

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2016

Dep	artment of th	ne Treasury	► Do not enter socia	I security numbers on t	this form as	it may be	made public	1700	Open to		
Inter	mal Revenue	Service		Form 990 and its instr	uctions is at	www.irs.	gov/form990	100	Inspec	tion	
<u>A</u>	For the 2	016 calen	dar year, or tax year beginning	07/01	, 2016, a	nd ending	06	30	, 20 17		
В	Check if ap	pplicable C	Name of organization GOUCHER	COLLEGE				D Employe	r identification r	number	
	Address ch	hange	Doing business as	·					52-0591613		
	Name char	nge	Number and street (or P O box if m	all is not delivered to street	address)	Room/suit	е	E Telephon	e number		
	Initial retur	ո [1	1021 Dulaney Valley Road			Ì			410-337-6000		
	Final return/	terminated.	City or town, state or province, could	ntry, and ZIP or foreign post	tal code						
	Amended i	return E	Baltimore, MD, 21204					G Gross red	ceipts \$	179,131,733	
	Application	n pending F	Name and address of principal offic	er Lynne Lochte			H(a) Is this a gr	oup return for s	ubordinates? Ye	s 🗹 No	
		1	1021 Dulaney Valley Road, Balt	imore, MD 21204	_	<u></u>			included? Ye	_	
$\overline{}$	Tax-exemp	ot status	501(c)(3) 501(c) () ◀ (insert no) 🔲 4	4947(a)(1) or	527	If "No," atta	ch a list (se	e instructions)	_	
J	Website:	► www	v.goucher.edu		(H(c) Group	exemption i	number 🕨		
ĸ	Form of org		Corporation Trust Associa	ation ☐ Other ►	L Yea	r of formation			of legal domicile	MD	
Р	art I	Summa	ary		1						
	1 B	Briefly des	scribe the organization's miss	ion or most significan	nt activities:	Gouch	er College is	dedicate	d to a liberal a	rts	
9			that prepares students within								
ě	1 7	hinking.						241		Z::::::::::::	
Ē	2 0		s box ▶☐ if the organization	discontinued its opera	ations or dis	sposed o	f more than	25% of i	ts net assets.		
ò	3 1		f voting members of the gove			-		3		36	
æ; •	4 1		f independent voting membe			CUE-14\	FD	4		35	
Sec.	5 T		ber of individuals employed i	1				5		1,931	
Σ̈́	6 T		ber of volunteers (estimate if		H	-		6		947	
Activities & Governance	7a T		lated business revenue from			172		7a			
	1		ted business taxable income	, , , , ,	(No. 10.	· · ·	S	7b		681,407	
<u>9</u>];;;	 	ect di ii cia	ted business taxable income	70111 0111 330-1, mile	°° OG I	DENT	Prior Ye		Current Y	51,407 /ear	
	8 0	ontributio	ons and grants (Part VIII, line	1h\							
Revenue	1		service revenue (Part VIII, line	•		· ·		,926,402		1,817,463	
Ver			it income (Part VIII, column (A			· · · ⊢		617,725		3,673,339	
æ	1			•				239,488		7,524,744	
	1		enue (Part VIII, column (A), line		,	_		,057,907		1,626,931	
			nue-add lines 8 through 11 (r			le 12)		,841,522		4,642,477	
			d similar amounts paid (Part I	* *	-3)	· · }-	32	556,459	3	4,883,198	
	1		aid to or for members (Part I)	0		0					
Expenses			ther compensation, employee			^{5~10)} ⊢	41	,284,077	4	1,713,691	
Ë	1		nal fundraising fees (Part IX, o			.:: 		40,024	24,822		
Ä			raising expenses (Part IX, col			2,093				****	
_	ľ	•	enses (Part IX, column (A), lin			∵ · ⊢		892,501		1,684,564	
	1		enses. Add lines 13-17 (must	-	• • •	_		773,061		8,306,275	
		revenue le	ess expenses. Subtract line 1	8 from line 12	<u> </u>			,068,461		3,663,798	
8 0.	_					<u>B</u>	eginning of Cui	rent Year	End of Y	ear	
Net Assets or Fund Balances	20 T		ets (Part X, line 16)			· · /_	372	444,600	39	0,049,647	
ag t	21 T		lities (Part X, line 26)			· · /_	110	,422,931	11	5,142,204	
			s or fund balances. Subtract I	ine 21 from line 20	<u></u>	<u> </u>	262	021,669	27	4,907,443	
P	art II	Signatu	ure Block								
			, I declare that I have examined this						y knowledge an	d belief, it is	
tru	ie, correct, a	and complet	te Declaration of preparer (other than	officer) is based on all infor	rmation of whic	ch preparer	has any knowle	edge			
	ļ	rin	me forto				1	1049:	2018		
Się	gn	Signat	ture of officer				Dat	e			
He	re	Lynr	ne Lochte, VP for Finance and	Administration							
	}		or print name and title								
Pa		Print/Type	e preparer's name	Preparer's signature		Dat	e	Check [7 of PTIN		
				ļ		}		self-emp			
	eparer	Firm's name Firm							Firm's EIN ►		
US	se Only	Firm's ad		hone no							
Ma	v the IRS		this return with the preparer	shown above? (see in	structions)				<u> </u> Ye	s No	
_			tion Act Notice see the congre			· · · ·	110001			990 (0016)	

o) (Revenue \$

Other program services (Describe in Schedule O.)

Total program service expenses ▶

o including grants of \$

91,124,101

(Expenses \$



ISK-LMFO ABCDEFG Page 3

art	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,"		Yes	No
·	complete Schedule A	1	✓	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	2	✓	
4	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? If "Yes," complete Schedule C, Part II	3 4	V	/
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? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	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	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	√	
9	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 services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	√	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	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	11e	√	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	
14 a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓	
_	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	14b	1	}
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	1	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
		F	- 000	10040

Part	Checklist of Required Schedules (continued)		Ves	N-
20 ^	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
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		√
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	✓	
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	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	✓	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c	1	
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	√	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	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 contributions? If "Yes," complete Schedule M	30	> >	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
	Did the organization own-100% of an entity-disregarded as-separate-from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
-34	- Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	· /	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	1	1
			m 990	2016

Part				_
	Check if Schedule O contains a response or note to any line in this Part V			
10	Enter the number reported in Box 2 of Form 1000 Fator 0 15 and applicable	ر ـــا	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3658 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			ł
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	! !	}	1
•	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	· •	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1931			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		 	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	t
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	1	
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	✓ _	
b	If "Yes," enter the name of the foreign country: Bermuda, Cayman Islands			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			1
	(FBAR).			L
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	/
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ا ا	ĺ	1
7	gifts were not tax deductible?	6b		├
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods) !		
•	and services provided to the payor?	7a	1	├
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	▼	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	''	 -	 -
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	ı,	· »."	<u> </u>
a	Initiation fees and capital contributions included on Part VIII, line 12]]	7 g c c]
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		27.0	
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		21	Į
a b	Gross income from members or shareholders		l	
_	against amounts due or received from them.)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	,	i
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		- 3	t
b	Enter the amount of reserves the organization is required to maintain by the states in which	[]	٠, ٤	İ
	the organization is licensed to issue qualified health plans		5.	
C	Enter the amount of reserves on hand	L		1_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ons.
Section	on 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 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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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?	4 5 6	▼	▼ ▼
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		<u>·</u> ✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	8b	√ _	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ado I	<u>/</u>
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		1
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	\vdash
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	1	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13 14 15	Did the organization have a written whistleblower policy?	13	1	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	√ · · · ·	
a b	Other officers or key employees of the organization	15b	7	
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	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?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed AK, FL, MA, MD, MI, NJ, NY, OH, O Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.			s only)
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 in financial statements available to the public during the tax year.			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Ronald Alex Antkowiak, (410)337-6060	cords	s: ▶	

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Page	7

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-	990	1/(11	n

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete 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.
- List all of the organization's **former** officers, key employees, and 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.

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

Check this box if fielther the organization i	or any relate	l	arriz		C)	ompe	1136	lea any currer	directo	r, or trustee.
(A)	(B))			ition			(D)	(E)) (F)
Name and Title	Average					than cost to the state of the s		Reportable	Reportable	Estimated
	hours per	office				or/trust		compensation	compensation from	amount of
	week (list any hours for	육종	l g	[♀	\$	육.풀	F	from the	related organizations	other compensation
	related	dire	量	Officer	y eg	ples plo)	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted		Į	`	Key employee	e co		(W-2/1099-MISC)	ł I	organization and related
	line)	rust	3	1	yee	mpe	ļ		ţ I	organizations
	}	8	Institutional trustee	1	ł	Highest compensated employee		ļ		
	 -	 	Ľ.	├-	ļ	8.	-			
Kimara Ahnert-Class of 91	4	ļ							1	
Trustee	0	1	1	1	ŀ	}		} o	o	0
Patricia K Batza-Class of 91	2			Γ						
Trustee	0	✓	<u></u>	ĺ.	١.	}) o	o	o
David I Bavar	4									
Trustee	0	✓	<u> </u>	L	<u>l</u>)o	<u> </u>	0
Melinda J Burdette-Class of 72	1									
Trustee	0	✓						0	0	o
Geoffrey Clapp-Class of 95	11			ĮΤ	Π					
Trustee	0	1	L		L			0	0	o
Richard J Davis	4									
Trustee	0	1	<u>. </u>					0	0	0
Joey Fink-Class of 2015	2	}	ļ	_						
Trustee	0	1	<u> </u>	_				<u> </u>	0	0
Lynn Toby Fisher-Class of 71	8	l	ł	}	}					
Trustee, Treasurer	0	1	L	1				<u> </u>	o	0
Norma Lynn Fox-Class of 76	4		1					1		
Trustee	0	✓	<u> </u>	L	<u> </u>		L	0	0	0
Elaine K Freeman-Class of 58	3	1	Ì		1					
Trustee	0	✓	L_	L	Ì	<u></u>		0	<u> </u>	0
Beth Himmelstein Goldsmith-Class 72	111		1							
Trustee	0	✓	L	L	<u> </u>			0	0	0
Todd Eric Hawkins-Class of 2010	3				Γ					
Trustee	0	✓	<u> </u>	L	<u> </u>			0	O	O
Sally M Herman-Class of 68	4							1		
Trustee	0	✓		L		[0	o	0
Linda K Himmelberger-Class of 74	2]								
Trustee	0	✓		L			<u> </u>	0	0	0

