DLN: 93493135081419 OMB No 1545-0047

2017

## **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

foundations)

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

Department of the Treasury Inspection Internal Revenue Service A For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018 C Name of organization D Employer identification number **B** Check if applicable Vassar College  $\square$  Address change 14-1338587 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) 124 Raymond Ave Box 12 ☐ Amended return ☐ Application pending (845) 437-7000 City or town, state or province, country, and ZIP or foreign postal code Poughkeepsie, NY  $\,$  12604 **G** Gross receipts \$ 469,441,179 Name and address of principal officer H(a) Is this a group return for Elizabeth Howe Bradley □Yes ☑No subordinates? 124 Raymond Avenue H(b) Are all subordinates ☐ Yes ☐No ıncluded? Poughkeepie, NY 12604 If "No," attach a list (see instructions) Tax-exempt status **✓** 501(c)(3) ☐ 501(c)( ) **◄** (insert no ) 4947(a)(1) or **H(c)** Group exemption number ▶ J Website: ► www vassar edu L Year of formation 1861 M State of legal domicile NY Part I Summary  ${\bf 1} \ {\sf Briefly describe the organization's mission or most significant activities}$ The mission of Vassar College is to make accessible "the means of a thorough, well-proportioned and liberal education" that inspires each nd 6 | 5 | 7 | 1 | 5 | 7 | 10 | 15 | 3 | 14 | 12 | 15 | 0 | 12 | 3 | 16 | 16 | 16 |

12,553 ,369,486 ,731,996 ,118,466 ar ,709,260 ,892,477 ,816,783 my
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,011,202
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,404,890 ,810,535
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258,565
4,311
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36
Jrots /

Paid
Preparei

Paid	Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN
Preparer	Firm's name	Firm's EIN ►			
Use Only	Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

Form	990 (2017)					Page <b>2</b>
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part I	п	
1	Briefly describe the o	organization's mission				
to lea judgi supp camp open	ad a purposeful life The ment, encourages artic orts a high standard of ous that fosters a learn to all and strives to pi	ne College makes poss culate expression, and f engagement in teach ning community Found ursue diversity, inclusi	ible an education nurtures intelled ing and learning, ded in 1861 to pr on, and equity as	that promotes analy tual curiosity, creativ , scholarship and arti ovide women an edu s essential componer	oportioned and liberal education tical, informed, and independer vity, respectful debate and engatic endeavor, a broad and deeg cation equal to that once availats of a rich intellectual and cultinand empowered to thrive	nt thinking and sound ged citizenship Vassar o curriculum, and a residential ble only to men, Vassar is now
2	the prior Form 990 o	or 990-EZ?		vices during the year	which were not listed on	. □Yes ☑No
	•	ese new services on So				
3	services?	cease conducting, or i		changes in how it cor	nducts, any program	. □Yes ☑No
4	Section 501(c)(3) an		ons are required	to report the amoun	ee largest program services, as t of grants and allocations to ot	
4a	(Code See Additional Data	) (Expenses \$	153,096,528	including grants of \$	70,639,124 ) (Revenue \$	166,452,583 )
4b	(Code See Additional Data	) (Expenses \$	25,873,190	including grants of \$	0 ) (Revenue \$	0)
4c	(Code See Additional Data	) (Expenses \$	21,589,146	including grants of \$	0 ) (Revenue \$	0)
	(Code	) (Expenses \$	23,213,120	ıncludıng grants of \$	99,571 ) (Revenue \$	4,630,616 )
	Other program services	ınclude research expendit	ures, general progr	am overhead costs, and	auxiliary enterprise revenue and exp	enditures
4d	Other program servi (Expenses \$	ces (Describe in Sched 23,213,120 ind	lule O ) cluding grants of	\$ 9'	9,571 ) (Revenue \$	4,630,616 )
40	Total program serv	vice expenses >	223 771 9	84		

or X as applicable

**Checklist of Required Schedules** 

Page 3

Nο

Nο

No

Nο

Nο

Νo

Nο

Nο

No

Nο

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

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

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

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

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

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

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

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

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

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

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

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

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

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

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

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

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

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

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

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

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

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

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

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

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

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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, Yes

R

9

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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Yes

29

Part IV	Checklist of Required Schedules (continued)

Yes 20a

20b

21

No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

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

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

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

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

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

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

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

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

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

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 . . . . . .

22 Yes Yes 23

Yes

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Nο

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 . . . . . . . . . . . . . . . . . Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of

Yes 24a 24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35h

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37

Yes

Yes

Yes

Yes

Yes

Yes

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Nο Nο Νo Nο No

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 

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

instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V	•		Ш
	5-tth		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3,452  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►EI , IT , SP , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	20		
C	If res, to line 3a or 3b, did the organization line Form 8000-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 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		
۵a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
уа b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
b	against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
_	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			N.I
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	orm <b>99</b>	0 (20:

OHIII	330 (2	2017)					Page <b>o</b>
Par	t VI	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 to 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			o" respo	nse to l	ines
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
			_			Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	36	5		
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	3!	5		
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ss rela	itionship with any other	2		No
3		ne organization delegate control over management duties customarily performed by icers, directors or trustees, or key employees to a management company or other			<b>3</b>		No
4	Did th	ne organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No
6	Did th	ne organization have members or stockholders?			6		No
7a		ne organization have members, stockholders, or other persons who had the power bers of the governing body?	to elec	t or appoint one or more	7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by)	) mem	bers, stockholders, or	<b>7</b> b	Yes	
8		ne organization contemporaneously document the meetings held or written actions ollowing	under	taken during the year by			
а	The g	overning body <sup>7</sup>			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			8b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> C		t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	ured b	y the Internal Revenu	ie Code	∍.)	
						Yes	No
L0a	Did th	ne organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the activition Franches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has th	he organization provided a complete copy of this Form 990 to all members of its go	vernın •	ng body before filing the	11a		No
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were	officers, directors, or trustees, and key employees required to disclose annually interests?	terests	that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?			13	Yes	
14		ne organization have a written document retention and destruction policy?			14	Yes	
15	Did th	ne process for determining compensation of the following persons include a review ins, comparability data, and contemporaneous substantiation of the deliberation an	and ap				
а	The o	rganization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or si le entity during the year?	mılar a	arrangement with a	16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ıard th		16b		
<b>C</b> ^	ction	C. Disclosure			100		<u> </u>
<u> 36</u> L7		ne States with which a copy of this Form 990 is required to be filed					
		CO , MA ,	MI,M	N, NH, NJ, SC, WA			
L8		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99 able for public inspection Indicate how you made these available Check all that ap		990-T (501(c)(3)s only)			
19		Own website $\ \square$ Another's website $\ \square$ Upon request $\ \square$ Other (explain in Scribe in Schedule O whether (and if so, how) the organization made its governing do		•			
20	policy	the name, address, and telephone number of the person who possesses the organ					
		elique Crump Controller 124 Raymond Ave Box 12 Poughkeepsie, NY 12604 (845			F	orm <b>99</b>	<b>0</b> (2017)

orm 990 (2	017)										Page <b>7</b>
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's <b>current</b> off tion Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's <b>current</b> key		•								
vho received organization	organization's five <b>current</b> high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's <b>former</b> office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's <b>former dire</b> , more than \$10,000 of reportab	ectors or trust le compensation	<b>ees</b> that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Form	990 (2017)														Page <b>8</b>	
Par	t VIII Section A. Officers, Direc	tors, Trustees	, Key	Empl	loye	es,	and	Higl	nest Co	mpen	sate	d Employees (	cont	tinued)		
	<b>(A)</b> Name and Title	than one box, unless person com is both an officer and a fr director/trustee) organ									(E) Reportable compensation from related organizations (W-		(F) Estimated amount of other compensation from the organization and			
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/10	099-MISC) 2/1099-MISC				related organizations		
See	Additional Data Table															
													1			
													+			
													+			
сТ	Sub-Total	art VII, Sectio	nΑ.				<b>*</b>			150.016					1 000 057	
1 2	Total (add lines 1b and 1c)  Total number of individuals (including					hove	a) who	rec		3,468,019			0		1,098,357	
	of reportable compensation from the															
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule .</i>			ee, k	ey er •	mple •	oyee,	or hi	ghest co	ompens	ated •	employee on	3	Yes	No No	
4	For any individual listed on line 1a, is organization and related organization individual											the	4	Yes		
5	Did any person listed on line 1a receiver services rendered to the organization								_			ıdual for	5	1.05	Na	
Se	ection B. Independent Contract						•						3		No	
1	Complete this table for your five high	est compensate											npen	sation		
	from the organization Report compe	(A)		year	ena	ing	with o	r wit	nin the	T		(B)		(0		
Comp	Name on the Name of the Name o	and business addre	ess							Food Se		iption of services		Comper 6	nsation 5,316,778	
	ox 417632															
	n, MA 02241 el O'Connell's Sons									Constru	uction	Services		1	,541,251	
	lampden Street ike, MA 01040															
	Capital Partners LLC									Investr	nent /	Advisor		1	,509,916	
5th Fl	Maritime Plz   Suite 500 Francisco, CA 94111															
	dge Equipment Company									Constru	uction	Services			986,187	
Agaw	Bowles Road am, MA 01001															
	Companies									Constru	uction	Services			908,780	
41155	ox 427 5 State Highway 10 , NY 13753															

