DLN: 93493139015520 OMB No. 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ► Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization HILLSDALE COLLEGE D Employer identification number B Check if applicable ☐ Address change 38-1374230 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 33 E COLLEGE STREET ☐ Amended return ☐ Application pending (517) 437-7341 City or town, state or province, country, and ZIP or foreign postal code HILLSDALE, MI $\,$ 49242 $\,$ G Gross receipts \$ 211,487,883 Name and address of principal officer H(a) Is this a group return for LARRY P ARNN □Yes **☑**No subordinates? 33 E COLLEGE STREET H(b) Are all subordinates HILLSDALE, MI 49242 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) □ 527 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW HILLSDALE EDU L Year of formation 1844 M State of legal domicile MI K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities HILLSDALE COLLEGE IS A PRIVATE LIBERAL ARTS COLLEGE WITH APPROXIMATELY 1,500 STUDENTS FOUNDED IN 1844, THE COLLEGE REMAINS, IN THE WORDS OF ITS ARTICLES OF ASSOCIATION, "GRATEFUL TO GOD FOR THE INESTIMABLE BLESSINGS RESULTING FROM THE PREVALENCE OF CIVIL AND RELIGIOUS LIBERTY AND INTELLIGENT PIETY" IN OUR NATION, AND DEDICATED TO "THE DIFFUSION OF SOUND LEARNING" THAT IS "ESSENTIAL TO THE PERPETUITY OF THESE BLESSINGS" Activities & Governance SOUND LEARNING" THAT IS "ESSENTIAL TO THE PERPETUITY OF THESE BLESSINGS Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 31 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 2,022 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 774 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 1,725,571 b Net unrelated business taxable income from Form 990-T, line 34 7b 330,711 **Prior Year Current Year** 128,396,316 8 Contributions and grants (Part VIII, line 1h) . 147,294,211 Ravenue 54,990,529 Program service revenue (Part VIII, line 2g) . 54,337,372 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 15,069,662 23,739,786 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,655,182 3,516,790 219,356,427 210,643,421 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 27.459.088 27,137,417 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 51,344,684 56,109,344 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶34,917,941 73,195,987 82,981,990 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 151,999,759 166,228,751 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) **19** Revenue less expenses Subtract line 18 from line 12 . 67,356,668 44,414,670 Assets or d Balances Beginning of Current Year End of Year 1,163,398,369 20 Total assets (Part X, line 16) . 1,119,189,218 21 Total liabilities (Part X, line 26) . 107,933,056 106,730,965 Net assets or fund balances Subtract line 21 from line 20 . 1,011,256,162 1,056,667,404 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-14 Signature of officer Date Sign Here PATRICK FLANNERY TREASURER Type or print name and title Print/Type preparer's name Date 2020-05-14 Preparer's signature Check \square if P00100422 **Paid** self-employed ► PLANTE & MORAN PLLC Firm's EIN ► 38-1357951 Firm's name Preparer **Use Only** Firm's address ► 750 TRADE CENTRE WAY STE 300 Phone no (269) 567-4500 PORTAGE, MI 49002 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2	018)					Pa	age 2
Pa	rt III	Statement	of Program Serv	ice Accomplis	hments			
		Check If Sched	dule O contains a res	ponse or note to a	any line in this Part III .			✓
1	Briefly	describe the o	rganızatıon's mıssıon					
SEE	SCHEDU	JLE O						
2	Did th	e organization i	undertake any signifi	cant program seri	vices during the year wh	arch were not listed on		
2		-	r 990-EZ?		vices during the year wi	iich were not listed on	. □Yes ☑No	
							. Lifes Lino	
_		•	se new services on S					
3		_	3.	3	changes in how it condu	icts, any program	П., П.,	
							. □Yes ☑N	lo
	If "Yes	s," describe the	se changes on Sched	ule O				
4	Sectio	n 501(c)(3) and		tions are required	to report the amount o	largest program services, as f grants and allocations to ot		
4a	(Code) (Expenses \$	52,847,398	ıncludıng grants of \$	0) (Revenue \$	42,334,750)	
	See Ad	ldıtıonal Data						
4b	(Code) (Expenses \$	27,112,417	ıncludıng grants of \$	27,112,417) (Revenue \$	0)	
	See Ad	ldıtıonal Data						
4c	(Code) (Expenses \$	12,207,058	ıncludıng grants of \$	0) (Revenue \$	395,895)	
	See Ad	ldıtıonal Data						
	(Code) (Expenses \$	17,044,169	ıncludıng grants of \$	25,000) (Revenue \$	14,010,342)	
			OGRAM SERVICE EXPENS CAMPUS GROUNDS AND		RE NOT LIMITED TO, AUXIL	IARY SERVICES (BOOKSTORE, RI	ESIDENTIAL, DINING) AND PLAN	N
4d	Other	program servic	es (Describe in Sche	dule O)				
	(Evno	nses \$	17,044,169 in	cluding grants of	\$ 25,0	00) (Revenue \$	14,010,342)	
	(Lxpe		<u> </u>		· · · · · · · · · · · · · · · · · · ·		<u> </u>	

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III "	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII 🕏	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
f	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 2	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	, сэ	No
	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	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

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Par	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
3	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28 c	Yes	
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
L	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
5	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
В	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	Nο

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

3,320

1c

Yes

7g

7h

8

9a

9h

12a

13a

14a

14b

15

10a

10b

11a

11b

12b

13b

13c

Nο

Nο

No

Nο

Nο

No

No

Form **990** (2018)

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to	lines
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 34			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b 31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶PATRICK FLANNERY 33 E COLLEGE STREET HILLSDALE, MI 49242 (517) 437-7341			

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	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	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