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

	1			(0			_			
/43	(P)			Posi	-			(5)	(E)	(F)
(A) Name and Title	(B)					than o		(D) Reportable	(E) Reportable	(F) Estimated
Name and little	Average hours per					ıs both or/trust			compensation from	amount of
	week (list any						<u> </u>	from	related	other
	hours for related	호	¥	Officer	ey e	B	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ecta	ᇹ	9	grif	st c	er	(W-2/1099-MISC)	(,, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	organization
	below dotted line)	Individual trustee or director	Institutional trustee	ı	Key employee	, e		Ì		and related organizations
	line)	ste	룺		e	bens		l		organizations
		"	8			Highest compensated employee		4		
	 	 	\vdash		<u> </u>		_	 		
Jessie J Holland-Class of 2012	22									
Trustee	0	/	\sqcup		 		<u> </u>	0	0	0
Miriam Brown Hutchins-Class of 73	55							ļ	;	
Trustee, Secretary	0	/	\square	✓			<u> </u>	0	0	0
Miriam E Katowitz-Class of 73	12							,		
Trustee, Chair	0	<u> </u>	Ш	✓	<u> </u>		<u> </u>	0	0	0
Ruth Shapiro Lenrow-Class of 74	10		1		}	}	,]	ļ	,
Trustee, Vice Chair	0	✓	Ш	✓			_	0	0	0
Jennifer Margolis Marquez -Class 01	2	}]	l	ļ	,)	}]	
Trustee	0	<u>_</u>	$oxed{oxed}$		L	<u> </u>	<u> </u>	0	0	0
Rachel S Martin-Class of 2014	3	ļ			}	•	}]	ļ	<u> </u>
Trustee	0	✓	L	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0	0	0
Percy Thomas Moore-Class of 95	2	j		}	}	}]	j]	
Trustee	0		$oxed{oxed}$	<u></u>	<u> </u>			0	0	0
Robert J Proutt	6	_] '	1]]	}	}]	
Trustee	0	1	<u> </u>	<u></u>	<u> </u>		<u> </u>	0	0	0
William E Pugh II-Class of 94	4]	•		}	}	}]	}]
Trustee	0	/	_		L		L	0	0	0
Maxine Roberts-Class of 2016	11]		}	}	ļ]	1	}	<u> </u>
Trustee	0	1	上	L	L	<u> </u>	L	0	0	0
Ralph M Segall	6					ĺ	1	ł		
Trustee -			-	_	<u> </u>	<u> </u>	_	0	0	0
Lisa Pagliaro Selz-Class of 73	2]	1	ſ	1	-	-			
Trüstee	- 0 -	. ✓_	L	_	1_	<u> </u>	L	0	0	0
Kim Van Newkirk Shaffir-Class of 83	2	1		[[1		
Trustee	0	✓	1_	_	$oldsymbol{\perp}$	L	$oxed{oxed}$	<u> o</u>	0	0
Robin Fogel Shaivitz-Class of 72	3							1		1
Trustee	0	<u> </u>			L	<u> </u>	丄	1	0	0

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any	box, office	ot ch unles	Pos eck s pe i a d	rson	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Jon Soderberg	1							[
Trustee through May	0	1			}	1		· 0	اه	o
Lisa Lyden Stromberg-Class of 83	2	 			-			 	-	-
Trustee	0	1			[0	ا	0
Stewart Thomsen	2	Ť	\vdash	_	-			 	 	-
Trustee	0	1						•	0	0
Theodore Venetoulis	4		\vdash		\vdash		_	<u>-</u>	<u>_</u>	
Trustee	0	✓	} }		}]]		l	l	0
Stacy Brown Vermylen-Class of 73	4									
Trustee	0	1				1		O	o	0
Toby Wertheim-Class of 68	4									
Trustee	0	✓						O	o	0
Wendy S White-Class of 72	5									
Trustee	0	✓				}		o	0	0
Margaret Messler Winslow-Class of69	1		Π							
Trustee Emerita	0	✓	$full_{-}$			}		0	o	0
Jose' Antonio Bowen	40									
President	0	✓		\				336,785	o	55,851
Trishana Bowden	40	j	 					,		
Vice President for Advancement	0	L	\Box	✓	<u> </u>			212,942	0	77,214
Bryan Coker	40									
Vice President and Dean of Students	0	<u></u> _		✓				143,846	0	33,831
William Leimbach	40					}]		
Vice President for Information Technology and Pla	0			✓	_			162,109	0	19,816
Leslie Lewis	40	}								
Provost and Vice President for Academic Affairs	0			✓				208,335	0	23,203
Lynne Lochte	40	1			1]		1		
Vice President for Finance and Administration	0	L		✓				198,378	0	22,062

Form **990** (2016)

Part VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, ar	nd H	lighes	t C	ompensated E	mployees (co	ontini	ued)
				(0	C)			}			
(A)	(B)	,			ition			(D)	(E)	ţ	(F)
Name and title	Average					than o		Reportable	Reportable		Estimated
	hours per					or/trust		compensation	compensation		amount of
	week (list any		$\overline{}$	_	_		—	from	related	ł	other
	hours for related	호호	≊	Officer	Key	ਰੇਉ	Former	the organization	organization (W-2/1099-MI		compensation from the
	organizations	5 년 전 년	[동 [er	employee	oye	er	(W-2/1099-MISC)		۱, ۱	organization
	below dotted	익출	<u>a</u>		ğ	e Si		`	i	1	and related
	line)	Individual trustee or director) <u>इ</u>		8	per		}		ł	organizations
	ļ	#	Institutional trustee		i	Highest compensated employee		1	•		
	<u> </u>	<u> </u>				8					
Deborah Lupton	40	1	} }			}		Ì		Ì	
Vice President for Human Resources	0	<u> </u>	\vdash	/	- -	<u> </u>		141,922	<u> </u>	0	17,883
Martin Sweidel	40	Ì		1						- }	
Senior Vice President for Strategic Initiatives	0	 -	\vdash	 *		 		201,765		-0	32,266
Barbara Stob	40	1	l	Ì			1	450.054			40.040
General Counsel	0	 -	\vdash	├	├-	-		156,051		_0	19,819
George Delahunty	40	ł	1		1		ł				24.422
Professor	0	 -	├─	├─	├	/	}	129,308		-0	31,138
Eric Singer	40	ł	}		}	,	l]		
Director of International Studies	0	 	\vdash	-	├	-	├	135,481	 	_0	16,838
Nancy Hubbard	40				1	1	}	126 700	}	0	20.012
Associate Professor David Grossman	40	 	┝┑	 	╁─	├ ┷─	├	126,780	 	박	29,913
Associate Professor	0	1			•	1	1	125,045	Į	o	10,362
Associate Professor	 	 -	┼─┤		t-	 `	┢	123,043	 	-박	10,302
	 	1]	ļ	1	1	1	}	ļ	- 1	
	 		\vdash	├	┼─	 	├	 	ļ		
	 	{		1		ł		ŀ	}	}	
				-	├	├	├	 	 	-+	
	 	1]	}	1	}	ł	1]	- 1	
	 	├	} —-	┝╌	┼-	├	├-		 	+	
		-	1	{	Í	[1	ţ	}	ļ	
	<u> </u>	L	<u> </u>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	ــــــــــــــــــــــــــــــــــــــ	Ļ.	 	 	}	
		٠.	•	•	•	•		2,278,747	 	0	390,196
c Total from continuation sheets to Part	-		•	٠	•			 	ļ		
d Total (add lines 1b and 1c)							<u> </u>	2,278,747		0	390,196
2 Total number of individuals (including but		d to ti	nose	e lis	ted	above	e) w	vho received m	ore than \$10	0,000	0 of
reportable compensation from the organ	ization >							38			
6 B 1 H 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2	fe: !!					1					Yes No
3 Did the organization list any former o							emp	ployee, or nigr	iest comper	isate	
employee on line 1a? If "Yes," complete							•				3 ✓
4 For any individual listed on line 1a, is the											
organization and related organizations									nedule J for	suc	h L
individual		<u></u>		<u>.</u>	•	: . <u>.</u>		<u></u> .			4 /
5 Did any person listed on line 1a receive									zation or ind	ividua	al
for services rendered to the organization	? If "Yes," o	comp	lete	Sc	hed	ule J	for	such person	<u> </u>		5 🗸
Section B. Independent Contractors											·
1 Complete this table for your five highest											
compensation from the organization. Re	port compe	ensati	on f	or t	he c	calend	dar	year ending wi	th or within t	he or	ganization's tax
year.											
(A)							Τ	(B)			(C)
Name and business ad	dress						}	Description of s	services		Compensation
The Whiting-Turner Contracting Company, 14900	Conference	Cent	er Di	rive	, Ch	antilly	G	eneral contracti	ng services		6,338,376
Bon Appetit Management Co, 1021 Dulaney Valle	y Road, Balt	imore	, MD	21	204		Fo	ood service prov	/ider		5,053,482
Ayers Saint Gross Inc, 1040 Hull Street, Suite 100	, Baltimore,	MD 2	1230				_	onstruction des			2,375,173
Cisco Systems Capital Corporation, 170 West Tas	man Drive,	San J	ose,	CA	951	134	_	quipment Leasir			540,997
FM Harvey Construction Co Inc, 128 Cockeysville								ontractor and ge			481,145
2 Total number of independent contract							o t		ove) who		
received more than \$100,000 of compen	sation from	the o	rgar	nıza	tion	ightharpoons		35			