		(2017)										Page <b>9</b>
Part '	VII											
		Check if Schedul	e O contains a resp	oonse or note to any	(	his Part VIII (A) revenue	Rel e> fu	(B) ated or kempt nction venue	Ŀ	(C) Inrelated ousiness revenue		(D) Revenue coluded from under sections 512-514
s s	<b>1</b> a	Federated campaign	ns <b>1a</b>	68,749								
ante	ŀ	<b>b</b> Membership dues .	1b	0								
Gr.		c Fundraising events	1c	0								
ţş.		d Related organization	ns 1d	0								
is is		e Government grants (co	ontributions) <b>1e</b>	2,012,378								
ions, Gifts, Grants r Similar Amounts	f	All other contributions, and similar amounts no above	gifts, grants, ot included <b>1f</b>	67,323,763								
Contributions, Gifts, Grants and Other Similar Amounts	g	g Noncash contributio		,381,876								
Contained and	h	Total.Add lines 1a-1	f	•	6.0	9,404,890						
				 Business		7,404,830					Т	
ğ	2a	Tuition and Fees			611310	137,0	83,170	137,083	3,170		0	0
4		Room and Board			611310		69,413	29,369			0	0
3.		Other Program Revenue			611310	2,3	57,952	2,35	7,952		0	0
Service Revenue	d											
ran	e						0		0		0	0
Program		All other program se		168.8	810,535							
<u>•</u>	g.	Total.Add lines 2a-2f	·	<u> </u>								
		Investment income (ir similar amounts) .	ncluding dividends,	interest, and other	.	11,670,971		0		-586,302		12,257,273
		Income from investme		bond proceeds	.	0		0		0		0
		Royalties		• • • • • • • • • • • • • • • • • • •	. —	0	1	0		0		0
			(ı) Real	(II) Personal	i							
	6a	Gross rents		1								
		Less rental expenses	1,744,33 675,41		0 0							
	D	tess Tental expenses	675,41		1							
	c	Rental income or (loss)	1,068,92	0	0							
	d	Net rental income or	(loss)		7	1,068,920		0		11,167		1,057,753
			(ı) Securities	(II) Other								_
	7a	Gross amount from sales of assets other than inventory	214,025,03	784,159	9							
	b	Less cost or other basis and sales expenses	187,144,44	0 1,042,27	5							
	c	Gain or (loss)	26,880,59	-258,110	6							
	d	Net gain or (loss) .				26,622,482		0		833,700		25,788,782
Other Revenue	8a	Gross income from fu (not including \$ contributions reporte	0 of d on line 1c)									
eve	_	See Part IV, line 18			_							
ď		Less direct expenses		' L		0				0		0
je		: Net income or (loss) : Gross income from g		vents •	1							
5		See Part IV, line 19										
			ā		_							
		Less direct expenses										
		: Net income or (loss)		ities •		0	!	0		0		0
	10a	Gross sales of invent returns and allowanc	es	a 1,269,856								
	b	Less cost of goods s	old	728,590	_							
		: Net income or (loss)		ntory ▶	J	541,266		541,266		0		0
		Miscellaneous		Business Code								
	11	<b>a</b> Auxılıary Revenue		900099	9	1,367,420		1,367,420		0		0
	b	Commission Revenue	e	900099	9	363,978		363,978		0		0
	c											
		All other revenue .  Total. Add lines 11a-				0		0		0		0
						1,731,398						
	12	Total revenue. See	instructions .			279,850,462		171,083,199		258,565		39,103,808 rm <b>990</b> (2017)

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other org	anızatıons must com	plete column (A)	
Check if Schedule O contains a response or note to any	/ line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	99,571	99,571		
<b>2</b> Grants and other assistance to domestic individuals See Part IV, line 22	69,904,324	69,904,324		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	734,800	734,800		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	3,481,996	2,069,035	880,815	532,146

78,078,356

6,639,974

22,483,379

5,927,557

738,448

341,526

12,553

8,431,076

3,773,391

8,219,275

3,367,537

7,542,225

3,363,173

2,347,907

11,239,627

21,642,352

875,041

5,210,488

5,041,820

1,741,880

641,956

1,764,166

273,731,996

17,849

69,749

62,462,685

5,477,978

18,548,788

4,742,045

2,264,034

5,017,470

3,366,777

4,676,180

2,085,167

772,653

11,238,326

17,185,218

229,991

3,907,866

5,041,820

1,741,880

518,084

1,623,108

223,771,984

13,965

50,219

11,711,753

829,997

2,810,422

889,134

738.448

341,526

8,431,076

188,670

3,488

637

3,884

2,812,052

2,790,623

369,949

641,660

4,011,421

1,302,622

0

0

104,779

117,131

39,508,754

527,496

1,171

3,903,918

331,999

1,124,169

296,378

12,553

16,042

389,753

75,422

908.057

933,594

445,713

117,554

n

0

n

19,093

23,927

10,451,258

Form 990 (2017)

130

123

1,320,687

domestic governments See Part IV, line 21		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	69,904,324	69,904,32
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	734,800	734,80

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

8 Pension plan accruals and contributions (include section 401

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

e Professional fundraising services See Part IV, line 17

18 Payments of travel or entertainment expenses for any

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O )

q Other (If line 11q amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)

section 4958(c)(3)(B) . . 7 Other salaries and wages

**9** Other employee benefits .

11 Fees for services (non-employees) a Management . . .

d Lobbying . . . . .

f Investment management fees .

12 Advertising and promotion .

13 Office expenses .

15 Royalties .

**17** Travel .

16 Occupancy .

20 Interest . .

23 Insurance .

a Food Service

b JYA Programs

d Memberships

c Library Materials

e All other expenses

14 Information technology

10 Payroll taxes . .

**b** Legal .

c Accounting

1

2

3

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

10,505,068 63,367,093

17,586,800

280,819

2.943.879

2.719.330

479,603,908

522.460.516

506.461.109

8.854.618

1,615,709,260

20.519,897

3,307,163

247,811,790

63.253.627

334,892,477

314,703,854

542,064,107

424.048.822

1,280,816,783

1.615.709.260

Form **990** (2017)

0

0

0

0

0

0

O

926,120

Page **11** 

Pledges and grants receivable, net . .

II of Schedule L . . . . . . .

Notes and loans receivable, net . .

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Grants payable . . .

Deferred revenue . . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

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

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

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

Unsecured notes and loans payable to unrelated third parties .

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

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

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

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)

voluntary employees' beneficiary organizations (see instructions) Complete

10a

10b

Accounts receivable, net .

Part II of Schedule L

Inventories for sale or use .

Less accumulated depreciation

	(A) Beginning of year		<b>(B)</b> End of year
Cash-non-interest-bearing	7,866,001	1	10,5
Savings and temporary cash investments	70,298,409	2	63,36

850,685,052

371,081,144

1	7,866,001
2	70,298,409
3	23.337.992

0 5

0 6

3.145.551

998.275

4.717.916

488.413.611

496.842.845

458.082.707

8.687.479

26,677,804

4,232,430

247,818,526

1,563,329,555

4

8

9

10c

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12

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15

16

17

19

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31

32

33

34

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0 14

0 18

0 22

0

0

67.904.799

346,633,559

325,763,289

518.091.431

372.841.276

1,216,695,996

1.563.329.555

938.769

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2	Total expenses (must equal Part IX, column (A), line 25)	2	
3	Revenue less expenses Subtract line 2 from line 1	3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	

Other changes in net assets or fund balances (explain in Schedule O) . . . . . . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

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

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

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

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

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

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

Form 990 (2017)

**Reconcilliation of Net Assets** 

Donated services and use of facilities . . .