114 W 3RD ST WAYNESBORO, PA 17268

compensation from the organization ▶ 88

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Part VII Section	n A. Officers, Direct	tors, Trustees	s, Key	Emp!	loye	es,	and	High	nest Co	mpensate	d Employees	(con	tinued)	
(A Name ai		(B) Average hours per week (list any hours for related	than o	one bo	ox, u an off tor/tr	t che unles ficer ruste	· ·	rson a	Repo comp fro organiz	(D) portable pensation om the zation (W- 99-MISC)	(E) Reportable compensatio from related organizations 2/1099-MISO	n d (W-	Estima amount o compen from organizat	ated of other sation the
		organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	-,	79° mae e y	2/200	-,	relat organiza	ed
See Additional Data Table	e				H			\parallel						
				-			_	+				_		
				厂				#						
				-	\sqcup		_	\sqcup				-		
				-	H	\vdash		+						
c Total from conti	 inuation sheets to Pa 1b and 1c)	art VII , Section					>	<u>—</u>		,172,666		0		509,093
2 Total number of	f individuals (including impensation from the composition from the compo	g but not limited	to thos					o rece			00,000	<u> </u>		303,
3 Did the organiza	ation list any former o	officer director	or trust		·~· e		~~	ar hi	sheet co	mansated	amployee on		Yes	No
line 1a [?] If "Yes,"	," complete Schedule J	J for such individ	dual .	•	•	•		•			• •	3		No
	ual listed on line 1a, is direlated organizations										n the	4	Yes	
	listed on line 1a received to the organization?											5		No
Section B. Inde	pendent Contract	ors		—	—	—		—						
1 Complete this ta	able for your five higher ization Report comper	est compensated										mper	nsation	
		(A) and business addre	ess	<u></u>							(B) ription of services		Comper	nsation
WEIGAND CONSTRUCTION	N INC									CONSTRUCT	TION		12	,238,012
7808 HONEYWELL DR FT WAYNE, IN 46825 ROCKFORD CONSTRUCTION	· ONI									CONSTRUCT	TON		6	,156,966
601 FIRST ST NW GRAND RAPIDS, MI 4950										CONSTRUCT.	ION			,150,500
BON APPETIT 2400 YORKMONT RD	·									FOOD SERV	ICE		6	,001,642
CHARLOTTE, NC 28217 NEXT AFTER LLC										CONSULTIN	G/MARKETING		3	,750,010
5810 TENNYSON PKWY PLANO, TX 75024														770
RHA MARKETING										PRINTING/M	IAILING		2	,492,770

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

		(2018)											Page 9
Part	VIII												
		Check If Schedul	e O contains	a respo	onse or note to any	(his Part VIII A) revenue	Rela ex fui	(B) ated or cempt nction	b	(C) nrelated usiness evenue	excl tax ur	(D) Revenue uded from order sections
	1:	a Federated campaig	ns	1a				re	venue			5	12 - 514
nts nts		b Membership dues		1b									
iou 10u		c Fundraising events		1c									
s, (An		d Related organizatio		1d	1,200,000								
Gift		e Government grants (co		1e	2,200,000								
JS,		f All other contributions,											
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above		1 f	127,196,316								
혈		g Noncash contribution	ons included										
on to		ın lines 1a - 1f \$,000,617								
<u>ۃ ت</u>		h Total. Add lines 1a	-1f	•			28,396,316						
<u> 2</u>					Business	Code	42.2	34,750	42,334	750			
N-S-N		TUITION AND FEES				611310		553,819	11,368		185,0	046	
a <u>₹</u>	_	AUXILIARY				611310		.01,960		,895	706,0		
) M	С	OTHER AUXILIARY				721110		.01,500		,000	, , , , ,	-	
₹.	d	T											
ram	e												
Program Service Revenue	f	All other program se	rvice revenue	2	54.	990,529				I			
		Total. Add lines 2a-2			<u> </u>								
		Investment income (ii similar amounts) .	ncluding divid		nterest, and other		3,752,92	2			621,167		3,131,755
	4	Income from investme	ent of tax-exe	empt bo	ond proceeds	•							
	5	Royalties			•	•	5,13	0					5,130
	6a	Gross rents	(ı) Rea	11	(II) Personal	-							
	_					_							
	Ł	Less rental expenses											
	(Rental income or (loss)											
	c	Net rental income o	r (loss)			1							
			(ı) Securi	ties	(II) Other								
	7 <i>a</i>	Gross amount from sales of	19,9	978,774	108,44	9							
		assets other than inventory											
	Ł	Less cost or				_							
		other basis and sales expenses		0	100,35	_							
		Gain or (loss) Net gain or (loss)		978,774	8,09	<u> </u>	19,986,86	4					19,986,864
		Gross income from fi			<u> </u>		13,300,00						15,500,001
e n		(not including \$ contributions reporte		of									
æ		See Part IV, line 18	:u on line 1c)	a	l								
Other Revenue		Less direct expense		b									
her		Net income or (loss)			ents 🕨	_							
ŏ	90	Gross income from g See Part IV, line 19	aming activit	ies									
				а	126,490	_							
		Less direct expense: Net income or (loss)		b	58,017	<u>'</u>	68,47	3					68,473
		Gross sales of invent		activit	les >	1	00,17	1					
		returns and allowand		_1	1 000 000								
	ŀ	Less cost of goods s	old	a b	1,086,869 686,086	_							
		Net income or (loss)		- 1	<u> </u>		400,78	3			108,058		292,725
		Miscellaneous			Business Code								
	11	La INSTITUTIONAL AD	VANCEM		61143	0	559,50	2	559,502				
							221 ==						22.1
	t	TRUSTEE FEES			90009	٦	221,25	٦					221,250
	,	LEADERSHIP SEMIN	ΔRS		61143	0	84,42	5	84,425				
		- FEVOLUSHIE SEMIN			32213		- 17 12		, .20				
	ď	All other revenue .				+	2,177,22	7	1,997,642		105,235		74,350
	•	Total. Add lines 11a	-11d		•		3,042,40	4					
	12	2 Total revenue. See	Instructions				210,643,42		56,740,987		1,725,571		23,780,547
							,,		, , ,		-,,, -		20,700,517