rait	VIII	Statement of Reve					D () (1)		
		Check if Schedule O	contains a	resp	onse or note to			(C)	(D)
						(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
इ	1a	Federated campaigns		1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	[1b	0	ŀ			
Am S	C	Fundraising events .	[1c	39,517	İ	-		
를 를	d	Related organizations		1d	0				
S, E	е	Government grants (con		1e	2,427,774	-	,		
er S	f	All other contributions, gi				,	, *		
년 등 전 등		and similar amounts not incl	L	1f	9,350,172		,	¦	
Contributions, Gifts, and Other Similar An	g	Noncash contributions includ		-	840,776				1
	h	Total. Add lines 1a-1	· · · · ·	 ,	Business Code	11,817,463	- =	[
Program Service Revenue	20	Undergraduate tuition	foot room	and l	611310	76,821,236	76,821,236	0	0
Jev.	2a b	Undergraduate tuition, Graduate tuition, fees,			611310	6,366,873	6,366,873	0	0
es	C	Continuing profession			611310	485,230	485,230	0	0
ervi	d	Containing profession	u, cuucu.c.						
m S	e								
gra	f	All other program sen	vice revenu	ie.		0	0	0	0
Pro	g	Total. Add lines 2a-2	f	<u> </u>	<i>.</i> . >	83,673,339			
	3	Investment income			. 1				
		and other similar amo			▶	2,194,667	0	65,237	2,129,430
	4	Income from investmen	t of tax-exer	npt bo	ond proceeds	0	0	0	0
1	5	Royalties			▶ (ii) Personal	0	0	0	
'	١_		(i) Real		(II) Personal	7 g	« ` · ·		*
	6a	Gross rents		3,112	0	11.00		1.5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	b	Less: rental expenses Rental income or (loss)		9,845 3,267	0		and the same of th	,	, , , , , , , , , , , , , , , , , , , ,
	d	Net rental income or (3,207	▶	223,267	0	76,214	147,053
	7a	Gross amount from sales of	(i) Secunti	ies	(ii) Other	APPEND OF	(高)題·雅···································	1975 - TEX	7, 4, 7
	l			-		*. SSEE \$57.85	State State 7	***	
	l	assets other than inventory	74,60	1,249	4,765,359			8.	(基本) · · · · · · · · · · · · · · · · · · ·
	ь	Less: cost or other basis	74,60	1,249	4,765,359			A.	
	b	•	74,60 71,56		4,765,359 2,470,936				
	b	Less: cost or other basis	71,56				4 16		
		Less: cost or other basis and sales expenses .	71,56 3,03	5,595	2,470,936 2,294,423	5,330,077	0	0	5,330,077
ø	С	Less: cost or other basis and sales expenses . Gain or (loss) Net gain or (loss) .	71,56 3,03	5,595 5,654	2,470,936 2,294,423	5,330,077	0	0	5,330,077
une	С	Less: cost or other basis and sales expenses . Gain or (loss) Net gain or (loss) . Gross income from fu	71,56 3,03 	5,595 5,654	2,470,936 2,294,423	5,330,077	0	0	5,330,077
evenue	c d	Less: cost or other basis and sales expenses . Gain or (loss) Net gain or (loss) . Gross income from fuevents (not including \$	71,56 3,03 undraising 39,51	5,595 5,654	2,470,936 2,294,423	5,330,077	0	0	5,330,077
r Revenue	c d	Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) . Gross income from fuevents (not including \$ of contributions reported.	71,56 3,03 	5,595 5,654 	2,470,936 2,294,423 	5,330,077	0	0	5,330,077
ther Revenue	c d 8a	Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) . Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18 .	71,56 3,03 undraising 39,51 ed on line 10	5,595 5,654 	2,470,936 2,294,423 	5,330,077	0	0	5,330,077
Other Revenue	c d 8a	Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) . Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18 . Less: direct expenses	71,56 3,03 undraising 39,51 ed on line 10	5,595 5,654 7 c).	2,470,936 2,294,423 		0	0	5,330,077
Other Revenue	c d 8a	Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) . Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18 . Less: direct expenses Net income or (loss) from the sales and the sales are contributions.	71,56 3,03 undraising 39,51 ed on line 10	5,595 5,654 	2,470,936 2,294,423 	5,330,077	0		
Other Revenue	c d 8a b	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18. Less: direct expenses Net income or (loss) for Gross income from gain and sales and sales are the sales and sales are the sales and sales are the	71,56 3,03 undraising 39,51 ed on line 10	5,595 5,654 	2,470,936 2,294,423 		0		
Other Revenue	c d 8a b	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18. Less: direct expenses Net income or (loss) for Gross income from gain and sales and sales are sales and sales are sales and sales are sales and sales are sales and sales are sales and sales are sale	71,56 3,03 undraising 39,51 ed on line 10 control of the control o	5,595 5,654 	2,470,936 2,294,423 ▶ 23,515 22,880 events . ▶		0		
Other Revenue	c d 8a b c 9a	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions report. See Part IV, line 18. Less: direct expenses. Net income or (loss) f	71,56 3,03 undraising 39,51 ed on line 10 s from fundra aming activi	5,595 5,654 	2,470,936 2,294,423 ▶ 23,515 22,880 events . ▶		0		
Other Revenue	c d 8a b c 9a b	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03	5,595 5,654 	2,470,936 2,294,423 ▶ 23,515 22,880 events . ▶				
Other Revenue	c d 8a b c 9a b c	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18. Less: direct expenses Net income or (loss) for Gross income from gase Part IV, line 19. Less: direct expenses Net income or (loss) for Gross sales of income or (loss) for Gross sales of income and allowance.	71,56 3,03	5,595 5,654 	2,470,936 2,294,423 ▶ 23,515 22,880 events . ▶		0		
Other Revenue	c d 8a b c 9a b c	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18. Less: direct expenses Net income or (loss) for Gross income from gase Part IV, line 19. Less: direct expenses Net income or (loss) for Gross sales of income or (loss) for gross sales of income and allowance Less: cost of goods seed to the sales of gross sales of gross cost of goods seed to the sales and allowance Less: cost of goods seed to goods seed t	71,56 3,03	5,595 5,654 	2,470,936 2,294,423 23,515 22,880 events vities		0		
Other Revenue	6 d 8a b c 9a b c	Less: cost or other basis and sales expenses. Gain or (loss). Net gain or (loss). Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18. Less: direct expenses Net income or (loss) for Gross income from gase Part IV, line 19. Less: direct expenses Net income or (loss) for Gross sales of income or (loss) for returns and allowance Less: cost of goods so Net income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or (loss) for Income or	71,56 3,03 undraising 39,51 ed on line 10 from fundra aming activities from gamin niventory, es from sales	5,595 5,654 	2,470,936 2,294,423 23,515 22,880 events vities entory	635			
Other Revenue	6 8a b c 9a b c 10a b c	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03 undraising 39,51 ed on line 10 from fundra aming activities from gamin niventory, es from sales	5,595 5,654 	2,470,936 2,294,423	635		0	635
Other Revenue	c d 8a b c 9a b c 10a b c	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03 undraising 39,51 ed on line 10 from fundra aming activities from gamin niventory, es from sales	5,595 5,654 	2,470,936 2,294,423	635 272,450	0	272,450	635
Other Revenue	b c 10a b c	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03 undraising 39,51 ed on line 10 from fundra aming activities from gamin niventory, es from sales	5,595 5,654 	2,470,936 2,294,423	635	0	272,450	635
Other Revenue	6 c d 8a b c 9a b c 10a b c 11a b c	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03 undraising 39,51 ed on line 10 from fundra aming activities from gamin niventory, es from sales	5,595 5,654 	2,470,936 2,294,423	635 272,450 209,188		272,450 209,188	635 0
Other Revenue	6 d 8a b c 9a b c 10a b c d	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03	5,595 5,654 	2,470,936 2,294,423	635 272,450 209,188 921,391		272,450 209,188	635
Other Revenue	6 c d 8a b c 9a b c 10a b c 11a b c	Less: cost or other basis and sales expenses. Gain or (loss)	71,56 3,03 undraising 39,51 ed on line 10 s from fundra aming activi from gamin nventory, es from sales of Revenue	5,595 5,654 7 c). a b uising ttes. a b g acti less a b of inve	2,470,936 2,294,423	635 272,450 209,188		272,450 209,188 58,318	635 0 0 863,073

Part IX Statement of Functional Expenses

Do no	Check if Schedule O contains a respons tinclude amounts reported on lines 6b, 7b,	(A)	(B)	(C)	
8b, 9b	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	32,874,374	32,874,374		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,008,824	2,008,824		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,962,307	686,580	781,577	494,150
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	1,002,00	000,000	70,707.	10.17.00
	persons described in section 4958(c)(3)(B)	0	o	0	0
7	Other salaries and wages	31,869,702	24,480,735	5,922,831	1,466,136
8	Pension plan accruals and contributions (include	i	1		
_	section 401(k) and 403(b) employer contributions)	1,345,039	1,033,627	249,509	61,903
9	Other employee benefits	4,307,060	3,299,743	814,575	192,742
10	Payroll taxes	2,229,583	1,714,934	411,943	102,706
11	Fees for services (non-employees):			0	0
a	Management	145,367	0	145,367	0
C	Accounting	116,000	0	116,000	
d	Lobbying	11,869		11,869	
e	Professional fundraising services. See Part IV, line 17	24,822		11,003	24,822
f	Investment management fees	928,883	0	928,883	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)		1,105,168	659,993	111,298
12	Advertising and promotion	1,876,459 365,398	131,798	120,205	113,395
13	Office expenses	2,787,025	2,133,764	540,166	113,095
14	Information technology	1,113,129	271,886	835,225	6,018
15	Royalties	0	0	0	
16	Occupancy	3,341,971	2,047,521	1,278,356	16,094
17	Travel	1,770,521	1,583,083	42,339	145,099
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	
19	Conferences, conventions, and meetings	542,380	517,053	14,448	10,879
20	Interest	2,634,775	2,634,775	0	(
21	Payments to affiliates	0	0	0	
_22	Depreciation, depletion, and amortization	8,673,307	8,162,130	425,981	85,196
23	Insurance	479,265	0	479,265	
-24 ⁻	Other expenses: Itemize-expenses not-covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	Food service costs	4,236,973	4,236,973	0	
b	Semester abroad expense	1,592,779 696,135	1,592,779 503,543	70,813	121,779
9	Miscellaneous food	372,328	104,811	260,736	6,78
d e	Other administrative All other expenses	372,328	104,011	200,730	
25	Total functional expenses. Add lines 1 through 24e	108,306,275	91,124,101	14,110,081	3,072,093
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)	100,300,273	31,124,101	17,110,001	3,072,033

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 9,331,609 7,543,463 2 2 n 1,110,063 3 1,465,928 3 2,203,415 4 1,546,237 1,731,387 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 0 6 0 Assets 2.600.560 7 2,373,451 8 Inventories for sale or use 0 1,027,505 9 1,326,979 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 250,705,744 10b Less: accumulated depreciation 10c 108,142,889 138.074.948 142,562,855 11 11 164,944,461 180,022,554 45,427,924 Investments-other securities. See Part IV, line 11 42,534,175 12 12 Investments-program-related. See Part IV, line 11 13 13 469,475 546,076 14 14 0 0 15 10,449,702 15 5,201,480 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 372,444,600 390,049,647 9,111,346 17 17 9,893,430 18 0 18 0 19 2,781,933 19 3,079,153 20 83,119,522 20 84,231,862 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 0 0 23 23 Secured mortgages and notes payable to unrelated third parties . . . 0 0 24 24 Unsecured notes and loans payable to unrelated third parties . . . 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 15,410,130 17,937,759 26 Total liabilities. Add lines 17 through 25 26 110,422,931 115,142,204 Organizations that follow SFAS 117 (ASC 958), check here ▶ 📝 and 13 **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 87,233,086 96,566,355 28 28 88,745,529 90,656,394 29 86,043,054 29 87,684,694 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 262,021,669 33 274,907,443 Total liabilities and net assets/fund balances 372,444,600 390,049,647 Form **990** (2016)

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

За

Form 990 (2016)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number								n number	
		COLLEGE						91613	
Pai		Reason for Public Char						ons.	
1 2 3	2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:								
5									
6 7	∏ An de	federal, state, or local govern organization that normally scribed in section 170(b)(1)	receives a subs (A)(vi). (Complet	tantial part of its sup te Part II.)	port from			n the general public	
8		community trust described I							
9	or un	agricultural research organi university or a non-land-gra iversity:	nt college of agr	iculture (see ınstructio	ons). Ente	r the nan	ne, city, and state of	the college or	
10	red su ac	organization that normally recepts from activities related pport from gross investment quired by the organization a	to its exempt fur income and uni fter June 30, 197	nctions—subject to c related business taxal 75. See section 509(a	ertain exc ble incom a)(2). (Coi	ceptions, ne (less so mplete Pa	and (2) no more tha ection 511 tax) from art III.)	n 33¹/₃% of its	
11		organization organized and			_				
12	of	organization organized and one or more publicly suppo neck the box in lines 12a thro	rted organizatio	ns described in secti	ion 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).	
а		Type I. A supporting organithe supported organization supporting organization. Yes	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b		Type II. A supporting organication(s). You must a	the supporting o	rganization vested in	the same				
С		Type III functionally integ its supported organization(ally integrated with,	
d		Type III non-functionally integration that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an		
е		Check this box if the organ functionally integrated, or T	ization received Type III non-func	a written determination	on from ti oporting (ne IRS the organizati	at it is a Type I, Type ion.	e II, Type III	
f		r the number of supported of						[]	
<u>g</u>		ride the following information ne of supported organization	about the supp	orted organization(s). (iii) Type of organization		argon act :-	(4) Amount of an and		
	(I) Nam	ie oi supported organization	(II) E114	(described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				/ 	Yes	No			
(A)) 				
(B)									
(C)									
(D)									
(E)									