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

**Financial Statements and Reporting** 

Investment expenses . . . . . .

Part XI

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

6,118,466
1,216,695,996
51,461,086

7

8

9

10

Page **12** 

0

0

0

6.541.235

No

Νo

1,280,816,783

Yes

Yes

Yes

Yes

Yes (2017)

2a

2b

2c

3a

3b

## Additional Data

Form 990 (2017) Form 990, Part III, Line 4a:

chart a rigorous course of study that explores their most compelling interests

Instruction - Vassar students choose among 30 departments, 6 interdisciplinary programs, 11 multidisciplinary programs, 51 majors, and approximately 1,000 courses to

Name: Vassar College

**EIN:** 14-1338587

**Software Version:** v1.00

**Software ID:** 17005980

Academic Services - Advising and support services to provide guidance to our students to help them accomplish their goals. The mission of the academic services division is to ensure and to strengthen their fulfilling experience as a Vassar student

Form 990, Part III, Line 4b:

Form 990, Part III, Line 4c: Student Services - As a residential college, Vassar is committed to providing support services to help students make the most of their time at Vassar. The Office of the Dean of the College oversees and coordinates services that directly impact the quality of student life, both academic and non-academic

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any nours							organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Karen Herskovitz Ackman Trustee and Committee Chair	4	x						0	0	0	
Eric Beringause Trustee	2	x						0	0	0	
Jamshed J Bharucha Trustee and Committee Chair	4	х						0	0	0	
Jason Blum Trustee	2	х						0	0	0	

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Beth Burnam Trustee

Mark Burstein

Camilla Campbell

Trustee Sharon Chang

Trustee Barbara Danz

Trustee Linda Fairstein

Trustee

Trustee and Committee Chair

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

	any hours	and	, a dır	ecto	r/trد	rustee)	) !	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	101	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Richard Feitler Trustee and Committee Chair	4	X						0	0	0	
Robyn Field Trustee	2	X						0	0	0	
Anthony J Friscia Trustee and Committee Chair	4	X						0	0	0	
Jeffrey A Goldstein	4	X						0	0	0	

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Trustee
Anthony J Friscia
Trustee and Committee Chair
Jeffrey A Goldstein
Trustee and Committee Chair

Lorna Bade Goodman

Trustee

Trustee

Huang Hung

Trustee

Trustee

Stephen Hankins

Trustee and Committee Chair Heather Stuart Haaga

Maryellen Cattanı Herringer

Trustee and Committee Chair

Leslie Jackson Chihuly

......

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

	any hours								organizations	from the	
	for related organizations below dotted line)		Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Philip Jefferson Trustee	2	х						0	0	0	
Henry P Johnson Trustee and Committee Chair	4	x						0	0	0	
Lisa Kudrow Trustee	2	х						0	0	0	
Tanya Odom	2										

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Henry P Johnson	
Trustee and Committee Chair	
Lisa Kudrow	
Trustee	
Tanya Odom	
Trustee	

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Geraldine Bond Laybourne

Trustee and Committee Chair

Trustee and Committee Chair Tamar Smith Pichette

Trustee and Committee Chair

Susan Zadek Mandel

Carol S Ostrow

William A Plapinger

Kathy Putnam

Trustee

Trustee

Trustee

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Eve Slater Trustee	2	×						0	0	0
Karen Strain Smythe Trustee	2	х						0	0	0
Milbrey Rennie Taylor Trustee	2	x						0	0	0
Debra Beth Fagel Treyz Trustee	2	x						0	0	0

120,782

60,524

68,403

67,546

110,300

0

Philipley Rennie Taylor
Trustee
Debra Beth Fagel Treyz
Trustee
Christianna Wood
Trustee and Committee Chair

Elizabeth Howe Bradley - July 1

VP for Alumnae Affairs and Dev

Dean of Str Plan and Acad Res

VP for Comp and Info Svcs

Interim Pres and Trustee

Jonathan Chenette - Through June 30

President and Trustee

Marianne Begemann

Catherine Baer

Michael Cato

and Independent Contractors

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230,713

298.964

209,381

191,444

376,154

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

40

40

40

40

40

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer from the week (list from related compensation and a director/trustee) any hours organization organizations from the

	any nours	anu	a uii	ecto	א / ונ	ustee)	'	Organization	organizations	Irom the	
	for related organizations below dotted line)		Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Angelique Crump Controller	40			x				154,157	0	29,816	
Stephen Dahnert VP for Fin and Admin	40			х				287,848	0	109,036	
Susan Dekrey - Through October 10 VP for Communications	40			х				210,991	0	42,596	
Wesley Dixon - October 23 Secretary of the Board	40			x				13,751	0	992	
Stephen B Book Through June 20	40										

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173,977

190,852

128,364

192,695

190,741

204,182

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0

0

57,727

152,932

28,599

52,881

39,059

59,893

VP for Communications
Wesley Dixon - October 23
Secretary of the Board
Stephen R Rock - Through June 30
Acting Dean of the Faculty

......

Christopher Roellke

Dean of the College

Secretary of the Board

Robert DeMaria

Professor of Art

James H Merrell

Professor of History

Professor of English

Susan Donahue Kuretsky

Christopher Smart - Through June 30

and Independent Contractors (A) Name and Title

hours per week (list any hours for related organizations below dotted line)
 40
 C
40

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

(B)

Average

Institutional

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

(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) employee Х

Reportable compensation from the organization (W- 2/1099-MISC) 201,349 212,456

(D)

compensation from related organizations (W- 2/1099-MISC)

(E)

Reportable

compensation from the organization and related organizations 58,193 39,078

(F)

Estimated

amount of other

Art D Rodriquez

Paul A Ruud

Professor of Economics

Dean of Admission and Financial Aid

efii	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493135081419
SCI	HED m 990	ULE A		Public (	Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017
		f the Treasury	▶ Infe	ormation abou	► Attach to Form to Schedule A (Form	990 or Form 99	0-EZ.	ictions is at	Open to Public
Interna Nam	l Reven e of th	nie Service he organiza	tion		<u>www.irs.g</u>	ov/form990.		Employer identific	Inspection ation number
Vassa	r Colleg	je						14-1338587	
	rt I				us (All organization			See instructions.	
	rganız —		•		it is (For lines 1 thro	<b>5</b> ,	,		
1	Ш	A church, c	onvention of	churches, or as	sociation of churches	described in <b>sec</b> t	tion 170(b)(1)	(A)(i).	
2	✓	A school de	scribed in <b>se</b>	ction 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ) )		
3		A hospital o	r a cooperat	ive hospital serv	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6		•	·	_	governmental unit de				
7		_		mally receives ( <b>vi).</b> (Complete	a substantial part of it Part II )	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	nbed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its éxempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	tain exceptions, a	and (2) no more	than 331/3% of its su	-
11		An organiza	ition organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	e purposes of one or )(3). Check the box
a		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting on t of the sup	rganızatıon sup portıng organıza	ervised or controlled i				
c		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Entor			on-functionally lorganizations	integrated supporting	organization			
g				_	ipported organization(	c)		_	
		Name of support organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organia (in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota	l				structions for	Cat No 11285		 Schedule A (Form 9	

or loss from the sale of capital

12 Gross receipts from related activities, etc (see instructions)

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 Schedule A, Part II, line 14

Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))

box and stop here. The organization qualifies as a publicly supported organization

and stop here. The organization qualifies as a publicly supported organization

check this box and stop here . . . . . . . .