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

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

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

21 Payments to affiliates

expenses on Schedule O) a COST OF GOODS SOLD

20 Interest . . .

23 Insurance .

b EQUIPMENT

c GIFTS/AWARDS

d MEMBERSHIPS

e All other expenses

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	elete 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
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	325,400	325,400		
2 Grants and other assistance to domestic individuals See Part IV, line 22	26,041,216	26,041,216		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	770,801	770,801		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,992,057	423,689	874,066	694,302
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	41,590,714	29,092,454	6,971,856	5,526,404
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,379,119	2,304,842	645,014	429,263
9 Other employee benefits	6,322,568	4,406,275	1,386,500	529,793
10 Payroll taxes	2,824,886	1,930,419	553,388	341,079
11 Fees for services (non-employees)				
a Management				
b Legal	1,167,655	3,508	660,284	503,863
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	2,029,975		2,029,975	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	18,087,780	2,350,078	1,782,827	13,954,875
12 Advertising and promotion	7,878,925	4,414,934	49,711	3,414,280
13 Office expenses	18,709,460	13,912,323	249,779	4,547,358
14 Information technology	3,875,382	765,925	2,793,825	315,632
15 Royalties	2,325		2,325	
16 Occupancy	3,830,085	3,081,666	743,647	4,772
17 Travel	5,457,183	2,784,498	1,074,704	1,597,981
18 Payments of travel or entertainment expenses for any	10,859	10,859		

6,084,440

6,467,885

3,859,842

529,111

471,718

145,018

3,761,762

166,228,751

612,585

3,210,631

347,812

5,751,540

3,859,842

500,378

441,631

77,121

2,403,200

109,211,042

126,756

264,773

583,000

18,645

22,407

1,266,286

22,099,768

2,747,053

133,345

28,733

11,442

45,490

92,276 34,917,941

Form 990 (2018)

6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$			
7	Other salaries and wages	41,590,714	29,092,454	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,379,119	2,304,842	
_		6 333 560	4 406 275	

Page **11**

676.563

8,263,101

12,832,510

57.986.011

106.730.965

97.815.867

245,006,843

713.844.694

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595.532

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61.133.082

107.933.056

110.060.666

239,497,780

661.697.716

Form 990 (2018)

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Liabilities 22

Fund Balances

Grants payable .

Deferred revenue . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Unrestricted net assets

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.

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

Capital stock or trust principal, or current funds

Total liabilities. Add lines 17 through 25 .

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

					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			141,606	1	49,942
	2	Savings and temporary cash investments .		[54,922,432	2	52,531,608
	3	Pledges and grants receivable, net		. [131,537,252	3	114,980,794
	4	Accounts receivable, net		[4,455,794	4	1,553,272
	5	Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L	ployees Complete		5		
ts	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organization voluntary employees' beneficiary organizations Part II of Schedule L	n 4958(itions of (see ins	c)(3)(B), and section 501(c)(9) tructions) Complete	34,056.133	6	33.507,039
ssets	8	Inventories for sale or use			384.747	8	337,330
Ř	9	Prepaid expenses and deferred charges	· · ·	·	1,931,957	9	2,447,677
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	274,247,144			
	ь	Less accumulated depreciation	10b	94,929,793	161,526,418	10 c	179,317,351
	11	Investments—publicly traded securities .		338,030,229	11	384,442,190	
	12	Investments—other securities See Part IV, line	11 .	[293,262,017	12	294,636,587
	13	Investments—program-related See Part IV, line	11 .	. [13	
	ı						

SS	8	Inventories for sale or use			384,747	8	337,330
A	9	Prepaid expenses and deferred charges			1,931,957	9	2,447,677
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	274,247,144			
	ь	Less accumulated depreciation	10 b	94,929,793	161,526,418	10c	179,317,351
	11	Investments—publicly traded securities .			338,030,229	11	384,442,190
	12	Investments—other securities See Part IV, line	11 .		293,262,017	12	294,636,587
	13	Investments—program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11			98,940,633	15	99,594,579
4	ı						

10	basis Complete Part VI of Schedule D	10a	274,247,144			
	b Less accumulated depreciation	10 b	94,929,793	161,526,418	10 c	179,317,351
11	Investments—publicly traded securities .			338,030,229	11	384,442,190
12	2 Investments—other securities See Part IV, line	11 .		293,262,017	12	294,636,587
13	Investments—program-related See Part IV, line	11 .			13	
14	Intangible assets				14	
15	Other assets See Part IV, line 11			98,940,633	15	99,594,579
16	Total assets. Add lines 1 through 15 (must equa	al line	34)	1,119,189,218	16	1,163,398,369
17	7 Accounts payable and accrued expenses			23,869,512	17	26,972,780

Assets or 32 32 Retained earnings, endowment, accumulated income, or other funds Net 1,011,256,162 33 1,056,667,404 33 Total net assets or fund balances 34 1,119,189,218 1,163,398,369 Total liabilities and net assets/fund balances 34 Form **990** (2018)

☐ Both consolidated and separate basis

Yes

No

Form 990 (2018)

2c

3a

3b

Consolidated basis

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 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

☐ Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 38-1374230

Name: HILLSDALE COLLEGE

Form 990 (2018)

Form 990, Part III, Line 4a:

FOR MEETING THE CHALLENGES OF MODERN LIFE AND THAT IT OFFERS TO ALL PEOPLE OF ALL BACKGROUNDS NOT ONLY AN IMPORTANT BODY OF KNOWLEDGE, BUT ALSO TIMELESS TRUTHS ABOUT THE HUMAN CONDITION. THE LIBERAL ARTS ARE DEDICATED TO STIMULATING STUDENTS' INTELLECTUAL CURIOSITY, TO ENCOURAGING THE CRITICAL, WELL-DISCIPLINED MIND, AND TO FOSTERING PERSONAL GROWTH THROUGH ACADEMIC CHALLENGE. AS SUCH, THE COLLEGE MAINTAINS A RIGOROUS CORE CURRICULUM OF 50 ACADEMIC CREDITS, INCLUDING REQUIRED COURSES IN WESTERN AND AMERICAN HISTORY, THE GREAT BOOKS, THE U.S. CONSTITUTION. LOGIC AND RHETORIC, PHILOSOPHY, THEOLOGY, MATHEMATICS, THE ARTS AND SCIENCES, AND MORE IN ADDITION TO THE CORE CURRICULUM, STUDENTS CHOOSE FROM 31 MAJORS AND SEVEN INTERDISCIPLINARY MAJORS. SEVEN MINORS-ONLY PROGRAMS AND NINE PRE-PROFESSIONAL PROGRAMS ARE ALSO OFFERED. THE FOUR-YEAR UNDERGRADUATE COURSE OF STUDY CULMINATES IN A BACHELOR OF ARTS OR BACHELOR OF SCIENCE DEGREE HILLSDALE COLLEGE IS CONSISTENTLY RANKED

STUDENT INSTRUCTION HILLSDALE COLLEGE MAINTAINS ITS DEFENSE OF THE CLASSICAL LIBERAL ARTS CURRICULUM. CONVINCED THAT IT IS THE BEST PREPARATION

HIGH ON LISTS OF THE BEST LIBERAL ARTS COLLEGES IN THE NATION BY SUCH PUBLICATIONS AS U.S. NEWS & WORLD REPORT, THE PRINCETON REVIEW, FORBES, AND KIPLINGER'S PERSONAL FINANCE IN ADDITION TO ITS UNDERGRADUATE PROGRAM OF INSTRUCTION, THE COLLEGE OPERATES THE VAN ANDEL GRADUATE SCHOOL OF STATESMANSHIP ON CAMPUS, OFFERING MASTER'S AND DOCTORAL DEGREES IN POLITICS, AND THE STEVE & AMY VAN ANDEL GRADUATE SCHOOL OF GOVERNMENT IN WASHINGTON, D.C., OFFERING A MASTER OF ARTS DEGREE IN GOVERNMENT. THE COLLEGE IS COMMITTED TO THE EXCELLENCE OF ITS STUDENTS IN BOTH INTELLECT AND CHARACTER THIS COMMITMENT IS REFLECTED IN THE STUDENT HONOR CODE, WHICH READS, "A HILLSDALE COLLEGE STUDENT IS HONORABLE IN CONDUCT, HONEST IN WORD AND DEED, DUTIFUL IN STUDY AND SERVICE, AND RESPECTFUL OF THE RIGHTS OF OTHERS. THROUGH EDUCATION THE STUDENT RISES TO SELF-GOVERNMENT " HILLSDALE BOASTS A STUDENT-FACULTY RATIO OF 9 TO 1 IT HAS 143 FULL-TIME FACULTY, 93 PERCENT OF WHOM HOLD THE HIGHEST DEGREE IN THEIR DISCIPLINES

Form 990, Part III, Line 4b: STUDENT SCHOLARSHIPS AND GRANTS HILLSDALE COLLEGE HAS BEEN COMMITTED TO INDEPENDENCE SINCE ITS FOUNDING IN 1844 WHEN A 1984 U.S. SUPREME

COURT RULING THREATENED HILLSDALE WITH THE ENTIRE RANGE OF FEDERAL REGULATIONS BECAUSE SOME OF ITS STUDENTS RECEIVED FEDERAL FINANCIAL AID, THE COLLEGE RESOLVED THAT NOT A SINGLE HILLSDALE STUDENT WOULD ACCEPT EVEN ONE CENT OF FEDERAL GRANTS, LOANS, OR SCHOLARSHIPS INSTEAD. HILLSDALE ESTABLISHED THE PRIVATELY FUNDED STUDENT INDEPENDENCE GRANT AND LOAN FUND IN PLACE OF TAXPAYER-FUNDED AID FOR DESERVING STUDENTS

WHO SEEK THE KIND OF CLASSICAL LIBERAL ARTS EDUCATION OFFERED AT HILLSDALE SINCE THE STUDENT INDEPENDENCE GRANT AND LOAN FUND WAS ESTABLISHED IN 1985. HILLSDALE HAS REPLACED FEDERAL AND STATE GRANTS AND LOANS WITH OVER \$114 MILLION IN PRIVATE AWARDS. THE ANNUAL COST OF

REPLACING GOVERNMENT AID WAS NEARLY \$5 MILLION IN THE 2018-2019 ACADEMIC YEAR. THIS TOTAL ASSISTED 527 STUDENTS IN ADDITION. THE COLLEGE

AWARDED \$24 7 MILLION IN PRIVATE SCHOLARSHIPS THAT YEAR ON THE BASIS OF FINANCIAL NEED, ACADEMIC MERIT, CAMPUS LEADERSHIP, ATHLETIC AND MUSIC PARTICIPATION, AND OTHER QUALIFICATIONS APPROXIMATELY 96 PERCENT OF HILLSDALE STUDENTS QUALIFY FOR AND RECEIVE SOME FORM OF INSTITUTIONAL AID

Form 990, Part III, Line 4c: STUDENT SERVICES HILLSDALE'S STUDENT SERVICES INCLUDE THE ADMISSIONS OFFICE, CAREER SERVICES, ACADEMIC SERVICES, STUDENT AFFAIRS, AND HEALTH

PERSONAL INTERVIEWS WITH MOST APPLICANTS. THE CAREER SERVICES OFFICE HELPS STUDENTS DEVELOP THEIR STRENGTHS AND INTRODUCES THEM TO OPPORTUNITIES THROUGH MENTORING, NETWORK-BUILDING, JOB FAIRS, AND OTHER PROGRAMS THE COLLEGE HAS A 97 PERCENT FIVE-YEAR GRADUATE PLACEMENT AVERAGE A SURVEY OF THE 2017 GRADUATING CLASS SHOWED THAT 70 PERCENT WERE EMPLOYED, 24 PERCENT IN CONTINUING EDUCATION AND GRADUATE