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2012 Calendar year (or fiscal year beginning in) **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total grants, contributions. Gifts, membership fees received. (Do not include any "unusual grants.") . . . 9,926,402 14,117,887 9,416,871 10.265.011 11.817.463 55,543,634 levied revenues organization's benefit and either paid to or expended on its behalf . . The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 3. . . . 14,117,887 9,416,871 10,265,011 9,926,402 11,817,463 55,543,634 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 10,407,915 Public support. Subtract line 5 from line 4 45,135,719 Section B. Total Support **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Calendar year (or fiscal year beginning in) (a) 2012 9,416,871 Amounts from line 4 14,117,887 10,265,011 9,926,402 11,817,463 55,543,634 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 2,550,077 2,672,000 2,717,646 2,271,012 12,910,328 2,699,593 Net income from unrelated business activities, whether or not the business is regularly carried on 98,021 39,712 235,401 -36,506 51,406 388,034 Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 1,537,480 859,117 912,800 851,829 5,547,012 1,385,786 Total support. Add lines 7 through 10 74,389,008 11 Gross receipts from related activities, etc. (see,instructions) 388,579,779 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here / Section C. Computation of Public Support/Percentage Public support percentage for 2016 (line,6, column (f) divided by line 11, column (f) 14 60.68 % 15 331/3% support test-2016. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . 10%-facts-and-circumstances test-2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Part							
	(Complete only if you checked th						nder Part II.
Soat!	If the organization fails to qualify on A. Public Support	under the te	sis listed Del	ow, piease co	omplete Part	II.)	
	dar year (or fiscal year beginning in)	(a) 2012	(h) 2012	(a) 2014	(d) 2015	(-) 2016	(f) Total
Calen 1	Gifts, grants, contributions, and membership fees	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
•	received. (Do not include any "unusual grants.")		 		[ļ
2	Gross receipts from admissions, merchandise		 		 		
_	sold or services performed, or facilities		İ		ł		ł
	furnished in any activity that is related to the]		1) **	Ì
3	organization's tax-exempt purpose Gross receipts from activities that are not an		 -			 	
•	unrelated trade or business under section 513		}				}
4	Tax revenues levied for the		 			<u> </u>	
7	organization's benefit and either paid		,	,	P.		[
	to or expended on its behalf		}		{	}	}
5	The value of services or facilities	 	 		 	 	
•	furnished by a governmental unit to the				ł		ļ
	organization without charge		}		1	}	}
6	Total. Add lines 1 through 5			<u></u>		 	
7a		 			l		
	received from disqualified persons				}	}	1
b	Amounts included on lines 2 and 3						1
	received from other than disqualified				{	{	1
	persons that exceed the greater of \$5,000					Í	Ì
	or 1% of the amount on line 13 for the year				!	l	<u> </u>
C	Add lines 7a and 7b		<u></u>				
8	Public support. (Subtract line 7c from		ł		j		
	line 6.)		<u> </u>		<u> </u>	<u> </u>	<u> </u>
	on B. Total Support		1 7 22 2	r- , , , ₂₂ , ,	T		
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6				ļ	<u> </u>	
าบล	Gross income from interest, dividends, payments received on securities loans, rents,		1		}	}	\
	royalties and income from similar sources .		[ì	}	ļ
b	Unrelated business taxable/income (less		 		 		
U	section 511 taxes) from businesses				ſ	}	1
	acquired after June 30, 1975))	Ì
	Add lines 10a and 10b		 		 	 	
11	Net income from unrelated business		 			 	
••	activities not included in line 10b, whether		Ì		ĺ	ĺ	ì
	or not the business is regularly carried on					ļ	Į.
12	Other income. Do not include gain or		 		 		
-	loss from the sale of capital assets	II	1		ì	į	1
	(Explain in Part VI.)				j	!	1
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		1		L		1
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	n, or fifth tax y	ear as a secti	on 501(c)(3)
	organization, check this box and stop he	re	<u></u>		<i>.</i>		<i>.</i> 🕨 🗀
Secti	on C. Computation of Public Suppor	t Percentag	je				
15	Public support percentage for 2016 (line 8			3, column (f))		15	%
16 /	Public support percentage from 2015 Sch				<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (•		17	<u> </u>
18	Investment income percentage from 2015					18	%
/19a	331/3% support tests—2016. If the organ						
_	17 is not more than 331/3%, check this box		_			_	
b	331/3% support tests—2015. If the organiz						
	line 18 is not more than 331/3%, check this	•	•	•	•		-
20	Private foundation. If the organization di	a not check a	DOX on line 14	, 19a, or 19b <u>,</u> (cneck this box	and see instri	uctions 🕨 🔲

Part IV Supporting Organizations

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

GCU	bij A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	j		
	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			L
	organization was described in section 509(a)(1) or (2).	2		Ĺ
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	За		
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	1		1
	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.	20		
40	Was any supported organization not organized in the United States ("foreign supported organization")? If	3c		$\vdash \vdash$
4a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		L	
		4a		
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			1
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			<u> </u>
	despite being controlled or supervised by or in connection with its supported organizations.	4b		-
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			•
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		L_
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	1		
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		}	1
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	[1
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	1		ļ
	was accomplished (such as by amendment to the organizing document).	5a		l
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		
C	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	ł	1	
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	Ì	1	1
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	 	<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	ٽ -	 	 - -
•	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	-		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	ļ	
و-	Did the organization-make a-loan-to-a-disqualified person (as defined in section 4958) not described in line 7?	-	 	
8	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		-	+_
_	·	8		
ya ⁻	Was the organization controlled directly or indirectly at any time during the tax year by one or more	1	1	1
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		1	
_	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	<u> </u>	
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	<u> </u>	<u> </u>	<u> </u>
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	<u> </u>	1
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	l	.l
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	<u> </u>		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	ļ]	
	supporting organizations)? If "Yes," answer 10b below.	10a	T-	Γ
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		\Box	
_	determine whether the organization had excess business holdings.)	10h	 	1

Part	V 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?	44.		
h	A family member of a person described in (a) above?	11a 11b		
	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		
	on B. Type I Supporting Organizations	1110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported]]		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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		
Section	on C. Type II Supporting Organizations			
4	Many and the state of the state		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	}		1
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			 -
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		$\vdash \lnot$
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	}		
	supported organizations played in this regard.		L	لـــا
Section	on E. Type III Functionally Integrated Supporting Organizations	3		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i			
		nstru	cuons	<i>5)</i> .
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	struct	ions).
•	•			<u> </u>
2	Activities Test. Answer (a) and (b) below.	 	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1 /		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	[1
	how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities.	2a		
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		-	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1	-	
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	-	<u> </u>	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	2b_		 -
о a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	За		 '
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			n in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		L
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		<u></u>
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	[h	
c Fair market value of other non-exempt-use assets	1c		<u></u>
d Total (add lines 1a, 1b, and 1c)	1d	L	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporting	g organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers ex	empt purposes of supp	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	anizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	ch the organization is re	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	, 	,	
S	ection E - Distribution Allocations (see instructions)	(i)	(ii) Underdistributions	(iii) Distributable
	•	Excess Distributions	Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	 	 	
	Underdistributions, if any, for years prior to 2016	 	 	
2	(reasonable cause required—explain in Part VI). See	l	ĺ	
_	instructions.		ļ	•
3	Excess distributions carryover, if any, to 2016:	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 	5: 4
a			 	
b				*5
С	From 2013			
d	From 2014	, , , , , , , , , , , , , , , , , , , ,		
е	From 2015			7
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount	train ou bearing the		
i_	Carryover from 2011 not applied (see instructions)		e ·	, , , , , , , , , , , , , , , , , , , ,
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		٠. د و ر	
4	Distributions for 2016 from	Carried Control of	5 1.	, , , , ,
	Section D, line 7:		·	~ ~ ^ **** } *** **
a	Applied to underdistributions of prior years	والمعارض والمراجع المراجع المر		· ·
<u>b</u> _	Applied to 2016 distributable amount			
<u>c</u> _	Remainder. Subtract lines 4a and 4b from 4.			* *
5	Remaining underdistributions for years prior to 2016, if	The second of th		* * * *
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.	·沙尔里 · 艾克克·艾克	 	
6	Remaining underdistributions for 2016. Subtract lines 3h		1 =	
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:		Secretary of the second	A PARTY
а			TATE OF THE PARTY	700 2 400
b	Excess from 2013	The state of the s	Part of the second	47. M. 47
С	Excess from 2014		tonacometa 3 /	
d	Excess from 2015		The state of the s	
_ e	Excess from 2016			A SAME TO SAME

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Schedule A	, Part II, Line 10 - Includes income from fundraising events and other revenue
£	
	,

	,
	,,,,,,,,
*	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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 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

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	,				
	ction 501(c)(4), (5), or (6) orga	nizations: Complete Part III			
Name o	of organization			Employer iden	tification number
	HER COLLEGE				52-0591613
Part		e organization is exempt und			
1	definition of "political can	. •	·	, -	
2	Political campaign activity	y expenditures (see instructions)		. <i>.</i> > \$;
3	Volunteer hours for politic	cal campaign activities (see instru	ıctions)		
Part	-B Complete if the	e organization is exempt und	der section 501(c)(3).	
1		excise tax incurred by the organiz			
2		excise tax incurred by organization			
3	ŭ .	ed a section 4955 tax, did it file Fo	•		= =
4a					Yes No
	If "Yes," describe in Part			X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(-\(\dol\)
Part		e organization is exempt und ly expended by the filing organ			(c)(3).
1					
2		filing organization's funds contri			
-	527 exempt function activ	vities	buted to other org	samzations for section	
3	Total exempt function e	expenditures. Add lines 1 and 2	2. Enter here and	on Form 1120-POL	
4		file Form 1120-POL for this yea			
5	Enter the names, address	ses and employer identification nu	umber (EIN) of all s	ection 527 political organi	zations to which the filing
		ents. For each organization listed			
		ontributions received that were pro- fund or a political action committ			
	as a separate segregated	Tund or a political action commit	T addition	Tai space is needed, provi	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)			-		
(5)					
(6)			7		

Page	2

	II-A Complete if the organization section 501(h)).	ı is exempt ui	ider section se	ricion and me	eie) 801c mor be	Cuon under
A C	theck ► ☐ if the filing organization below	ongs to an affi	liated group (an	d list in Part IV	each affiliated gro	up member's
	name, address, EIN, expen					
вС	theck 🕨 🗌 if the filing organization che	cked box A a	nd "limited cont	rol" provisions	apply.	
	Limits on Lobb	(a) Filing	(b) Affiliated			
	(The term "expenditures" me				organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobby	ing)		
b	Total lobbying expenditures to influence					
C	Total lobbying expenditures (add lines 1a	and 1b)				
d	Other exempt purpose expenditures .					
е	Total exempt purpose expenditures (add	lines 1c and 1d)			
f	Lobbying nontaxable amount. Enter t columns.	he amount fro	m the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying r	ontaxable amoun	t is:		
1	Not over \$500,000	20% of the ame	ount on line 1e.		ł ł	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000	į	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.	1	
	Over \$17,000,000	\$1,000,000.			1	
g	Grassroots nontaxable amount (enter 25	% of line 1f) .				
9					1	
h	Subtract line 1g from line 1a. If zero or le	ss, enter -0			L	
	Subtract line 1f from line 1c. If zero or les	s, enter -0		 		
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero	ss, enter -0 on either line 1	 Ih or line 1i, did	the organizatio	n file Form 4720	
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year?	ss, enter -0 on either line :	<u> </u>	<u> </u>		☐ Yes ☐ No
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the	as, enter -0- on either line ar Averaging P etion 501(h) elecseparate instru	eriod Under sec ction do not hav actions for lines	tion 501(h) e to complete al 2a through 2f.)	 	<u> </u>
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the	as, enter -0- on either line ar Averaging P etion 501(h) elecseparate instru	eriod Under sec ction do not hav actions for lines	tion 501(h) e to complete al	 	<u> </u>
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the	as, enter -0- on either line ar Averaging P etion 501(h) elecseparate instru	eriod Under sec ction do not hav actions for lines	tion 501(h) e to complete al 2a through 2f.)	 	<u> </u>
	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the Lobbying Calendar year (or fiscal year beginning in)	es, enter -0- on either line ar Averaging P etion 501(h) ele- separate instru Expenditures	eriod Under sec ction do not hav actions for lines During 4-Year A	tion 501(h) e to complete al 2a through 2f.) veraging Period	of the five column	s below.
h i j	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the Lobbying Calendar year (or fiscal year beginning in) Lobbying nontaxable amount	es, enter -0- on either line ar Averaging P etion 501(h) ele- separate instru Expenditures	eriod Under sec ction do not hav actions for lines During 4-Year A	tion 501(h) e to complete al 2a through 2f.) veraging Period	of the five column	s below.
2a	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the Lobbying Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column (e))	es, enter -0- on either line ar Averaging P etion 501(h) ele- separate instru Expenditures	eriod Under sec ction do not hav actions for lines During 4-Year A	tion 501(h) e to complete al 2a through 2f.) veraging Period	of the five column	s below.
2a	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the Lobbying Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column (e)) Total lobbying expenditures	es, enter -0- on either line ar Averaging P etion 501(h) ele- separate instru Expenditures	eriod Under sec ction do not hav actions for lines During 4-Year A	tion 501(h) e to complete al 2a through 2f.) veraging Period	of the five column	s below.
2a b	Subtract line 1f from line 1c. If zero or les If there is an amount other than zero reporting section 4911 tax for this year? 4-Ye (Some organizations that made a sec See the Lobbying Calendar year (or fiscal year beginning in) Lobbying nontaxable amount (150% of line 2a, column (e)) Total lobbying expenditures Grassroots nontaxable amount	es, enter -0- on either line ar Averaging P etion 501(h) ele- separate instru Expenditures	eriod Under sec ction do not hav actions for lines During 4-Year A	tion 501(h) e to complete al 2a through 2f.) veraging Period	of the five column	s below.