assets (Explain in Part VI) Total support. Add lines 7 through

organization

instructions

supported organization

11

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support						
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	31,344,793	34,360,332	22,110,693	46,665,533	69,404,890	203,886,241
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	o	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	31,344,793	34,360,332	22,110,693	46,665,533	69,404,890	203,886,241
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4						42,038,580 161,847,661
5	ection B. Total Support	l					
	Calendar year (or fiscal year beginning in) ▶	(a)2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
7	Amounts from line 4	31,344,793	34,360,332	22,110,693	46,665,533	69,404,890	203,886,241
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	14,230,630	11,493,826	8,354,039	8,255,164	13,415,303	55,748,962
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
4 ^	Other income. Do not include gain						

5,133,331

13 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,

16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2016. 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

17a 10%-facts-and-circumstances test-2017. 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

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

b 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

5,679,665

3,693,371

3,001,254

Schedule A (Form 990 or 990-EZ) 2017

12

14

15

21,840,463

281,475,666

791,762,870

57 500 %

67 230 %

▶Ⅵ

▶□

▶□

4,332,842

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI )						
13	Total support. (Add lines 9, 10c,						
14	11, and 12)  First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and <b>stop here</b>			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18	
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	III section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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 <b>Part VI</b> when and how the organization made the			
	determination	3b		

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 <b>Part VI</b> when and how the organization made the	·		
	determination			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	on 170(c)(2)(B) purposes?		
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			

				3.
c	the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purpos Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\rightarrow$	
	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 <b>Part VI</b> 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		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a Was any supported organization not organized in the United States ("foreign supported organization checked 12a or 12b in Part I, answer (b) and (c) below	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	cnecked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion 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 <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(8) numbers			
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

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

organization's organizing document?

10a

answer line 10b below

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

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

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

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

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

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

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

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
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?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  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  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in <b>Part VI.</b></i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

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

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in <b>Part VI</b> ) See instructio	ns		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions			
Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017		
	Other distributions (describe in Part VI) See instruction  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to whole details in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see (i) Underdistributions

details in <b>Part VI</b> ) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
<b>b</b> From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			
<b>d</b> From 2015			
e From 2016			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. . . . . . **b** Excess from 2014. . . . . c Excess from 2015. . . . . **d** Excess from 2016. . . . . e Excess from 2017. . . . .

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Schedule A (	(Form 990 or 990-E	Y) 2017 Page <b>8</b>				
Part VI						
		Facts And Circumstances Test				
990 Sched	dule A, Supplem	ental Information				
Ret	urn Reference	Explanation				

Other income includes revenue from the sale of inventory and other miscellaneous revenue

Schedule A, Part II, Line 10

SCHEDULE C

## Political Campaign and Lobbying Activities

▶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

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

OMB No 1545-0047

Open to Public Inspection

DLN: 93493135081419

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Vassar College 14-1338587 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2 5

Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

activity

Volunteers?

1

4

5

Part IV

expenditure next year?

Return Reference

Schedule C, Part II-B, Line 1

(b)

Amount

(a)

No

No

Nο

Yes

4

5

## Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? No Mailings to members, legislators, or the public? No Nο Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? No No Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? No Other activities? Yes Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Nο If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year b Carryover from last year 2b 2c С Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

The College pays membership dues to several organizations which may engage in lobbying activities on

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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

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

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

behalf of their members

**Supplemental Information** 

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

**Supplemental Financial Statements** 

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

DLN: 93493135081419 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** Vassar College 14-1338587 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 2 Aggregate value of contributions to (during year) 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? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ✓ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b 1 Number of conservation easements on a certified historic structure included in (a) 2c 0 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ✓ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 60,923,157 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Par	ш	Organizations Ma	aintaining Coll	ections c	of Art, Hi	stori	cal Tı	reası	ıres, o	r Other	Similar A	ssets (conti	nued)	
3		g the organization's acq s (check all that apply)	uisition, accession	, and other	records, c	check a	any of	the fo	llowing t	that are a	significant	use of its coll	ection	
а	$\checkmark$	Public exhibition				d	✓			ange prog	ırams			
b	<b>✓</b>	Scholarly research				e	<b>✓</b>	Othe	r Instru	ction				
c	✓	Preservation for future	e generations											
4	Prov Part	ide a description of the XIII	organization's coll	ections and	l explain h	ow the	y furth	ner th	e organi:	zation's e	xempt purpo	ose in		
5		ng the year, dıd the org ts to be sold to raise fur									nılar	<b>☑</b> Yes	□ N	0
Pa	rt IV	Escrow and Cust	odial Arranger	nents.										
		Complete if the ord X, line 21.										unt on Form	990,	Part
1a		e organization an agent ided on Form 990, Part I		n or other	ıntermedia	ary for	contril	bution	s or oth	er assets	not	☐ Yes	□ <b>N</b>	o
ь	If "Y	es," explain the arrange	ement in Part XIII	and comple	ete the follo	owina	table					mount		_
c		nning balance		aa oop		· · · · · · · · · · · · · · · ·				1c				_
d	_	tions during the year								1d				_
е		abutions during the year	-							1e				_
f		ng balance								1f				_
<b>2</b> a		the organization include	an amount on For	m 990, Par	t X, line 2	1, for e	escrow	or cu	ıstodıal a	account lia	ability?	☐ Yes	□ N	0
b	If "Y	es," explain the arrange	ment in Part XIII	Check here	e if the exp	olanatio	on has	been	provide	d in Part :	XIII			
Pa	art V	Endowment Fund	<b>ds.</b> Complete ıf	the organ	ızatıon ar	nswer	ed "Ye	es" o	n Form	990, Pai	t IV, line 1	LO.		
				(a)Currer			lor yea	_		ears back	(d)Three ye		our yea	
1a	Begini	ning of year balance .		1,002	,570,163	9	928,816	,580	91	82,974,375	974	,179,926	868,	744,442
b	Contri	butions			,805,270		21,058			14,043,302		,752,988		637,551
С	Net in	vestment earnings, gair	ns, and losses	79	,893,167	1	103,319	,519	-:	17,092,070		,039,331	123,	797,933
d	Grants	s or scholarships	.	15	,247,251		14,723	3,622	:	13,494,424	13	,110,055	12,	014,840
е		expenditures for facilition rograms	es	38	,190,026		35,901	.,137		37,614,603	23	,887,815	39,	985,160
f	Admın	nistrative expenses .			0			0		0		0		0
g	End of	f year balance	[	1,082	,831,323	1,0	002,570	,163	9:	28,816,580	982	,974,375	974,	179,926
2		ide the estimated perce d designated or quasi-e	-	nt year end 14 48 %	d balance (	lıne 1g	g, colui	mn (a	)) held a	ıs				
a		nanent endowment <b>&gt;</b>	36 68 %	11 10 70										
b		porarily restricted endov		34 %										
С		percentages on lines 2a			10%									
3а	Are t	there endowment funds nization by				on that	are h	eld an	ıd admın	ıstered fo	r the		Yes	No
	_	inrelated organizations										3a(i)	Yes	
		related organizations .										3a(ii)		No
b		es" on 3a(II), are the re		s listed as r	equired or	n Sched	dule R	,				3b		
4	Desc	ribe in Part XIII the inte	ended uses of the	organizatio	n's endowr	ment f	unds							
Pa	rt VI	Land, Buildings,	and Equipmen	t.										
		Complete if the or												
	Descr	ription of property	(a) Cost or othe (Investmen		(b) Cost o	r other	pasis (d	other)	(c) Acc	cumulated o	depreciation	( <b>d)</b> B	ook valu	e
1a	Land			539,843			1,58	36,030					2	2,125,873
b	Buildir	ngs		4,158,380			577,37	71,694			210,963,834		370	,566,240
С	Leasel	hold improvements		0			2,61	19,863			0		2	2,619,863
		ment		0			93,12	27,112			81,225,619		11	L,901,493

171,282,130

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

92,390,439

479,603,908

78,891,691

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he organization ans	wered "Yes" on Form 9	90, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value		od of valuation if-year market value
(1) Financial derivatives		222 0, 3114 0	,
(2) Closely-held equity interests			
(A) Hedge Funds	265,968,715		F
(B) Real Estate, Oil, and Gas	78,529,609		F
(C) Marketable Real Estate	3,540,799	)	F
(D) Venture Capital (E)	158,421,986	5	F
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  Part VIII Investments—Program Related.	506,461,109	9]	
Complete if the organization answered 'Yes' on F			
(a) Description of investment	(b) Book value		od of valuation f-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization answered		art IV, line 11d See Form	
(1)	<u>n</u>		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X  Other Liabilities. Complete if the organization a	answered 'Ves' on F	orm 990 Part IV line 1	1e or 11f
See Form 990, Part X, line 25.			TE OF III.
(a) Description of liability     (1) Federal income taxes	(b)	Book value	
Refundable Government Loan Funds		0 2,430,076	
Present Value of Beneficiary Payments		12,121,049	
Deposits Held for Others Accrued Pension Obligation		1,189,735 11,781,465	
Asset Retirement Obligation		11,592,534	
Accrued Post Retirement Benefit Obligation		24,138,768	
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>▶</b>	63,253,627	
2. Liability for uncertain tax positions. In Part XIII, provide the text o organization's liability for uncertain tax positions under FIN 48 (ASC.)			