AND WELLNESS SERVICES THE ADMISSIONS OFFICE RECEIVES AN INCREASING NUMBER AND HIGHER CALIBER OF APPLICATIONS EACH YEAR, LEADING TO A SELECTIVE ACCEPTANCE RATE OF 43 PERCENT FOR THE MOST RECENT ACADEMIC YEAR. THE OFFICE EMPHASIZES A HOLISTIC APPROACH TO APPLICATION REVIEWS AND CONDUCTS

PROGRAMS, AND 4 PERCENT IN MILITARY AND VOLUNTEER SERVICE HILLSDALE'S STUDENT AFFAIRS DEPARTMENT OVERSEES A NUMBER OF STUDENT INTEREST GROUPS, ACADEMIC HONORARIES, VOLUNTEER ORGANIZATIONS, AND THE COLLEGE'S FOUR FRATERNITIES AND THREE SORORITIES HILLSDALE STUDENTS CONTRIBUTE

AN AVERAGE OF 15.000 HOURS OF VOLUNTEER SERVICE TO THE COMMUNITY EACH YEAR HEALTH AND WELLNESS SERVICES PROVIDES MEDICAL AND MENTAL HEALTH

SERVICES TO STUDENTS, FACULTY, AND STAFF

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

and Independent Contractors

TOBIAS W BUCK

FRED M BUTLER

CHRIS CHOCOLA

JEFFREY H COORS

CLEVES R DELP

THOMAS A DUKE JR

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	any hours	and	a dir	ecto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
WILLIAM S ATHERTON	1 00	Х						0	C	0
TRUSTEE	0 00							Ŭ)	
CHRISTOPHER F BACHELDER	1 00	×						0	O	0
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STEPHEN M BARNEY TRUSTEE	1 00	×						0	0	0
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TRUSTEE	0 00				-	
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DAVID L BELEW	1 00					
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and Independent Contractors

S GUNNAR KLARR

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NENA C MOSS

WAYNE R NELSON

.......

CHARLES S MCINTYRE III

	6,				,	,		(11) 2/1000	(14) 2/4 222	
	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
DAVID A DURELL TRUSTEE	1 00	Х						О	0	0
WILLIAM L FRAIM TRUSTEE	1 00	Х						0	0	0
STEPHEN S HIGLEY	1 00	X						0	0	0
TRUSTEE	0.00		1	1	1	1 1				

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STEPHEN S HIGLEY	1 00				0	0	
TRUSTEE	0 00					0	
RICHARD E HUNTER	1 00						
TRUSTEE	0 00	l ^				0	
MARK L JOHNSON	1 00						

	0 00						
RICHARD E HUNTER	1 00				0	0	
TRUSTEE	0 00	<			3)	
MARK L JOHNSON	1 00				0	0	
TRUSTEE	0 00	^			0	3	
THOMAS N JORDAN JR	1 00				0	0	

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MARK L JOHNSON	1 00	×					0	0	
TRUSTEE	0 00	^						3	
THOMAS N JORDAN JR	1 00	×					0	0	
TRUSTEE	0.00	_ ^						· ·	

RICHARD E HUNTER		×			٥ ا	n	0
TRUSTEE	0 00	, and the second				•	•
MARK L JOHNSON	1 00	×			0	0	0
TRUSTEE	0 00	,			Ů	,	9
THOMAS N JORDAN JR	1 00						

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

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for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
							0	0	0
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	0 00 00 1 00 0 00 1 00 0 00 1 00 0 00 0 00 0	organizations below dotted line) 1 00	organizations below dotted line) 1 00	organizations below dotted line) 100 200 100 200 100 200 100 200 200 20	organizations below dotted line) 1 00 1 00 1 00 1 00 X 0 00 1 00 X 0 00 1 00 X 0 00 1 00 X X X X X X X X X X X X	organizations below dotted Institutional Trustee 1 00	organizations below dotted Institutional Trustee 100	organizations below dotted line) Institutional Trustee Tool	organizations below dotted line) The structure of the st

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THOMAS T ROGERS TRUSTEE

BRUCE C SANBORN

JEAN SCHIAVONE

GREGORY C SCHULER

JACKSON T STEPHENS JR

RONALD E TRZCINSKI

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and Independent Contractors

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

and Independent Contractors

RICHARD P PEWE

LARRY P ARNN

PRESIDENT

JOHN CERVINI

DAVID M WHALEN

ROBERT NORTON

VP & GENERAL COUNSEL

PROVOST

VP OF ADMIN AFFAIRS & SECRETARY

VP FOR INST ADVANCEMENT

	any hours	and	a dır	ecto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RONALD D ROBSON TRUSTEE	1 00	×						0	0	0
WILLIAM J BRODBECK CHAIRMAN EMERITUS	1 00	×		x				0	0	0
PATRICK L SAJAK CHAIRMAN OF THE BOARD	4 50	×		х				0	0	0

Х

Х

Х

Х

39,357

46,697

93,706

57,820

47,107

49,264

0

209,890

990,498

469,165

224,348

249,086

CHAINHAN EMERTOS	10 00					
PATRICK L SAJAK	4 50	l	x		9	
CHAIRMAN OF THE BOARD	0 00	_ ^	^		0	
STEPHEN A VAN ANDEL	4 50					
		l x	χl		0	
VICE CHAIRMAN OF THE BOARD	0 00					
PATRICK H FLANNERY	40 00					
			x		157,709	
VP FOR FINANCE & TREASURER	0 00					
DICHARD D DEWE	40 00					