~	(election under section 501(h)).	(a)	Γ	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes		A	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?	1	 	1		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	17	 	ĺ		
C	Media advertisements?		1	l		
ď	Mailings to members, legislators, or the public?		1			
e	Publications, or published or broadcast statements?		1			
f	Grants to other organizations for lobbying purposes?		1			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	1				3,066
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		V			
i	Other activities?	V			1	1,869
j	Total. Add lines 1c through 1i				1	4,935
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	L	1			
b	If "Yes," enter the amount of any tax incurred under section 4912	į		L		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		<u> </u>			
d		<u> </u>	<u> </u>	L		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(5), (or se	ction		
	501(c)(6).				T V	T 61.
					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 Dort	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				<u></u>	L
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," 0 answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members	•	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of	,			
а	Current year		2a	i		
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			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		į	ĺ		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying	 	1		
_	and political expenditure next year?	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5	L		
	Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grown instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Pai	rt II-A, I	lines	1 and
Sched	dule C, Part II-B, Line 1 - Members of Goucher's senior management team, faculty, staff and a select number	er of	studer	nts part	icipat	е
annua	ally in the the annual Independent Higher Education Day, which took place on February 7, 2017. The even	was s	pons	ored by	the	
Maryl	and Independent College and University Associate (MICUA), of which Goucher is a member, and brought	stude	nts an	ıd admi	nistra	tors
from a	across the state to Maryland's capital for a briefing and visits with elected officials. In addition, members	of Gou	ıcher'	s staff r	net wi	ith
electe	ed officials on behalf of the College. The associated compensation for these activities is reported on lines	1g. Ti	ne org	anizatio	on pai	d
	pership dues of \$7,386 to the National Association of Independent Colleges and Universities (NAICU) and					
Indep	endent Colleges and Universities Association (MICUA), both of which engage in lobbying activity. NAICU	set as	ide 79	% of the	dues	
	o engage in non-deductible lobbying and political expenditures. MICUA set aside 16% of the dues paid to	enga	ge in r	ion-ded	luctibl	e
lobby	ing and political expenditures. Accordingly, the College has reported an equal amount on line 1i.					

SCHEDULE D (Form 990)

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.

OMB No 1545-0047 2016

Open to Public

Department of the Treasury ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization Employer identification number **GOUCHER COLLEGE** 52-0591613 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?.. ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements. 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Assets included in Form 990, Part X

Dago	2

Part	III Organizations Maintaining	Collections of	Art. Historica	l Treasures	or Ot	her Similar Ass	ets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):						
а	✓ Public exhibition		d ☑ Lo	an or exchang	ge progr	ams	
b	✓ Scholarly research			ner Educatio			
С	✓ Preservation for future generations	;					
4	Provide a description of the organizat XIII.	ion's collections a	ınd explain hov	v they further	the org	anization's exem	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						□ Yes ☑ No
Part				3			L 163 E 10
	Complete if the organization		on Form 990	. Part IV. lin	e 9. or i	reported an am	ount on Form
	990, Part X, line 21.			, ,	,		
1a	Is the organization an agent, trustee,	custodian or oth	er intermediary	for contribu	tions or	other assets not	
	included on Form 990, Part X?						☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following	table:			
		,		,		Am	ount
С	Beginning balance		. 		1c		
d	Additions during the year				1d		
е	Distributions during the year				1e	 	
f	Ending balance				1f		
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, fo	r escrow or c	ustodial	account liability?	☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa					•	
Par							
	Complete if the organization	answered "Yes"	on Form 990	, Part IV, lin	e 10.		
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	201,482,000	216,707,0	00 227,	559,000	197,497,000	183,717,000
b	Contributions	785,000	2,028,0	00 2,	118,000	3,282,000	4,914,000
C	Net investment earnings, gains, and						
	losses	19,455,000	-5,460,0	00 -2,	073,000	35,836,000	17,709,000
d	Grants or scholarships	4,404,000	4,324,0	00 3,0	646,000	2,893,000	2,872,000
е	Other expenditures for facilities and						
	programs	7,741,000	7,469,0	00 7,	251,000	6,163,000	5,971,000
f	Administrative expenses	o		0	0	0	0
g	End of year balance	209,577,000	201,482,0	00 216,	707,000	227,559,000	197,497,000
2	Provide the estimated percentage of t		d balance (line	1g, column (a	a)) held a	ıs [.]	
а	Board designated or quasi-endowmer	nt ▶21.1	<u>.</u> %				
p	Permanent endowment ► 39	9.8 %					
C	Temporarily restricted endowment	39.1 %					
	The percentages on lines 2a, 2b, and						
3a	Are there endowment funds not in the	e possession of th	e organization	that are held	and adr	ministered for the	
	organization by:						Yes No
	(i) unrelated organizations						3a(i) ✓
	(ii) related organizations						3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related of				٠		3b
4	Describe in Part XIII the intended uses		n's endowmen	t funds.			
Part			. =				
	Complete if the organization						
	Description of property	(a) Cost or ot	1 ' '	st or other basis (other)		Accumulated preciation	(d) Book value
1a	Land	·	0	12,120,429	L		12,120,429
b	Buildings	·	0	194,191,873	 _	81,198,235	112,993,638
C	Leasehold improvements	·	0	0	<u> </u>	0	<u>0</u>
đ	Equipment	·	0	33,968,199		26,944,654	7,023,545
ее	Other	·	<u> </u>	10,425,243		0	10,425,243
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X, colu	mn (B), line 10	0c.) . .	▶	142,562,855

Part VII	Investments - Other Securities.				 	
	Complete if the organization answ	ered "Yes" on For	rm 990	, Part IV, line	11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b)	Book value		hod of valuation -of-year market value
(1) Financial	derivatives			23,895,487	End-of-Year Marke	t Value
(2) Closely-h	neld equity interests				End-of-Year Marke	
(A)						
(B)			Ļ			
(C)			├			
(D)			├			
(E) (F)			 			
(G)			┼──			
(H)			 			
	b) must equal Form 990, Part X, col. (B) line 12.)		 -	45,427,924		
Part VIII	Investments—Program Related.			43,421,324		
	Complete if the organization answ		rm 990	. Part IV. line	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment			Book value		thod of valuation
	.,		}		Cost or end	-of-year market value
(1)						
(2)						
(3)		<u> </u>	<u> </u>		<u> </u>	
(4)			<u> </u>			
(5)			}			
(6)			}			
(7)			 			
(8)			 			
(9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 13.)		 			
Part IX	Other Assets.		٠			
	Complete if the organization answ	ered "Yes" on Fo	rm 990	, Part IV, lin	e 11d. See Forπ	n 990, Part X, line 15.
	(a)	Description				(b) Book value
(1)				·	·	<u> </u>
(2)						
_(3)						
(4)						
(5)						
(6)						
<u>(7)</u> <u>(8)</u>						
(9)						
Total. (Colu	ımn (b) must equal Form 990, Part X, co	I. (B) line 15.)	· · ·	. <i></i>	.	
Part X	Other Liabilities					<u> </u>
	Complete if the organization answ	vered "Yes" on Fo	rm 990), Part IV, lin	e 11e or 11f. Se	e Form 990, Part X,
	- line 25	_ 				
1.	(a) Description of liability	(b) Book value				
	ncome taxes		0			
	ong Term Liabilities		87,017			
	able Advances from US Government		69,850		-	
	es Under Split Interest Agreements		13,267		•	
	tetirement Obligation		83,267			
(7) Obligati	ion Under Interest Rate Swap Agreement	4,6	84,358			
(8)					• •	
(9)						
	(b) must equal Form 990, Part X, col. (B) line 25)	17.9	37.759			

