNITRUST

(4)ANNA P ENLINGER TRUST

(3) H & R H RUMBAUGH FOUNDATION

(2)SCHENK PETER AND HAZEL 7 PLAN 1 UNITRUST

Sale of assets to related organization(s)

Lease of facilities, equipment, or other assets to related organization(s) . . .

Reimbursement paid by related organization(s) for expenses . . .

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

Name of related organization

Purchase of assets from related organization(s).

Exchange of assets with related organization(s) . . .

Part V Transactions With Related Organizations Complete if 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						Ye	s 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?							T		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity					1:	а	No		
b Gift, grant, or capital contribution to related organization(s)					11	o	No		
c Gift, grant, or capital contribution from related organization(s)					. 1	c	No		
d Loans or loan guarantees to or for related organization(s)					10	d	No		
e Loans or loan guarantees by related organization(s)					10	e	No		
						\neg	T		

Page 3

No

No

No

No

No

No No

No

No

No No

No No

1h

1i

1j

11

1m

1n

1r

Schedule R (Form 990) 2016

(d)

Method of determining amount involved

CHARITABLE REMAINDER TRUST

CHARITABLE REMAINDER TRUST

CASH

CASH

_	only grants, or capital continuation for the continuation (c)	- 1	- 1	
d	Loans or loan guarantees to or for related organization(s)	1 d	T	
е	Loans or loan guarantees by related organization(s)	1e	Τ	
			Τ	
f	Dividends from related organization(s)	1f)	Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction type (a-s)

(c)

Amount involved

130,034

50,157

128,000

44.000

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

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

Additional Data

(1)

(1)

(2)

(3)

23-6293005

23-6013820

22-6144493

25-6770250 (5)

59-6851866

10 S DEARBORN CHICAGO, IL 60603 72-6130983 (4)

BNY MELLON PO BOX 185 PITTSBURGH, PA 15230

CHARLOTTE, NC 28262

1525 W HARRUS BLVD D1114-044

1 W 4TH ST 4TH FL WINSTON SALEM, NC 27101

1 W 4TH ST 4TH FL WINSTON SALEM, NC 27101

BNY MELLON PO BOX 185 PITTSBURGH, PA 15230

Software Version: EIN: 24-0795686

Software ID:

Name: LAFAYETTE COLLEGE

(b)

Primary activity

PERPETUAL TRUST

PERPETUAL TRUST

PERPETUAL TRUST

PERPETUAL TRUST

PERPETUAL TRUST

PERPETUAL TRUST

(c)

Legal domicile

(state

or foreign country)

PΑ

NC

NC

ΙL

PΑ

NC

(d)

Exempt Code

section

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

(e)

Public charity

status (if section 501(c)

(3))

PF

PF

PF

PF

lpF.

PF

(f)

Direct controlling

entity

LAFAYETTE COLLEGE

LAFAYETTE COLLEGE

LAFAYETTE COLLEGE

LAFAYETTE COLLEGE

LAFAYETTE COLLEGE

LAFAYETTE COLLEGE

(g)

Section 512

(b)(13)

controlled

entity? Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (a) Name, address, and EIN of related organization