0 00 40 00

10 00 40 00

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0 00

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and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other compensation compensation

	week (list any hours					office ustee		from the organization	from related organizations	compensation 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
ROBERT BLACKSTOCK PROFESSOR OF LAW	40 00					x		215,598	0	41,474
MATTHEW SCHLIENTZ VP FOR MARKETING	40 00					x		200,227	0	44,353
MATTHEW SPALDING	40 00									

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

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0 00 40 00

0 00

DN OF EDUC PROGRAMS KIRBY CENTER

DOUGLAS JEFFREY

VP FOR EXTERNAL AFFAIRS

52,040

37,275

257,792

198,353

Χ

SCHEDU Form 990 990EZ)		Com		Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2018
Department of th			► Go to	www.irs.gov/Forms	990 for the late	st information		Open to Public Inspection
Name of the	organizat	ion					Employer identifi	cation number
		an Barbiia (Shawita Ctat	(All average above		La Lla	38-1374230	
				us (All organization e it is (For lines 1 thro			see instructions.	
-		•		ssociation of churches			(A)(i).	
2 📝 /	school des	scribed in se c	tion 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))	,	
_				vice organization desci	,	, ,	iii).	
4 /	·	search organ	•	red in conjunction with			•	Enter the hospital's
		tion operated (iv). (Comple		it of a college or unive	rsity owned or o	perated by a gov	ernmental unit descr	ibed in section 170
6 /	federal, st	ate, or local	government o	r governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	\)(v).	
	ection 17	O(b)(1)(A)(vi). (Complete			-	ınıt or from the genei	ral public described in
8 /	A communit	y trust descr	bed in sectio i	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
				escribed in 170(b)(1) See instructions Enter				lege or university or a
f I	rom activiti nvestment	es related to income and ເ	its exempt fur inrelated busir	(1) more than 331/3% nctions—subject to cer ness taxable income (le omplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
	•			d exclusively to test fo	r public safety S	See section 509	(a)(4).	
r	nore public	y supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(
a 🔲 1	Type I. A si organization	upporting org (s) the powe	anızatıon opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
	nanagemer	t of the supp	-	pervised or controlled i ation vested in the sar and C.				-
				supporting organizations) You must com				ated with, its
d □ 1	Type III no unctionally	on-functional integrated T	a lly integrate The organization	d. A supporting organi in generally must satis rt IV, Sections A and	ization operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗆 (Check this b	ox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type I	II functionally
	-		on-functionally organizations	ıntegrated supporting	organization			
g Provide	the followi	ng information	n about the s	upported organization(
	me of supp rganization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
otal								
	rk Reduct	ion Act Noti	ce, see the T	nstructions for	L Cat No 1128!	5F :	Schedule A (Form 9	 990 or 990-EZ) 2018

organization

▶ 🗆

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part 1 or if the organization failed to qualify under Part						
III. If the organization	fails to qualify u	nder the tests li	sted below, plea	se complete Par	t III.)	
Section A. Public Support						
Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total

	occion Ai i abne bappore						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	118,585,719	109,558,877	144,893,509	147,294,211	128,396,316	648,728,632
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total contributions by	118,585,719	109,558,877	144,893,509	147,294,211	128,396,316	648,728,632
	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)						1,210,378
6	Public support. Subtract line 5 from line 4						647,518,254
S	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e) 2018	(f) ⊤otal
7	Amounts from line 4	118,585,719	109,558,877	144,893,509	147,294,211	128,396,316	648,728,632
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,143,809	8,208,109	7,321,139	6,524,869	3,136,895	
9	Net income from unrelated business activities, whether or not the business is regularly carried on					818,294	818,294
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,184,845	1,179,328	1,209,567	1,627,115	1,398,511	6,599,366
11	through 10	ata (asa matuustu				T T	689,481,113
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is f	-			•		_
	check this box and stop here					<u> ▶ L</u>	
	Section C. Computation of Publi	• •	_				
	Public support percentage for 2018 (I			olumn (f))		14	93 910 %
	Public support percentage for 2017 S					15	90 530 %
16a	33 1/3% support test—2018. If the	e organization did i	not check the box o	on line 13, and line	e 14 ıs 33 1/3% or	more, check this	
Ŀ	and stop here. The organization qua 33 1/3% support test—2017. If the	he organization did	l not check a box o	n line 13 or 16a, a	and line 15 is 33 1/	/3% or more, che	
	box and stop here. The organizatio	n qualifies as a pub	olicly supported org	anızatıon			ightharpoons

17a 10%-facts-and-circumstances test—2018. 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

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ▶□ supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2018

h 10%-facts-and-circumstances test—2017. 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.

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
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 Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
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						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(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						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi	<u>_</u>				1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,(• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

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

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

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

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

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

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

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

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

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

6

7

8

answer line 10b below

the organization had excess business holdings)

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

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

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

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

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

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

provide detail in Part VI.

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

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

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

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

9с

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

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

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c				
S	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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization	2				
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	<u> </u>					
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)				
	The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test Answer (a) and (b) below.	į	Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h				

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		_	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

Schedule A (Form 990 or 990-EZ) (2018)

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2

If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12. Part IV. Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D. lines 5, 6, and 8, and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation GAMING REVENUE - 2014 AMOUNT \$ 132,216 2015 AMOUNT \$ 137,225 2016 AMOUNT \$ 133,286 2 SCHEDULE A, PART II, LINE 10, 017 AMOUNT \$ 160,724 2018 AMOUNT \$ 126,490 SALE OF INVENTORY - 2014 AMOUNT \$ 1,052,62 EXPLANATION OF OTHER 9 2015 AMOUNT \$ 1,042,103 2016 AMOUNT \$ 1,076,281 2017 AMOUNT \$ 1,017,234 2018 AMOU INCOME NT \$ 978.811 MISCELLANEOUS - 2017 AMOUNT \$ 449.157 2018 AMOUNT \$ 293.210

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

Supplemental Financial Statements

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

▶ Go to www.irs.gov/Form990 for the latest information.