Schedule D (Form 990) 2017

Part XI

5

1

2

3

4

c 5

Part XIII

а b

Part XII

Page 4

52,189,676 200,758,251

79,092,211

279,850,462

188,827,140

-5,881,394

194,708,534

79,023,462

273,731,996

Schedule D (Form 990) 2017

3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$
а	Investment expenses not included on Form 990, Part VIII, line 7b

Add lines 2a through 2d .

Add lines 4a and 4b . .

Return Reference

See Additional Data Table

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

**Supplemental Information** 

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

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

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

2	Amounts included on line 1 but not on Form 990, Part VIII, line 12
а	Net unrealized gains (losses) on investments
b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )
е	Add lines <b>2a</b> through <b>2d</b>
3	Subtract line <b>2e</b> from line <b>1</b>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

2a

2h 2c 2d

4b

2a

2b 2c

2d

4a 4b

Explanation

51,461,086

728.590

8.431.076

70,661,135

-5,881,394

8,431,076

70,592,386

2e

4c

2e

3

4c

Page <b>5</b>		Schedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

## **Additional Data**

Software ID: 17005980
Software Version: v1.00

**EIN:** 14-1338587

Name: Vassar College

## Supplemental Information

Return Reference	Explanation

Schedule D, Part II, Line 9

The College's conservation easement has no attributed value and is not recorded in the financial statements

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 4	The College's Frances Lehman Loeb Art Center maintains collections of paintings, sculpture s, prints, photographs and ceramics for use by faculty and students as a complement to the curriculum in a variety of instructional disciplines

Sι

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4	The College's Endowment Funds are maintained according to donor restrictions and earnings are used to support scholarships and a variety of programs including instruction, research , and academic support

S

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	The College generally does not provide for income taxes since it is a tax-exempt organizat ion under section 501(c)(3) of the Internal Revenue Code US GAAP permits an organizatio in to recognize the benefit and requires accrual of an uncertain tax position only when the position is "more likely than not" to be sustained in the event of examination by tax aut horities. Tax positions deemed to meet the "more likely than not" threshold are recorded a significant to a significant to be sustained as a tax expense in the current year. The College has analyzed all open tax years and belie

ves it has no significant uncertain tax positions

oplemental Information	
Return Reference	Explanation
nedule D, Part XI, Line 2d	Cost of Goods Sold 728,590

Sup

Supplemental Information Return Reference Explanation Scholarships 70,592,386 and Grants and Other Assistance to US Organizations 68,749, Total 70,661,135 Schedule D, Part XI, Line 4b

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2d	Cost of Goods Sold - Computer Store and College Store 728,590, Adjustment to Minimum Pensi on Liability (3,298,721), Post Retirement Benefit Changes Other Than Net Periodic Costs (3 ,311,263) Total \$(5,881,394)

oplemental Information	
Return Reference	Explanation
nedule D, Part XII, Line 4b	Scholarships 70,592,386

Sup

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135081419 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the organization **Employer identification number** Vassar College 14-1338587 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2017)

201100010 2 (1 01111 333 01 33322) (2017)	rage <u>z</u>						
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)							
Return Reference	Explanation						
Schedule E, Part I, Line 3	Vassar College publicizes its non-discriminatory policy via brochures mailed to all Vassar College potential students as well as on the College's website						
Schedule E, Part I, Line 6	Vassar College participates in the U.S. Department of Education Title IV Aid Programs and regularly receives awards for research from several federal agencies. The College also receives funding from New York State's Bundy Program.						

Page 2

Schedule E (Form 990 or 990EZ) (2017)

Program

Schedule E (Form 990 or 990-EZ) (2017)

етн	e GRAPHIC prin	t - DO NOT F	PROCESS	As Filed Data	ata - DLN: 93493135081				
	IEDULE F m 990)	State	ement of	Activities (	Outside the Uni	ted S	tates	OMB No 1545-0047	
			lete if the organ	nization answered " ► Attach t	5, or 16.	2017			
Department of the Treasury Internal Revenue Service			tion about Sche		and its instructions is at wu	/w.irs.gov	/form990.	Open to Public Inspection	
	of the organization	1					Employer ider	tification number	
vassa	r College						14-1338587		
Pa		<b>Information</b> , Part IV, line		s Outside the l	<b>Jnited States.</b> Comple	te if the	organization a	nswered "Yes" to	
1	For grantmaker	s. Does the or	ganızatıon ma	aintain records to	substantiate the amount	of its gr	ants and		
	•	-	•	the grants or assi	stance, and the selection	criteria	used		
	to award the gran	nts or assistant	ce <sup>?</sup>					🗹 Yes 🗌 No	
2	For grantmaker outside the Unite		Part V the org	ganızatıon's proce	dures for monitoring the	use of it	s grants and ot	her assistance	
3	Activites per Regio	n (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	needed	)		
	(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region	
(1)	See Add'l Data								
(2)									
(3)									
(4)									
( 5)									
b	Sub-total Total from continua Part I <b>Totals</b> (add lines 3			6 6				212,743,109	

(1)				
( 2)				
(3)				

(4)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . . . . . .

Schedule F (Form 990) 2017

(14) (15) (16) (17) (18)

Schedule F (Form 990) 2017

Part III can be	duplicated if addition	nal space is r	needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Scholarships	Europe (including Iceland and Greenland)	32	686,463	Check or Wire			Fair Market Value
(2) Scholarships	Russia and the newly independent States	4	48,337	Check or Wire			Fair Market Value
(3)							
(4)							

( = / ScholalSimps	independent States	10,557	CHECK OF WITE		ran riarket varae
( 3)					
(4)					
(5)					
( 6)					

(4)				
(5)				
(6)				
(7)				
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(9)				

( 5)				
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( 10)				
(11)				
( 12)				
( 13)				

Sche	dule F (Form 990) 2017		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>✓</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	<b>✓</b> Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	<b>☑</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	<b>✓</b> Yes	□No

Schedule F (Fo	chedule F (Form 990) 2017 Page <b>5</b>								
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).									
Return Ref	ference	Explanation							
Schedule F, Part I, Line 2		Students who are awarded scholarships have funds credited to their account and use is restricted to purposes related to enrollment in a program of study							

Return Reference	Explanation
Schedule F, Part I, Line 3	Expenses are accounted for using the accrual method of accounting and investments are accounted for using the fair market value

## **Additional Data**

Europe (including Iceland and

Greenland)

**Software ID:** 17005980 **Software Version:** v1.00

**EIN:** 14-1338587

Name: Vassar College

Academic Instruction

792,754

Form (	aan sch	sedule F	Dart T .	<ul> <li>Activities</li> </ul>	Outside	The	Inited 9	States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Investments	Investments	210,979,584

5 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and 0 |Grantmaking Scholarships 686,463 Greenland) Russia and the newly Academic Instruction 235.971 1 Program Services independent States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Russia and the newly 0 |Grantmaking Scholarships 48.337 independent States

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN: 93493135081419
Schedule I (Form 990)  Department of the Treasury Internal Revenue Service	OMB No 1545-0047  2017  Open to Public Inspection						
Name of the organization Vassar College						Employer 14-13385	identification number 587
Part I General Inform							
Does the organization mail the selection criteria used			- ·	J ,	_	ce, and	☑ Yes ☐ No
2 Describe in Part IV the org	· ·						
		nestic Organizations and can be duplicated if addi		nts. Complete if the o	rganızatıon answered "Yes	" on Form 990, Part	t IV, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	( <b>d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assist	
(1) Grace Smith House 1 Brookside Avenue Poughkeepsie, NY 12601	14-1626657	501(C)(3)	8,679				domestic violence shelter
2 Enter total number of sect	on 501(c)(3) and go	overnment organizations	listed in the line 1 table .			•	1
3 Enter total number of othe	r organizations liste	d in the line 1 table				<u> </u>	0
For Paperwork Reduction Act Notice	e, see the Instructio	ns for Form 990.		Cat No 50055	5P		Schedule I (Form 990) 2017