1	Complete if the organization answered "Yes" on Form 990,	Part I'	V, line 12a.		
•	Total revenue, gains, and other support per audited financial statements			1	73,757,999
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	o		
ь	Donated services and use of facilities	2b	0		
С	Recoveries of prior year grants	2c	0	1	
d	Other (Describe in Part XIII.)	2d	-24,042,098	j	
e	Add lines 2a through 2d			2e	-24,042,098
3	Subtract line 2e from line 1			3	97,800,097
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	1	
b	Other (Describe in Part XIII.)	4b	6,842,380		
C	Add lines 4a and 4b			4c	6,842,380
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	104,642,477
Part					
	Complete if the organization answered "Yes" on Form 990,		-		
1	Total expenses and losses per audited financial statements			1	71,359,534
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	0	ļ	
b	Prior year adjustments	2b	0	} }	
C	Other losses	2c	0	1	
ď	Other (Describe in Part XIII.)	2d	322,854	1 1	
e	Add lines 2a through 2d			2e	322.854
3	Subtract line 2e from line 1			3	71,036,680
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	j i			71,030,000
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	928,883]]	
b	Other (Describe in Part XIII.)	4b	36,340,712	{	
c	Add lines 4a and 4b			4c	37,269,595
C					37,209,595
5	Total expenses Add lines 3 and 4c. (This must equal Form 990) Part I. lin	181			400 200 275
5 Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information	e 18.)	 	5	108,306,275
Part	XIII Supplemental Information.				
Part Provid	Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4; Pa	art IV, lines 1b and 2b	; Part	V, line 4; Part X, line
Part Provid 2, Par	XIII Supplemental Information. The the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; Pa	art IV, lines 1b and 2b vide any additional in	; Part forma	V, line 4; Part X, line
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Part Provide P	Supplemental Information. If the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part IIII lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part IIII line 1. The College did not disclose its collection and related product D. Part IIII, Line 1. The College art collection is comprised of works of fine ijects and miscellaneous objects of value, which is owned by the College and IIII line 4. The College to other institutions. The collection includes sculp is cobjects. The collection is used for scholarly research, education and public of its example. Itule D, Part V, Line 4. The endowment of Goucher College generates income to designated by our generous donors. Income, allocated across approximately its arships of undergraduate and graduate students; undergraduate and graduate assorships; lectureships; the College library; and the College's general operating the D, Part X, Line 2. The College is qualified as a not for profit organization usended. Accordingly, the College is not subject to income taxes except to the ed to its exempt purpose. No provision for income taxes was required for 2017 by the College and has concluded that as of June 30, 2017, there are no uncer re recognition or disclosure int the accompanying financial statements. The College recognition or disclosure int the accompanying financial statements.	d 4; Pato proolicies art, inconsedures, exhibit o supp 700 end fellow inder s extent i or 2016	art IV, lines 1b and 2b vide any additional in in its financial statemed by the statemed by th	; Part forma ents. al and camping e exerenerall oth meand grand om achived to design and tent on achived tent to	V, line 4; Part X, line tion. three-dimensional us grounds of the paintings and other inpt purposes of the y and in specific rit and need-based aduate internships; al Revenue Code, tivities that are not the tax positions be taken that would
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Part Provide 2, Part Sched Sched art ob Colled artisti Colled Sched schol profes Sched as am relate taken requir	Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part dule D, Part III, Line 1 - The College did not disclose its collection and related public D, Part III, Line 4 - The College art collection is comprised of works of fine jects and miscellaneous objects of value, which is owned by the College and by the College to other institutions. The collection includes sculp is cobjects. The collection is used for scholarly research, education and public of the college. Italian D, Part V, Line 4 - The endowment of Goucher College generates income to designated by our generous donors. Income, allocated across approximately ariships of undergraduate and graduate students; undergraduate and graduate assorships; lectureships; the College library; and the College's general operating tale D, Part X, Line 2 - The College is qualified as a not for profit organization usended. Accordingly, the College is not subject to income taxes except to the ed to its exempt purpose. No provision for income taxes was required for 2017, by the College and has concluded that as of June 30, 2017, there are no uncer re recognition or disclosure int the accompanying financial statements. The Cover, there are currently no audits for any tax period in progress.	d 4; Pato proolicies art, inchoused stures, exhibit o supp 700 end fellow inder s extent if or 2016 tain po	art IV, lines 1b and 2b vide any additional in in its financial statement in its financial statement in buildings or on the prints, photographs, dition in furtherance of the cort the College both go downents, supports be ships; undergraduate a get. ection 501(c)(3) of the has taxable income from the company in the comp	; Part forma ents. al and camping e exer enerall oth me and grunder om aculyzed ted to othe cothe V, line 4; Part X, line tion. three-dimensional us grounds of the paintings and other inpt purposes of the y and in specific rit and need-based aduate internships; al Revenue Code, tivities that are not the tax positions be taken that would y taxing jurisdictions;	
Part Provide P	Supplemental Information. In the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part III and 1. The College did not disclose its collection and related purelled D, Part III, Line 1. The College art collection is comprised of works of fine its part miscellaneous objects of value, which is owned by the College and I its part is objects. The college to other institutions. The collection includes sculp its objects. The collection is used for scholarly research, education and public objects. The collection is used for scholarly research, education and public objects. It is part V, Line 4. The endowment of Goucher College generates income to designated by our generous donors. Income, allocated across approximately its arships of undergraduate and graduate students; undergraduate and graduate assorships; lectureships; the College library; and the College's general operating talle D, Part X, Line 2. The College is not subject to income taxes except to the edit to its exempt purpose. No provision for income taxes was required for 2017 by the College and has concluded that as of June 30, 2017, there are no uncer re recognition or disclosure int the accompanying financial statements. The Cover, there are currently no audits for any tax period in progress. It is the description of the college is not subject to income taxes was required for 2017 by the College and has concluded that as of June 30, 2017, there are no uncer the recognition or disclosure int the accompanying financial statements. The Cover, there are currently no audits for any tax period in progress.	d 4; Pato proof to proof to proof to suppose to proof to	art IV, lines 1b and 2b vide any additional in in its financial statement in its financial statement in buildings or on the prints, photographs, dition in furtherance of the cort the College both go downents, supports be ships; undergraduate a get. ection 501(c)(3) of the thas taxable income from the control in the control in the compositions taken or expect subject to routine audid, \$1,592,779 related to penses (included in Particular in the control	; Part forma ents. al and camping e exer enerall oth me and grunder om aculyzed ted to othe cothe V, line 4; Part X, line tion. three-dimensional us grounds of the paintings and other inpt purposes of the y and in specific rit and need-based aduate internships; al Revenue Code, tivities that are not the tax positions be taken that would y taxing jurisdictions;	
Part Provide P	Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part dule D, Part III, Line 1 - The College did not disclose its collection and related public D, Part III, Line 4 - The College art collection is comprised of works of fine jects and miscellaneous objects of value, which is owned by the College and by the College to other institutions. The collection includes sculp is cobjects. The collection is used for scholarly research, education and public of the college. Italian D, Part V, Line 4 - The endowment of Goucher College generates income to designated by our generous donors. Income, allocated across approximately ariships of undergraduate and graduate students; undergraduate and graduate assorships; lectureships; the College library; and the College's general operating tale D, Part X, Line 2 - The College is qualified as a not for profit organization usended. Accordingly, the College is not subject to income taxes except to the ed to its exempt purpose. No provision for income taxes was required for 2017, by the College and has concluded that as of June 30, 2017, there are no uncer re recognition or disclosure int the accompanying financial statements. The Cover, there are currently no audits for any tax period in progress.	d 4; Pato proof to proof to proof to suppose to proof to	art IV, lines 1b and 2b vide any additional in in its financial statement in its financial statement in buildings or on the prints, photographs, dition in furtherance of the cort the College both go downents, supports be ships; undergraduate a get. ection 501(c)(3) of the thas taxable income from the control in the control in the compositions taken or expect subject to routine audid, \$1,592,779 related to penses (included in Particular in the control	; Part forma ents. al and camping e exer enerall oth me and grunder om aculyzed ted to othe cothe V, line 4; Part X, line tion. three-dimensional us grounds of the paintings and other inpt purposes of the y and in specific rit and need-based aduate internships; al Revenue Code, tivities that are not the tax positions be taken that would y taxing jurisdictions;	

Part XIII - Supplemental Information (Continued)

rental revenue of 13,917) included in Net realized and unrealized gains on investments in the financial statements, expenses related to fundraising events of 26,880, rental expenses of 315,593 and reclassified contra expenses of \$19,620.
Schedule D, Part XII, Line 2d - Direct expenses of \$26,880 related to fundraising events, \$315,593 of rental expenses and contra expense of \$19,620 were reclassified to other revenue.
Schedule D, Part XII, Line 4b - Includes contra expense of \$34,592,196 related to student financial aid, \$1,592,779 related to the cost of study abroad tuition, \$2,044 of bank fees. It also includes a loss of \$153,693 on the early extinguishment of debt.

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Open to Public Inspection

Employer identification number

52-0591613

Name of the organization
GOUCHER COLLEGE

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 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 1 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 1 The racially nondiscriminatory policy is published in the College's academic catalogue, student handbook and on the website. Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? . 4a Records documenting that scholarships and other financial assistance are awarded on a racially 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Copies of all material used by the organization or on its behalf to solicit contributions? 4d 1 If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Admissions policies? 5b Employment of faculty or administrative staff? . . . Scholarships or other financial assistance? . . . 5d Educational policies? . 5e Use of facilities? 5f Athletic programs? 5g Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? 6a Has the organization's right to such aid ever been revoked or suspended? . . . 6b If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.

Part II	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).
	E, Part I, Line 6 - The College participates in the following federal programs which provide financial aid to undergraduate and tudents: Pell Grant Program, Supplemental Educational Opportunity Grant (SEOG), Federal Work Study Program, Perkins Loan
	Federal Direct Student Loans, Federal Direct Parent Loans for Undergraduate Students, and Teacher Education Assistance for
	d Higher Education. The College also received grants from the Maryland State Department of Education. In addition, the College
	ed sponsored research and other program grants funded by National Aeronautics and Space Administration, National Science
Foundation	n, National Institute of Health, and the US Department of Education.

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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ➤ Attach to Form 990. OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

n990. Inspection
Employer identification number

Name o	of the organization	-				Employer id	entification number
	CHER COLLEGE					l	-0591613
Par	General Information Form 990, Part IV, line		ies Outside	the United States. Comp	olete if the organ	ization ansv	wered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for th					∐Yes ∐No
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for monit	oring the use o	of its grant	s and other
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is need	ded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specifi service(s) in the	ed in (d) is ervice, ic type of	(f) Total expenditures for and investments in the region
_(1)	Central America and the Caribb	0	0	Investments			15,245,821
(2)	Central America and the Caribb	0	o	Program Services	Tuition, room, be	oard and pr	84,640
(3)	East Asia and the Pacific	0	1	Program Services	Tuition, room, be	oard and pr	273,383
_(4)	Europe (including Iceland and C	0	11	Program Services	Tuition, room, be	oard and pr	1,175,387
(5)	Middle East and North Africa	0	o	Program Services	Tuition, room, bo	oard and pr	82,490
(6)	North America (including Canad	0	0	Program Services	Tuition, room, be	oard and pr	2,263
(7)	Russia and the newly independ	0	0	Program Services	Tuition, room an	d board	16,500
(8)	South America	0	0	Program Services	Tuition, room, be	oard and pro	7,013
(9)	South Asia	0	0	Program Services	Tuition, room an	d board	34,000
(10)	Sub-Saharan Africa	0	0	Program Services	Tuition, room, b	oard and pro	76,889
(11)		ļ					
(12)							
(13)							
(14)							
(15)			<u> </u>				·
(16)							
(17)							
3a	Sub-total						
b	Total from continuation sheets to Part I	}					

c Totals (add lines 3a and 3b)

16,998,386

Page 2

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (e) Amount of cash grant (d) Purpose of grant Enter total number of other organizations or entities (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization Part II E (16) £ ₹ 4 (15) N က 6 12 <u>@</u> <u>O</u> 9 <u>®</u> <u>N</u> 3

Schedule F (Form 990) 2016

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

A Time of great accompany	rait III cail be duplicated II additional space is needed.	(a) Missipar of	(A) A months of	to Manager (a)) o v	(a)	And blocked of
(a) type of grant of assistance	(0)694 (a)	recipients	cash grant	(e) Mainer of cash disbursement	(I) Amount or noncash assistance	(g) besorption of noncash assistance	(ii) Metrico di valuation (book, FMV, appraisal, other)
(1) Student financial aid	Central America and the C	41	87,050	87,050 Credit to students' to	0		
(2) Student Financial Aid	East Asia and the Pacific	43	326,725	326,725 Credit to students' to	0		
(3) Student Financial Aid	Europe (including Iceland	149	1,446,049	1,446,049 Credit to students' tr	0		}
(4) Student Financial Aid	Middle East and North Afr	2	29,200	29,200 Credit to students' to	0		
(5) Student Financial Aid	Russia and the newly inde	1	6,250	6,250 Credit to student's t	0		
(6) Student Financial Aid	South America	1	19,350	19,350 Credit to student's t	0		
(7) Student Financial Aid	South Asia	2	22,100	22,100 Credit to students' th	0		
(8) Student Financial Aid	Sub-Saharan Africa	5	72,100	72,100 Credit to students' t	0		
(6)							
(10)							
(11)							
(12)							
(13)		<u> </u>					
(14)		} }					
(15)							
(16)							
(17)							
(18)							
						Sch	Schedule F (Form 990) 2016

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Page	~

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Part	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign foration (see Instructions for Form 926)	✓ Yes	□ No
2	may Trusi	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to separately file Form 3520, Annual Return To Report Transactions With Foreign ts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign twith a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	☐ Yes	☑ No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□ No
4	qual Infor	the organization a direct or indirect shareholder of a passive foreign investment company or a ified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing if (see Instructions for Form 8621).	✓ Yes	□No
5	the o	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain ign Partnerships (see Instructions for Form 8865)	✓ Yes	□ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If it is organization may be required to separately file Form 5713, International Boycott Report (see sections for Form 5713; do not file with Form 990)	☐ Yes	☑ No
			Schedule F (Fo	m 990) 2016

Part V	Supplemental Information	_ n
والمستحور	Supplemental intormation	

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.