DLN: 93493139015520 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

	me of the organization LSDALE COLLEGE		Employer identification number
HIL	LISTIALE COLLEGE		38-1374230
Pa	Organizations Maintaining Donor Advi Complete if the organization answered "Ye		r Accounts.
		(a) Donor advised funds	(b)Funds and other accounts
1	Total number at end of year	8	
2	Aggregate value of contributions to (during year)	146,766	
3	Aggregate value of grants from (during year)	152,895	
4	Aggregate value at end of year	4,795,888	
5	Did the organization inform all donors and donor advisorganization's property, subject to the organization's ex		vised funds are the Yes No
6	Did the organization inform all grantees, donors, and donor charitable purposes and not for the benefit of the donor private benefit?		
Pa	rt III Conservation Easements. Complete if the	he organization answered "Yes" on Forn	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the orga	nızatıon (check all that apply)	
	\square Preservation of land for public use (e g , recreatio	n or education) \qed Preservation of an	historically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the for	m of a conservation Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histor	ıc structure ıncluded ın (a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ired after 7/25/06, and not on a historic	2d
3	Number of conservation easements modified, transferred tax year ▶	ed, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to conservation	on easement is located >	
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		of violations,
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing co	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, \$	handling of violations, and enforcing conser-	vation easements during the year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(H)^2$) above satisfy the requirements of section 1°	70(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports constalling the text of the the organization's accounting for conservation easemen	e footnote to the organization's financial state nts	ements that describes
Pai	Organizations Maintaining Collections Complete if the organization answered "Ye		er Similar Assets.
1 a	If the organization elected, as permitted under SFAS 1: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, education, or research in f	

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

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

following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

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

Schedule D (Form 990) 2018 Cat No 52283D

Par	t II	Organizations Ma	aintaining Col	lections o	f Art, Hi	stori	cal T	reası	ıres, o	r Other	Similar A	Assets (cont	inued)	
3		ing the organization's acq ms (check all that apply)	uisition, accessior	n, and other	records, o	check a	any of	the fo	llowing	that are a	sıgnıfıcant	use of its col	lection	
а	✓	Public exhibition				d		Loan	or exch	ange prog	grams			
b	✓	Scholarly research				е		Othe	r					
c	✓	Preservation for future	e generations											
4		ovide a description of the	organization's col	lections and	explain h	ow the	y furtl	ner the	e organı	zation's e	xempt purp	oose in		
5		ring the year, did the orga sets to be sold to raise fur									nılar	☐ Yes	 N	0
Pai	rt I\	Escrow and Cust Complete if the ord X, line 21.			' on Form	n 990	, Part	IV, lı	ne 9, o	r reporte	ed an amo	ount on Forr		
1a		the organization an agent luded on Form 990, Part)		an or other I	ntermedia	ary for	contri	bution	s or oth	er assets	not	☐ Yes	□ N	o
h	TE '	"Yes," explain the arrange	mont in Bart VIII	and comple	to the fell	owing	+>blo					Amount		_
b c			ment in Part XIII	and comple	ite the roll	owing	table			1c		Aillouilt		_
d		ginning balance								1d				_
e		ditions during the year	_							1e				_
f		stributions during the year								1f				_
		ding balance												_
2a	Dic	d the organization include	an amount on Fo	rm 990, Par	t X, line 2	1, for	escrow	or cu	istodial a	account li	ability?	. ∐ Yes	∐ N	0
		'Yes," explain the arrange												
Pa	rt V	Endowment Fund	ds. Complete if											
1.	Dog.	unning of vone balance		(a)Current			or yea 574,576	_		ears back 82,288,798	+	ears back (e) 3,509,003	Four yea	
	_	inning of year balance .			451,311					•				039,624
		tributions			989,628		57,531 16,451			33,664,441 29,153,531		5,622,300 5,723,718		319,036 955,673
		investment earnings, gair	•									· · ·	•	
		nts or scholarships		13,	934,324		12,387	7,303		11,089,468	10	0,251,342	10,	195,154
е		er expenditures for facilitie programs	es	-12,	517,931		-37,686	5,363		44,991,818	-1:	1,746,426	-10,	789,095
f	Adm	inistrative expenses .		5,	894,256		5,407	7,289		4,432,502	:	2,613,871	3,	487,925
g	End	of year balance		710,	.282,819	6	568,451	1,311	5	74,576,618	482	2,288,798	493,	509,003
2 a b c	Bo: Per	ovide the estimated percei ard designated or quasi-e rmanent endowment > mporarily restricted endov	ndowment ► 95 940 %	ent year end 4 060 % %	balance (line 1g	g, colu	mn (a)) held a	as				
Ĭ	The	e percentages on lines 2a	, 2b, and 2c shou	ld equal 100)%									
За		there endowment funds		•		on that	are h	eld an	ıd admın	stered fo	r the			
	_	janization by											Yes	No
	(i)	unrelated organizations					•					3a(i)		No_
) related organizations .										3a(ii)		
b ⊿		'Yes" on 3a(II), are the rel						· ·				. 3b	Yes	
4		scribe in Part XIII the inte			is endowi	ment T	unus							
Pal	rt V	Complete if the org			' on Form	n 990	. Part	TV. lı	ne 11a	. See Fo	rm 990. P	art X. line 1	0.	
	Des	scription of property	(a) Cost or oth (investme	er basıs	(b) Cost o						depreciation		Book valu	e
12	Lanc	1					11 10	09,565					1 1	,109,565
								37,592	<u> </u>		66,947,907	1		2,289,685
		•					-12,6	- , , , , , , ,					112	-,205,005
		sehold improvements					17 0	75 / 25			12 022 621			1 0/1 00/
a	⊏quı	pment						75,425			12,933,621			1,941,804