Page **2** 

Schedule I (Form 990) 2017

enrollment in a program of study 12 46,738 Scholarships related to enrollment in nursery school and other aid

Recipients of fellowships are required to submit periodic written reports of their activities to the College

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

Schedule I (Form 990) 2017

Part III can be duplicated if additional space is needed

Part III

(3)

(4)

(5) (6)

(7)

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

Part IV Return Reference

Explanation

Schedule I, Part I, Line 2 Vassar College raises funds for, and makes contributions to, a wide variety of 501(C)(3) organizations in the greater Poughkeepsie area. These organizations are selected annually by a committee of employees and students after review of their activities and mission. Employees and students also volunteer time at each

organization Funds are collected annually from the gifts of employees, students, trustees, and friends of Vassar as part of the "Community Works" campaign Vassar also makes small contributions to other local non-profit and governmental entities who are not part of the campaign

Schedule I, Part III Students who are awarded scholarships have funds credited to their account and the use is restricted to purposes related to enrollment in a program of study

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	9313	5081	419
Sch	edule J	Col	mpensat	tion Information	ОМ	B No	1545-0	)047
(For	n 990)	For certain Officer	s, Directors, T	Trustees, Key Employees, and Hig	hest			
		Complete if the orga		ated Employees wered "Yes" on Form 990, Part IV	line 23	20	17	7
			▶ Attach	h to Form 990.				
•	tment of the Treasurval Revenue Service	► Information abo		J (Form 990) and its instructions <u>agov/form990</u> .	ıs at		to Pul ectio	
Nar	ne of the organiza	ation			Employer identificat			
Vass	sar College				14-1338587			
Pa	rt I Questi	ons Regarding Compensati	on					
							Yes	No
1a				of the following to or for a person liste ny relevant information regarding the				
		or charter travel	$\overline{\mathbf{Z}}$	Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up payments	<b>∀</b>	Health or social club dues or initiati				
	☐ Discretion	ary spending account	¥	Personal services (e g , maid, chau	rreur, cher)			
b		kes in line 1a are checked, did the Il of the expenses described abov		follow a written policy regarding payn nplete Part III to explain	nent or reimbursement	<b>1</b> b	Yes	
2				or allowing expenses incurred by all	4.3	2	Yes	
	directors, truste	es, officers, including the CEO/EX	ecutive Directo	or, regarding the items checked in line	e la/			
3				ed to establish the compensation of t	he			
				not check any boxes for methods CEO/Executive Director, but explain	ın Part III			
	_							
	· ·	ation committee	✓	Written employment contract Compensation survey or study				
		ent compensation consultant of other organizations	<b>7</b>	Approval by the board or compensa	ation committee			
		-	_					
4	During the year, related organiza		90, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a			
а	_	ance payment or change-of-contro	nl navment?			4a		No
a b		receive payment from, a suppler		ulified retirement plan?		4b		No
c	•	receive payment from, an equity	•	· ·		4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and	provide the app	plicable amounts for each item in Par	t III			
_		), 501(c)(4), and 501(c)(29) o	_	the organization pay or accrue any				
5		ontingent on the revenues of		the organization pay or accrue any				
а	The organization	۶۱۶				5a		No
b	Any related orga	anization?				5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any				
а	The organization	۶۱۶				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		d on Form 990, Part VII, Section escribed in lines 5 and 67 If "Yes,"		the organization provide any nonfixe art III	d	7		No
8				ured pursuant to a contract that was s section 53 4958-4(a)(3)? If "Yes," d	escribe	_		
9		3, did the organization also follow	the rebuttable	e presumption procedure described in	Regulations section			No_
For D		ction Act Notice, see the Instr	uctions for E	orm 990 Cat No.	50053T Schedule J		. 000)	2017

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (C) Retirement (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC (E) Total of (F) and other benefits columns compensation Compensation in

	deferred		Bellettes	(B)(ı)-(D)	column (P)		
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(I)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
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	'				1	· ·	1

		1	Schedule J (Fo	orm 990) 2017

Schedule J (Form 990) 2017 Page **3** Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Schedule J. Part I. Line 1a On campus housing is provided for the President, Dean of Faculty, and the Dean of the College as a condition of employment and for the convenience of the College In addition, housekeeping service is also provided for the President. The estimated value of this housing and housekeeping service is included in Part II, column D. Annual dues for clubs are paid by the College and provided to the President for the benefit of the College. Dues paid according to contract are treated as Imputed income and are included in Part II. column B III Schedule J. Part I. Line 3 Vassar participates in a third party data collection process with 25 peer colleges. We submit data annually to a professional compensation analyst, who summarizes Ithe data as a range with quartiles. The report is provided to the Personnel and Compensation Committee of the Board of Trustees, who will use this information to

determine raises for all Senior Officers and reports their findings through the President and the Vice President for Finance and Administration. Committee records are maintained by the Secretary of the Board of Trustees for the permanent files of the Board. We believe that our policy meets the requirements of the rebuttable

Schedule J (Form 990) 2017

presumption

**Software ID:** 17005980

**Software Version:** v1.00

EIN: 14-1338587
Name: Vassar College

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

	ŧ J,	Part II - Officers, D			nignest Compensate		Т	Г
(A) Name and Title		(B) Breakdown (i) Base Compensation	of W-2 and/or 1099-MIS	C compensation (iii)	(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B)
			Bonus & incentive compensation	Other reportable compensation	compensation			reported as deferred on prior Form 990
1 Elizabeth Howe Bradley -	(1)	230,584	0	129	28,200	92,582	351,495	0
July 1 President and Trustee	(11)	0	0	0	0	0	0	0
1Catherine Baer VP for Alumnae Affairs and	(1)	297,776	0	1,188	36,590	23,934	359,488	0
Dev	(11)	0	0	0	0	0	0	0
<b>2</b> Marianne Begemann Dean of Str Plan and Acad	(1)	207,793	0	1,588	25,088	43,315	277,784	0
3Michael Cato	(11)	0	0	0	0	0	0	0
<b>3</b> Michael Cato VP for Comp and Info Svcs	(1)	191,264	0	180	24,846	42,700	258,990	o
	(11)	0	0	0	0	0	0	0
Jonathan Chenette -	(1)	342,422 	0	33,732	36,000	74,300	486,454	0
Through June 30 Interim Pres and Trustee	(11)	0	0	0	0	0	0	0
<b>5</b> Angelique Crump Controller	(1)	147,034	0	7,122	17,175	12,641	183,972	0
	(11)	0	0	0	0	0	0	0
<b>6</b> Stephen Dahnert VP for Fin and Admin	(1)	287,074 	0	774	35,734	73,302	396,884	0
	(11)	0	0	0	0	0	0	0
<b>7</b> Susan Dekrey - Through	(1)	154,731	0	56,260	19,037	23,559	253,587	0
October 10 VP for Communications	(11)	0	0	0	0	0	0	0
<b>8</b> Wesley Dixon - October 23 Secretary of the Board	(1)	13,751	0	0	0	992	14,743	0
	(11)	0	0	0	0	0	0	0
<b>9</b> Stephen R Rock - Through	(1)	171,683	0	2,294	22,378	35,350	231,705	0
June 30 Acting Dean of the Faculty	(11)	0	0	0	0	0	0	0
<b>10</b> Christopher Roellke Dean of the College	(1)	190,438	0	414	25,467	127,465	343,784	0
_	(11)	0	0	0	0	0	0	0
11 Christopher Smart -	(1)	126,851	0	1,513	15,547	13,052	156,963	0
Through June 30 Secretary of the Board	(11)	0	0	0	0	0	0	0
<b>12</b> Robert DeMaria Professor of English	(1)	187,392	0	5,303	23,945	28,936	245,576	0
	(11)	0	0	0	0	0	0	0
13Susan Donahue Kuretsky Professor of Art	(1)	186,802	0	3,939	23,097	15,962	229,800	0
	(11)	0	0	0	0	0	0	0
<b>14</b> James H Merrell Professor of History	(1)	202,994	0	1,188	25,776	34,117	264,075	0
·	(11)	0	0	0	0	0	0	0
<b>15</b> Art D Rodriguez Dean of Admission and	(1)	201,169	0	180	25,398	32,794	259,541	0
Financial Aid	(11)	0	0	0	0	0	0	0
<b>16</b> Paul A Ruud Professor of Economics	(;)	206,093	0	6,363	25,145	13,933	251,534	0
	(11)	0	0	0	0	0	0	0