Schedule F, Part IV, Line 1 - The College is required to file Form 926 in the current year.
Schedule F, Part IV, Line 3 - The College, through its investment in various alternative assets, has interests in foreign corporations.
However, the College's interest in any single foreign corporation was less than 10 percent. Accordingly, the College is not required to file
form 5471.

Schedule F, Part IV, Line 4 - The College, through its investments in various alternative assets and common collective trusts, was a direct or
indirect shareholder of a passive foreign investment company or qualifying electing fund. In these cases, the investment manager files Form 8621 on its investors' behalf. Accordingly, the College is not required to file Form 8621.
M. Control of the Con
Schedule F, Part IV, Line 5 - The College, through its investments in various alternative assets, had ownership in foreign partnerships. However, the College owned less than 10 percent of any foreign partnership and it did not directly or indirectly transfer greater than
\$100,000 to any foreign partnership. Accordingly, the College is not required to file Form 8865.
\$ 100,000 to any foreign paraters into Accordingly, the contege is not required to life form 0003.
······································

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

52-0591613

GOUCHER COLLEGE						591613
Part I Fundraising Activities. Form 990-EZ filers are no	ot required to	complete	this part.			ne 17.
1 Indicate whether the organization	n raised funds t	hrough any	of the follo	owing activities. C	heck all that apply.	
a Mail solicitations		e] Solicitati	ion of non-govern	ment grants	
b Internet and email solicitation	IS	f ☑] Solicitati	ion of government	t grants	
c Phone solicitations		g ☑] Special i	fundraising events	3	
d ✓ In-person solicitations						
2a Did the organization have a writt	en or oral agre	ement with	any individ	lual (including offi	cers, directors, truste	es,
or key employees listed in Form	990, Part VII) o	r entity in co	onnection v	with professional f	fundraising services?	🗹 Yes 🔲 No
b If "Yes," list the 10 highest paid compensated at least \$5,000 by			draisers) pu	ursuant to agreem	ents under which the	fundraiser is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1 See Schedule G, Part IV, Statement		Yes	No			
2		 				
3						
4						
5						
6						
7						
8						
9						
10						
Total			>	0	24,822	-24,822
2 List all states-in-which-the-orga registration or licensing.	nızation is regi	stered_or_lic	censed to	solicit contribution	ns or has been notifie	d it is exempt from
All States						

Pa	art II	Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with												
		gross receipts greater than		and gross income on	Form 990-EZ, lines 1 a	and 6b. List events with								
		groot receipte grouter than	(a) Event #1	(b) Event #2	(c) Other events	447								
			Golf Fundraiser	Dance-a-thon	0	(d) Total events (add col. (a) through								
			(event type)	(event type)	(total number)	col (c))								
J.														
Revenue	1	Gross receipts	52,065	10,967		63,032								
Œ	2	Less: Contributions	20 550	10.067		20 547								
	3	Gross income (line 1 minus	28,550	10,967		39,517								
		line 2)	23,515	0	}	23,515								
	4	Cash prizes	0	0		0								
	_	Namanakandan												
	5	Noncash prizes	309	0		309								
ses	6	Rent/facility costs	7,000	0		7,000								
Seu	1	j												
Direct Expenses	7	Food and beverages	13,015	0		13,015								
ect		F4- 4-1												
ă	8	Entertainment	0	600		600								
	9	Other direct expenses .	1,251	705		1,956								
					 									
	10	Direct expense summary. Add				22,880								
	11	Net income summary. Subtra			>	635								
Ρê	irt II	Gaming. Complete if the than \$15,000 on Form 99		ed teston Form 99	ou, Part IV, line 19, or	reported more								
	Г	11211 \$13,000 011 1 01111 30		(b) Pull tabs/instant		(d) Total gaming (add								
ž		L	(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))								
Revenue	}													
<u> </u>	1	Gross revenue												
S	2	Cash prizes												
rect Expenses	-	Sush phi203												
χĎ	3	Noncash prizes												
Ä														
Direc	4	Rent/facility costs		L										
Ц	5	Other direct expenses .												
	→	Carlor direct expenses .	☐ Yes %	☐ Yes %	☐ Yes %									
	6	Volunteer labor	☐ No	□ No	☐ No	· · · · · ·								
)													
	7	Direct expense summary. Add	d lines 2 through 5 in co	olumn (d)										
	8	Net gaming income summary	Subtract line 7 from li	ne 1 column (d)	.									
		iver garming meetine summary	, Cabitact into 7 Hotti ii	110 1, column (a)	· · · · · · · · · · · · · · · · · · · 									
ę)	Enter the state(s) in which the org	ganization conducts ga	ming activities:										
		ls the organization licensed to co	enduct gaming activities	s in each of these states	3?	🗌 Yes 🗌 No								
	b	If "No," explain:												
	-													
10)a i	Were any of the organization's ga	aming licenses revoked	l, suspended, or termina	ated during the tax vear	? . 🗌 Yes 🗍 No								
		If "Yes," explain:												

chedu	le G (Form 990 or 990-E∠) 2016 Pag	ge 🎜
11	Does the organization conduct gaming activities with nonmembers?	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity	
40	formed to administer charitable gaming?	No
13 a	Indicate the percentage of gaming activity conducted in: The organization's facility	%
b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	<u> </u>
	records:	
	Name ▶	
	Address►	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	110
_	amount of gaming revenue retained by the third party ▶ \$	
С	If "Yes," enter name and address of the third party:	
	Name ▶	
	Address►	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions:	
	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$	
Part		_
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	
Scher	dule G, Part I, Line 2b(iv) - The Goucher Prison Education Partnership collected gifts of \$490,565 during the fiscal year. The College	
	nizes that the development specialist had a significant role in generating that revenue, but the College is unable to quantify the	
	fic gross receipts allocable to the development specialist as fundraising was done in a collaborative environment at the direction and	d
with t	the assistance of the Goucher Prison Education Partnership Director and the funds were receipted by the College.	
		·

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance is obtained by the control of the series of the serie	Page (2010) Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	sated if additional space is needed. (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, recipients cash grant noncash assistance FMV, appraisal, other)	11.1			mation. Provide the information required in Part I. line 2: Part III. column (b): and any other additional information.
Schedule I (Form 990) (2016) Part III Grants a Part III C (a) Type c (a) Type c (b) Type c (c) Type c (c) Type c (d) Type c (e) Type c (e) Type c (f) Type	Grants and Other Assistance to Domestic Ind	Part III can be duplicated if additional space is needed. (a) Type of grant or assistance recipients	1 See Schedule I, Part IV, Statement 1			Supplemental Information. Provide the Informa

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990.

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

2016 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GOUCHER COLLEGE 52-0591613 Questions Regarding Compensation Part I Yes No 1a 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 Payments for business use of personal residence ▼ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line ✓ 2 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 Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 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? 5a 5b 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 6b 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 nonfixed 7 Were any amounts reported on Form 990. Part VII. paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2016

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 aren't 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.

Note: The sum of columns (B)(I)—(III) for each listed individual must equal the total amount of roll 1990, Falt VII, Section A, IIIIe 1a, applicable columns (B)(I)—(III) for each listed individual. (B) Breakdown of W-2 and/or 1099-MISC compensation	or eac		3) Breakdown of	W-2 and/or 1099-MIS	SC compensation	it vit, section A, illie	a, applicable coluin	וו (ט) מווט (ב) מוווטמוווג	iol tilat lilolylodal.
	~			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	GIII Othor	other deferred	(D) Nontaxable	(E) lotal of columns	in column (B) reported
(A) Name and Title	_	o	(i) base compensation	(ii) bonus a incentive compensation	reportable compensation	compensation		(2) (N(2)	as deferred on prior Form 990
Jose' Antonio Bowen, President	8		317 187		19.598	16.563	39,289	392,637	0
•	E		0	0		0	0	0	0
Trishana Bowden, Vice	3		211,672	0	1,27	13,191	64,023	290,156	0
2 President for Advancement	E	-	0	0	0	0	0	0	0
Bryan Coker, Vice President and	3		143,040	0	908	9,443	24,388	177,677	0
3 Dean of Students	E		0	0	0	0	0	0	0
	€	-	160,455	0	1,654	10,290	9,526	181,925	0
President for Information	8	_	0	0	0	0	0	0	0
Leslie Lewis, Provost and Vice	8		206,596	0	1,739	13,190	10,013	231,538	0
5 President for Academic Affairs	€	_	0	0	0	0	0	0	0
Lynne Lochte, Vice President for	⊢		179,054	0	19,325	12,562	9,500	220,441	0
Finance and Administration 6	€		0	0	0	0	0	0	0
Deborah Lupton, Vice President	8	<u> </u>	136,158	0	5,764	086'8	8,903	159,805	0
7 for Human Resources	€		0	0	0	0	0	0	0
Barbara Stob, General Counsel	ε	_	154,466	0	1,585	9,940	9,879	175,870	0
80	€	_	0	0	0	0	0	0	0
	-		199,629	0	2,136	12,826	19,440	234,031	0
President for Strategic Initiatives			0	0	0	0	0	0	0
George Delahunty, Professor	€		128,767	0	541	7,391	23,747	160,446	0
10	€		0	0	0	0	0	0	0
Eric Singer, Director of	8	-	134,793	0	889	995'8	8,272	152,319	0
International Studies	8		0	0	0 0	0	0	0	0
Nancy Hubbard, Associate	8		126,591	0	189	7,407	22,506	156,693	0
12 Professor	€		0	0	0	0	0	0	0
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13	€								
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15	€	_							
	(0)	_							
16	€								
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Schedule J (Form 990) 2016
Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part
for any additional information.
Schedule J, Part I, Line 1a - A residence and limited personal services are provided for the convenience of the President of the College (non-taxable). Occasionally, the College paid for
transportation services for the President's spouse to attend college-related events (non-taxable). In addition, the College provides a de minimis gross-up payment to senior staff to cover
the tax impact of long-term disability insurance (taxable).
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Schedule J (Form 990) 2016

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

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

▶ Attach to Form 990.

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OMB No 1545-0047

Open to Public Inspection Employer identification number

(i) Pooled financing Yes No 욷 ž 52-0591613 (h) On behalf of issuer Yes No Yes Yes (g) Defeased Yes No 0 0 2019 30,000,000 27,013,195 2,986,805 ŝ ş To finance and refinance the costs of Refund Series 2004 Revenue Bonds originally issued Aug. 18, 2004. certain capital projects to enhance Refund MHHEFA Series 2012B and 2012C bonds, dated 8/2012 ပ O (f) Description of purpose Yes Yes 76,601 2017 76,601 991,998 60,565,232 60,488,631 ž ş 0 8 Yes Yes 22,315,289 60,565,232 30,000,000 2013 e) Issue price 87,289 22,315,289 469,475 ŝ ž 4 Yes Yes (d) Date issued 08/30/2012 06/20/2017 06/20/2017 Does the organization maintain adequate books and records to support the ₹ Are there any lease arrangements that may result in private business use 574218KW2 5742182H5 (c) CUSIP# Was the organization a partner in a partnership, or a member of an LLC, Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? (b) Issuer EIN 52-0936091 52-0936091 52-0936091 which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? . Working capital expenditures from proceeds MD Health and Higher Educational Facilities Authority Series 2012A MD Health and Higher Educational Facilities MD Health and Higher Education Authority Goucher Issue 2017B Authority Goucher College Issue Series Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Year of substantial completion . Gross proceeds in reserve funds Proceeds in refunding escrows. Issuance costs from proceeds **Private Business Use** final allocation of proceeds? Other unspent proceeds . Amount of bonds retired Other spent proceeds. Total proceeds of issue (a) Issuer name **Bond Issues** Proceeds GOUCHER COLLEGE Name of the organization Part III Part II Part I 13 5 9 Φ 6 우 4 4 N ო 4 Ŋ 9 7 Ø 7 ပ

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

bond-financed property? .