ef	ile GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	34931	3508	1419
Sc	hedule K	C		lufoumotion o	. T., F	'aa.	4 F	Danda				OMB	No 1545	5-0047	<u> </u>
(F	orm 990)			Information o								1	<b>0</b>	7	
		Complete ii th		wered "Yes" to Form , and any additional i				Provide des	criptions,				<b>NI</b>	/	
	artment of the Treasury	<b>▶</b> Informatio	n about Schadula I	► Attach to Form 990 K (Form 990) and its		e ie at u		ire gov/for	000				en to Pu		
	rnal Revenue Service e of the organization	Pillorillatio	ii about Schedule	k (101111 990) and its	ilisti uctioni	3 13 at <u>n</u>	<u> </u>	II S. GOV/ TOLL	<u>11990</u> .	Emplo	yer ident		nspecii n number		
Vas	sar College									14-13	38587				
Р	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Description of purpose			(g) Defeased		sed (h) On		(i) Pool	
											behalf of issuer		financing		
										Yes	No	Yes	No	Yes	No
A	Dormitory Authority of the State	14-6000293	649905YS9	04-29-2010	50,5	93,000	Capita	tal Improvem	ents		Х		X		X
	of NY 2010														
В	Dutchess County Local	27-3106797	267045DC3	06-06-2013	87,9	68,505	Capita	tal Improvem	ents		X		X		X
	Development Corporation				,	·	'								
	Dutchess County Local	27-3106797	267045JY9	04-25-2017	112 1	20 227	Refun	nd Issue Date	d 4/18/2007	,	X		X		X
•	Development Corporation 2017	27 3100737	207043313	04 23 2017	112,1	20,227	Clair	na 133ac Dati	.u +/ 10/ 2007				^		^
	Proceeds							В	,					D	
1	Amount of bonds retired			l		A	0		0		_	0		<u> </u>	
<u>-</u>	Amount of bonds legally defease														
<u>-</u>	Total proceeds of issue				51,488,350		350	0 88,047,452			112,120,	277			
4	Gross proceeds in reserve funds					31,400	0 0			0					
<u>.</u> 5	Capitalized interest from proceed					3 021	3,021,832 2,180,072								
	Proceeds in refunding escrows .					3,021	0 2,186,672								
<del>-</del>	Issuance costs from proceeds .					485	85,944 663,134				568				
<u>.</u> 8	Credit enhancement from proces						0 0			1,032,330					
9	Working capital expenditures fro					0 1,967			0						
10	Capital expenditures from proceed					47,489,073 84,964,879									
11	Other spent proceeds				491,501 239,914			111,087,70							
12	Other unspent proceeds						0		0		0				
13	Year of substantial completion .				20	012		20:	16	20					
					Yes	No	,	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as part o	f a current refunding	g issue?			Х			Х	Х					
15	Were the bonds issued as part o	f an advance refund	ing issue?			Х			Х		Х				
16	Has the final allocation of procee	eds been made?.			X			Х		X					
17															
	proceeds?				Х			Х		Х					
Pa	rt IIII Private Business Us	e													
						Α		. B						D	<u>.                                    </u>
1	Was the organization a partner i	n a partnership or a	member of an IIC	which owned property	Yes	No		Yes	No	Yes	No		Yes	-	No
_	financed by tax-exempt bonds?	<u></u>	<u>.</u>			Х			Х		Х				
2	Are there any lease arrangemen			e of bond-financed		Х			Х		Х				
For	property?					l t No. 50	1193E	<u> </u>				chodule	e K (For	m 990	1) 2017

9

а

C

Part IV

Arbitrage

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)

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

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

organization, or a state or local government . . . . . . . . . . . . . . . .

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

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

0 %

02%

Yes

Schedule K (Form 990) 2017

No

Χ

Х

	,	Α		В		C		I	)
		Yes	No	Yes	No	Yes	No	Yes	No
3а	Are there any management or service contracts that may result in private business use of bond-financed property?	Х		×		×			
ь	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?	X		×		×			
С	Are there any research agreements that may result in private business use of bond-financed property?	Х		X		X			
d	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?	Х		X		Х			
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		01%		0 %		02%		

0 %

01%

В

Yes

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Х

Х

Х

No

Χ

Χ

Χ

Χ

Х

Α

Yes

Χ

0 %

0 %

Χ

No

Χ

Х

Χ

Χ

Χ

C

Χ

Х

Yes

Χ

Page 3

No

D

No

Yes

Schedule K (Form 990) 2017

period?

Part V

Part VI

Return Reference

Schedule K. Part II. Line 3-04/29/2010 50,593,000

Dormitory Authority of the State of NY 2010

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

		-	-
		Yes	No
а	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Χ

Χ

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

The total proceeds exceed the issue price due to investment earnings on the project fund

Explanation

Yes

Α

No

Yes

Χ

No

Х

Χ

Yes

Yes

Χ

No

R

No

C

No

Yes

Х

Yes

Return Reference	Explanation
Schedule K, Part II, Line 3-06/06/2013 87,968,505 Dutchess County Local Development Corporation	The total proceeds exceed the issue price due to investment earnings on the project fund

Return Reference	Explanation
chedule K, Part II, Line 11- 4/29/2010 50,593,000 cormitory Authority of the tate of NY 2010	The other spent proceeds are the proceeds used to pay the New York State Issuer fee

04 Do

Return Reference	Explanation
Schedule K, Part II, Line 11- 06/06/2013 87,968,505 Dutchess County Local Development Corporation	The other spent are the proceeds used to pay the New York State Issuer fee

Return Reference	Explanation
Schedule K, Part II, Line 11- 04/25/2017 112,120,227 Dutchess County Local Development Corporation 20	The other spent proceeds are the refunding proceeds that are no longer in escrow

Return Reference	Explanation
chedule K, Part IV, Line 2c- 4/29/2010 50,593,000 cormitory Authority of the tate of NY 2010	An arbitrage calculation was completed on 04/29/2015

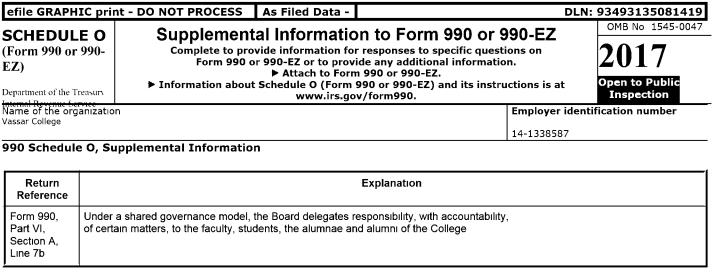
04 De

Return Reference	Explanation
chedule K, Part IV, Line 2c- 6/06/2013 87,968,505 utchess County Local evelopment Corporation	An arbitrage calculation was completed on 06/06/2018