Cat No 50193E

Schedule K (Form 990) 2016

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Schedule K (Form 990) 2016

Part III	Private Business Use (Continued)								1 aga
		,	A		B		C	Δ _	
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	ON	Yes	No	Yes	No	Yes	No
٩	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	>				>			
0	Are there any research agreements that may result in private business use of bond-financed property?		`		>		`		
ס	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	} 	%0	 	%		%		%
က	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		%0		%		%		%
9	Total of lines 4 and 5		%0		%0		%0		%
7	Does the bond issue meet the private security or payment test?		,		,		1		
8a	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 issued?		<i>*</i>		/	-	,		
q	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
U	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
6	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	,		>		>			
Part IV	IV Arbitrage								
		¥	1		В		၁	a	
-	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	№	Yes	S >	Yes	S >	Yes	%
7	If "No" to line 1, did the following apply?								
æ .	Rebate not due yet?		`	>		>			
a o	No rebate due?	,	,		>				
1	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
က	Is the bond issue a variable rate issue?		`		>	>			
4 a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		>		`		`		
Ω	Name of provider								
ပ	Term of hedge								
٠	- 1								
b	was tre redge terminated:							Schedule K (Form 990) 2016	orm 990) 2016

June 30, 2017 and no rebate was due.

applicable regulations?

Schedule K (Form 990) 2016

Schedule K (Form 990) 2016

d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? 6 Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? Arbitrage (Continued) b Name of provider Term of GIC . Part IV ပ

requirements of section 1487

Part V

. SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2016

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

(5) (6) (7) (8) (9) (10) Total ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open To Public

OMB No 1545-0047

GOU	CHER COLLEGE							1		52-0)5916 [°]	13		
Par	Excess Bene Complete if the	fit Transaction ne organization	is (section 501 answered "Ye	(c)(3), s s" on F	ection orm 99	501(c)(4), and 0, Part IV, lin	d 501(c)(29) e 25a or 25t	organız o, or Fo	ations m 99	only) 0-EZ,	Part \	V, line	40b.	
1	(a) Name of disqualified	nomon	(b) Relationship be	etween di	squalified	person and	(a) [Description	of train	anantini			(d) Con	rected?
	(a) Name of disqualified	person		organızat	ion	}	(C) L	escriptio	i oi trai	isactioi	1		Yes	No
(1)														
(2)														
(3)														
(4)					•									
(5)								-						
(6)														
2	Enter the amount under section 4958	3 <i></i> .									> \$;		
3	Enter the amount o	f tax, if any, on	line 2, above,	reimbu	rsed by	the organiz	ation			!	▶ \$	<u> </u>		
Part	Complete if th	l/or From Interne organization eported an amo	answered "Ye	s" on F				Form 99	90, Pa	rt IV,	line 2	6; or 1	f the	
		(b) Relationship with organization	(c) Purpose of loan	fron	an to or the zation?	(e) Ongina principal amo		alance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement	
			<u> </u>	То	From				Yes	No	Yes	No	Yes	No
(1)		ļ		<u> </u>	<u> </u>				└	<u></u>	<u> </u>			L
(2)	_ 	ļ		<u> </u>	<u> </u>	L			└	<u> </u>			L	
(3)			ļ	<u> </u>					<u> </u>					L
(4)				I					1	J		1		

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) Dependent of Employee	Dependent of Employee	42,600	Tuition Remission	Non-cash credit applied to to
(2)	1		<u> </u>	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	L			

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
					Yes	No
(1)						
(2)		_+	·	<u> </u>		
(3)					 -	
(4) (5)						
(6)				 		
(7)					_ †	
(8)						
(9)						L_
10)				<u> </u>		<u> </u>
Part V	Supplemental Information Provide additional information	n for responses to questions	on Schedule L (see	instructions).		

			^^			
	-1					
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	·					

. SCHEDULE M (Form 990)

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

2016

► Attach to Form 990. ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GOUCHER COLLEGE

52-0591613

Employer identification number

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art-Works of art	1	7	0	policy			
2	Art-Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household		-					
	goods			<u></u>	l			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	L						
9	Securities-Publicly traded		80	840,776	NYSE			
10	Securities—Closely held stock .			·				
11	Securities—Partnership, LLC,	Ì			Ì			
	or trust interests	<u> </u>		 	L			
12	Securities—Miscellaneous	<u> </u>	_ <i></i>		Ļ			
13	Qualified conservation	Į.			[
	contribution—Historic structures	-			}			
4.4	Structures	<u> </u>			 			
14	contribution—Other			1	}			
45	Real estate—Residential	}		 	 			
15 16	Real estate—Residential	 			 			
17	Real estate—Other	}						
18	Collectibles	<u> </u>		 				
19	Food inventory				 			
20	Drugs and medical supplies							
21	Taxidermy	<u> </u>			ļ			
22	Historical artifacts	·						
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (Horses and equestri)		4	0	Policy			
26	Other ► (
27	Other ► ()							
28	Other ► (Ĺ						
29	Number of Forms 8283 received				1 (
	which the organization completed	Form 828	3, Part IV, Donee Acknowle	dgement	29			4
							Yes	No
30a	During the year, did the organizat					{ }		
	28, that it must hold for at least the							
-	to be used for exempt purposes t		e notating period?			30a		
	If "Yes," describe the arrangemen					ĺ		ĺ
31	Does the organization have a contributions?							
32a	Does the organization hire or use					31	√	
JZa	-	-		•		[20-]		l
h	If "Yes," describe in Part II.					32a	_	
33	If the organization didn't report an	amount in	column (c) for a type of pro	nerty for which column (a)	is chacked			1
-	describe in Part II	anioant in	obtaining to a type of pro	porty for willon column (a)	o checkeu,	[]		(

	Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Schedule M, Part I, Line 33 - It is the policy of Goucher College to record works of art, horses and other non cash gifts received, other than gift annualties and pliedges, at a book value of zero.		
gift amulties and pledges, at a book value of zero.	directly in	support of the Goucher Prison Education Partnership. That contract has terminated.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
GOUCHER COLLEGE	52-0591613
Form 990, Part VI, Section A, Line 4 - The College's charter and bylaws were amended on October 21,	2017 to permit the appointment of
two faculty members to the board, ex officio, with no voting rights. The bylaws were also amended to	provide that in the event of the
incapacity of the President or vacancy in the office of the President, the Executive Committee be empo	owered to appoint an individual to
serve as acting President, pending further action by the Committee.	
Form 990, Part VI, Section B, Line 11b - After review by the Audit and Governance Committee, the com	plete Form 990 and Form 990T were
distributed electronically to the Board of Trustees on April 30, 2018 for a period of review and commer	
the period of comment and review, a meeting of the Audit and Governance Committee of the Board of	Trustees was convened to review and
revise (if necessary) the Form 990 and 990T. The Forms were approved for Filing by the Audit and Gov	vernance Committee of the Board of
Trustees on May 7, 2018.	
Form 990, Part VI, Section B, Line 12c - Every trustee, officer and key employee is provided a copy of	the Conflict of Interest Policy each
spring and required to complete an annual disclosure form reporting any known material financial or	other interest of the trustee, officer or
key employee or a family member in any transaction or business relationship the College has or is co	nsidering, including material financial
or other interests in any outside entity involved in such transaction or relationship. General Counsel of	of the College reviews the disclosure
forms and reports any disclosures to the Audit and Governance Committee of the Board of Trustees.	Committee members then determine
what, if any, action should be taken as to each disclosure and these actions are implemented by the G	ieneral Counsel. The policy directs the
committee to review and update the list of the key employees, and the policy itself is reviewed on a re	gular basis and revised as necessary.
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Form 990, Part VI, Section B, Line 15 - Each year the College President distributes to the Board of Trus	stees the President's Goals and
Objectives ("Goals and Objectives") for the upcoming year, as well as provides periodic updates on c	urrent year goals. Each spring
Goucher receives data from the College and University Professional Association (CUPA) on compens	ation at comparable institutions,
including Goucher's peer group, other local colleges, and prospective overlap institutions. The Vice P	resident for Human Resources
Director prepares this information for review by the College President and by the Compensation Com	mittee of the Board. In addition, each
spring the Chair of the Board asks Board members to supply the Board Chair and the Chair of the Cor	
comments a Board member may have on the President's performance with respect to the Goals and C	bjectives. After reviewing all of these
materials, the Compensation Committee meets with the President to review the President's compensa	tion recommendations for senior staff
and evaluate the President's performance. The Compensation Committee's role with respect to compe	
whether any recommendation from the President includes excess benefits. The Compensation Comm	
the President's performance with respect to the President's Goals and Objectives, and then meets in	
recommendation for the President's compensation. This recommendation is then considered by the E	
Trustees and final action is taken. Meeting minutes are maintained to document each Committee's rev	
Committee Chair provides the General Counsel of the College with a confidential written report of the	
Committee and the Executive Committee and of the Executive Committee's action. This report include	
which the final determinations were based. A copy of this report is maintained in a confidential file ke	ot by the General Counsel to
memorialize the review.	
Form 990, Part VI, Section C, Line 19 - The governing documents, conflict of interest policy, and audit	ed financial statements are available
to the public upon request. Some policies are also available on the College website.	
Form 990, Part XI, Line 9 - Unrealized Gains on Interest Rate Swap Agreement	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

GOUCHER COLLEGE

Part I

OMB No 1545-0047

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

Related Organizations and Unrelated Partnerships

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

Employer Identification number 2016 Open to Publi Inspection

52-0591613

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	(a), Name, address, and EIN (if applicable) of disregarded entity	of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	(1)						
(2)	(2)						
(2)							
(4)	(4)						
(2)							
(9)							
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.	 Exempt Organizations. Complete of organizations during the tax year. 	omplete if the organization ax year.	answered "Yes" or	n Form 990, Pa	rt IV, line 34 bec	ause it had

(a) Name, address, and EIN of related organization	anization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled	2(b)(13) ed
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.	structions for Form 990.	_	Cat No	Cat No 50135Y		Schedule R (Form 990) 2016	Form 990)	2016

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Schedule R (Form 990) 2016	Part V Transactions With Relate

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Schedule R (Form 990)	Schedule R (Form 990)	-						J
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Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

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.

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		country)	unrelated, excluded	501(c)(3)	!			of Schedule K-1		
			sections 512-514)	organizations?				٠,		
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Schedule R (Form 990) 2016	Page 5
Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See Instructions.	
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Schedule R (Form 990) 2016

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SCH	(For

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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2016 Open to Public Inspection

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

Employer identification number 52-0591613

%□ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form ✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? General Information on Grants and Assistance GOUCHER COLLEGE Part 1 Part II

	990, Par IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated it additional space is needed.	or any recipient	that received my	ore than \$5,000.	Part II can be d	uplicated it addition	nal space is needed.	
1 (a)	1 (a) Name and address of organization or government	(a)	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
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0 B	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	i 501(c)(3) and gov rganizations listec	ernment organizat in the line 1 table	ions listed in the lii	ne 1 table			

Schedule I (Form 990) (2016)

Cat No 50055P

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