06 Du De

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN: 9	349313	5081	419
SCH	EDULE M			loncash Contri	hutions	(	OMB No 1	.545-0	047
(For	m 990)		l'	Noncasii Contri	Dutions		20	1 7	,
		▶Complete if the	e organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.						,
		► Attach to Form	990.						
Depart	tment of the Treasury	▶Information abo	ut Schedu	ıle M (Form 990) and its i	nstructions is at <u>www.irs</u>	.gov/form990	Open to	) Pub	lic
	al Revenue Service						Inspe		
	e of the organızat r College	ion			1	Employer identif	ication n	umbei	•
• 4554						14-1338587			
Pa	rt I 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	Method o noncash cont	(d) of determin tribution a		:s
					1g				
1	Art—Works of art	t	X	28	1,683,850	Independent Appı	raisals		
	Art—Historical tr								
	Art—Fractional in				102 700				
	Books and public Clothing and hou		X		•	Independent Appi Independent Appi			
3	. =		X		3,300	Independent Appi	aisai		
6	Cars and other v	ehicles							
7	Boats and planes	·							
	Intellectual prope	•							
	Securities—Public	•	X	199	8,585,736	Fair Market Value			
	Securities—Close Securities—Partr	nership, LLC,							
	or trust interest Securities—Misce								
13	Qualified conserv								
	contribution—Hi structures	istoric							
14	Qualified conserve								
15	Real estate—Res	idential .							
16	Real estate—Cor	mmercial							
17	Real estate—Oth								
18	Collectibles								
19	Food inventory								
20 21	Drugs and medical Taxidermy	ai supplies .							
	Historical artifact	• • • • • •s							
	Scientific specim								
	Archeological art								
25	Other ▶ (	)							
	Other ▶ (								
	Other ► (	•							
	Other ▶ (								
29		,	_	ation during the tax year for 3, Part IV, Donee Acknowled		29			13
~~	Danier - H	d.d sh *			and the second s			Yes	No
зvа	must hold for at	least three years fr	om the date	y contribution any property in a contribution, a contribution, a	and which is not required to	be used for exemp			l <sub>No</sub>
b	If "Yes," describ	e the arrangement i	n Part II				30a		No
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the review	v of any nonstandard contrib	outions?	31	Yes	
32a				or related organizations to s		sh	32a	Yes	
b	If "Yes," describ	e in Part II							
33	If the organizati	on did not report an	amount in	column (c) for a type of pro	perty for which column (a) is	s checked,			
	describe in Part	II			` '				
For D	anerwork Peductio	on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271	Schedul	le M (Form	000)	(2017)

Schedule M (Form 990) (2017)	Page <b>2</b>
I, column (b), t	<b>Information.</b> ormation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part the number of contributions, the number of items received, or a combination of both. Also complete y additional information.
Return Reference	Explanation
Schedule M, Part I, Line 32b	Gifts of securities are received by registered brokers and sold on behalf of Vassar College Proceeds from sales are deposited into the College bank accounts
	Schedule M (Form 990) (2017)



Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section B,
Line 11b

The Board of Trustees delegates the responsibility for oversight of the preparation of for m 990 to the Audit Committee which reviews the entire form 990 as a draft prior to the com pletion of the review by the College's certified public accountant. The final version, exc

Line 11b

The Board of Trustees delegates the responsibility for oversight of the preparation of for m 990 to the Audit Committee which reviews the entire form 990 as a draft prior to the com
pletion of the review by the College's certified public accountant. The final version, exc.

Return Explanation

Form 990,
Part VI,
Section B,
Line 12c

In the Audit Committee, the College responds to any disclosures with appropriate action including requiring persons to recuse themselves from involvement with any decisions for w

hich the relationship would represent an actual or potential conflict of interest

990 Schedule O, Supplemental Information

Return Reference
Form 990, Vassar participates in a third party data collection process with 25 peer colleges. We sub

990 Schedule O, Supplemental Information

Part VI,	mit data annually to a professional compensation analyst, who summarizes the data as a ran
Section B,	ge with quartiles The report is provided to the Personnel and Compensation Committee of t
Line 15	he Board of Trustees, who will use this information to determine raises for all Senior Off
	icers and reports their findings through the President and the Vice President for Finance
	and Administration. Committee records are maintained by the Secretary of the Board of Trus
	tees for the permanent files of the Board We believe that our policy meets the requiremen
	ts of the rebuttable presumption

Explanation Return Reference

Form 990. Vassar publishes its governance in print and online, the conflict of interest is published Part VI. online, and annual audited financial statements are available online and in print form by

Section C. request

990 Schedule O, Supplemental Information

Line 19

Return Explanation

Form 990, Post Retirement Benefits Changes Other Than Net Periodic Benefits Cost 3,311,263, Adjustme nt for Minimum Pension Liability 3,298,721, Grants and Other Assistance to Us Organization

990 Schedule O, Supplemental Information

s (68,749). Total Other Changes In Net Assets 6,541,235

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

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Vassar College

## **Related Organizations and Unrelated Partnerships**

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

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

2017

DLN: 93493135081419

Open to Public Inspection

Schedule R (Form 990) 2017

**Employer identification number** 

14-1338587

	1 (1)	1 ()	1 (1)						
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country	ate Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity				
1) College Properties LLC .24 Raymond Avenue lox 655 Youghkeepsie, NY 12604 .4-1817534	Realty Investment	NY	-128,841	3,852,884	VASSAR COLLEGE		_		
							_		
							-		
Part II Identification of Related Tax-Exempt Organization	ns Complete if the ora	anization answered	"Yes" on Form 990	Part IV line 34 h	ecause it had one or	more	_		
related tax-exempt organizations during the tax year.	complete il tile orge	amzation answered	103 011 101111 330	, , , , , , , , , , , , , , , , , , , ,	records it flad offe of				
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co ent	<b>g)</b> 512(b ntrolled aty?		
						Yes	No		

Cat No 50135Y

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

——————————————————————————————————————			<del></del>											
(a) Name, address, and EIN of related organization		(b) Primary activity  (c) Legal domicile (state or foreign country)		Legal Direct control c		(e) Predominant income(relate unrelated, excluded fror tax under sections 512	ed, total income		are of Dispropi of-year allocat		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partr	ral or Paging o	<b>(k)</b> Percentage ownership
			!	<u> </u>		,			Yes	No		Yes	No	ļ
			+										一	
		+	-			<del> </del>							+	
												<u> </u>	$\vdash$	
		<u> </u>												
Part IV Identification of Related Organ because it had one or more relate	iizations Taxable as a Cod organizations treated as	orporation a corporation	or Trus	st Comp st durir	olete ng th	if the organe te tax year.	nization ansi	wered "Yes	" on Fo	orm 99	90, Part IV,	line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L do (state	(c) Legal omicile e or foreign ountry)		Direct	(d) t controlling T	(e) Type of entity C corp, S corp, or trust)	(f) Share of total Income		(g) e of end- year assets	-of- Percer owner	ntage	(13)	(i) ction 512(b) controlled entity?
(1)POOLED INCOME FUNDS (3)	INVESTMENT SUPPORT		NY	$\overline{}$	N/A	T			+		100 %	,	Yes	
124 RAYMOND AVENUE POUGHKEEPSIE, NY 12604														
(2)CHARITABLE REMAINDER UNITRUSTS (12)	INVESTMENT SUPPORT		NY		N/A	Т					100 %	,	Yes	:S
124 RAYMOND AVENUE POUGHKEEPSIE, NY 12604														
(3)CHARITABLE REMAINDER ANNUITY TRUST (2)	INVESTMENT SUPPORT		NY		N/A	Т					100 %	,	Yes	ıs
124 RAYMOND AVENUE POUGHKEEPSIE, NY 12604														
		+	$\overline{}$	$\rightarrow$	$\overline{}$						$\overline{}$	-	$\overline{}$	

Schedule R (Form 990) 2017		Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
	1 <sub>f</sub>		No
f Dividends from related organization(s)			
g Sale of assets to related organization(s)	1g 1h		No
h Purchase of assets from related organization(s)			No
i Exchange of assets with related organization(s)	<b>1</b> i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	$\neg$	No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s. Other transfer of cash or property from related organization(s)	1s	Yes	

<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) $\dots \dots \dots \dots \dots$				1k No				
l Performance of services or membership or fundraising solicitations for related organization(s) $\ldots$				1l No				
f m Performance of services or membership or fundraising solicitations by related organization(s)				1m No				
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n No				
o Sharing of paid employees with related organization(s)				1o No				
p Reimbursement paid to related organization(s) for expenses				1p No				
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q No				
${f r}$ Other transfer of cash or property to related organization(s)				1r No				
${f s}$ Other transfer of cash or property from related organization(s)				1s Yes				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds								
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amo	ount involved				

(b) Transaction type (a-s) Name of related organization (1)CHARITABLE REMAINDER UNITRUSTS (12) 455,664 Fair Market Value (2)POOLED INCOME FUNDS (3) 663,572 Fair Market Value Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No											
													_										
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017										

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017