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

Part VII Investments—Other Securities. Complete if t	he organization ans	wered "Yes" on Form	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value		thod of valuation
(including name of security) (1) Financial derivatives		Cost or end	l-of-year market value
(2) Closely-held equity interests			
(3) Other(A) DOMESTIC COMMON STOCKS	43,160,684		F
(B) GOVERNMENT & AGENCY BONDS	5,046,486	,	F
(C) CORPORATE BONDS	32,067,037		F
(D) HEDGE FUNDS	89,461,566		F
(E) REAL ESTATE	26,282,981		F
(F) OTHER	2,227,490		F
(G) ALTERNATIVES	96,390,343		F
(H)	30,330,313		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	294,636,587		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on	Form 990. Part IV. I	ine 11c. See Form 99	0. Part X. line 13.
(a) Description of investment	(b) Book value	(c) Me	thod of valuation
(1)		Cost or end	l-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	▶		000 D 1 V 1 15
Part IX Other Assets. Complete if the organization answered (a) Description	a res on Form 990, P	art IV, line IId See For	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE (2) BENEFICIAL INTERESTS IN TRUSTS			632,146 98,962,433
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			▶ 99,594,579
Part X Other Liabilities. Complete if the organization a			
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) i	Book value	
(1) Federal income taxes			
LIABILITY ON ANNUITY CONTRACTS & TRUSTS (2)		57,986,011	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	57,986,011	
2. Liability for uncertain tax positions. In Part XIII, provide the text of		organization's financial st	·

Part XI

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

1,702,473

180,071,009

30,572,412

210,643,421

136,907,302

1,995,066

134,912,236

31,316,515

166.228.751

Schedule D (Form 990) 2018

b e

3

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

4 b

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

c

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

Part XII 1 2

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

5

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

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

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 . .

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

4a

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4b

2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

28,500,587

1,995,066

2,071,825

29,244,690

3.302.496

-1.600.023

2.071.825

2e

3

4c

5

2e

3

4c

5

Schedule D (Form 990) 2018		
Part XIII	Supplemental Info	ormation (continued)
Retur	n Reference	Explanation

Schedule D (Form 990) 2018

Supplemental Information	
Return Reference	Explanation
PART III, LINE 4	ALWIN C CARUS COIN COLLECTION THE CARUS COIN COLLECTION CONSISTS OF A VAST ARRAY OF FOREI GN AND DOMESTIC CURRENCY DIVIDED INTO THREE SMALLER DISPLAYS AN ANCIENT COIN COLLECTION, AN AMERICAN COINAGE COLLECTION, AND A HISTORY OF MONEY COLLECTION THAT INCLUDES EARLY NON-METAL FORMS OF CURRENCY, PRECIOUS METALS, AND MODERN FIAT CURRENCY THE COLLECTION WAS LEF T TO HILLSDALE COLLEGE TO BE USED FOR EDUCATIONAL PURPOSES, IT IS A TOOL FOR TEACHING ECON OMICS, HISTORY, FINANCE, AND CLASSICS PORTIONS OF THE COLLECTION ARE EXHIBITED PUBLICLY A T HILLSDALE COLLEGE EVENTS ACROSS THE COUNTRY, EXTENDING THE EDUCATIONAL BENEFITS OF THE C OLLECTION TO A MUCH WIDER AUDIENCE THAT INCLUDES BUSINESS OWNERS, EDUCATORS, COMMUNITY LEA DERS, AND OTHER INTERESTED CITIZENS SPECIAL LIBRARY COLLECTIONS IN ADDITION TO THE MAIN S TUDY AND RESEARCH COLLECTIONS, HILLSDALE COLLEGE'S MOSSEY LIBRARY CONTAINS A NUMBER OF RAR E AND SPECIAL HOLDINGS, INCLUDING THE LUDWIG VON MISES LIBRARY AND THE RICHARDSON HERITAGE ROOM EARLY AND RARE EDITIONS LUDWIG VON MISES, THE FATHER OF AUSTRIAN ECONOMICS, CHOSE H ILLSDALE COLLEGE TO BE THE RECIPIENT OF HIS PERSONAL LIBRARY BECAUSE OF THE SCHOOL'S COMMI THEN TO TEACH THE PRINCIPLES OF FREEDOM THIS IMPORTANT COLLECTION OF BOOKS, PAMPHLETS, A ND PAPERS RELATED TO FREE-MARKET ECONOMICS IS HOUSED IN THE LUDWIG VON MISES ROOM IN MOSSE Y LIBRARY AND IS AVAILABLE TO THE HILLSDALE FACULTY AND STUDENTS FOR RESEARCH THE RICHARD SON HERITAGE ROOM CONTAINS A COLLECTION OF RARE-AND FIRST-EDITION BOOKS THAT RELATE TO OUR COUNTRY'S FOUNDING AND EARLY AMERICAN HISTORY LIBERTY WALK AS A SYMBOL OF ITS DEDICATION TO LIBERTY, THE COLLEGE BEGAN IN 2003 TO ESTABLISH THE LIBERTY WALK AS A SYMBOL OF ITS DEDICATION TO LIBERTY, THE COLLEGE BEGAN IN 2003 TO ESTABLISH THE LIBERTY WALK AS FIRS OF STATUES THAD COLLECTION OF DATE. AND FIRST-EDITION BOOKS THAT RELATE TO OUR COUNTRY'S FOUNDING AND EARLY AMERICAN HISTORY LIBERTY WALK AS A SYMBOL OF ITS DEDICATION TO LIBERTY, THE COLLECTION A COLLECTION OF STATUES.

Supplemental Information	
Return Reference	Explanation
PART III, LINE 4	RESEARCH SPECIMENS FOR HILLSDALE COLLEGE AND THE GREATER SCIENTIFIC COMMUNITY TWO RECENT ADDITIONS TO THE COLLECTION INCLUDE REAL-BONE DINOSAUR SKELETONS OF AN EDMONTOSAURUS ANNEC TENS AND A TRICERATOPS

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	AS STATED PREVIOUSLY, HILLSDALE COLLEGE IS AN INDEPENDENT FOUR-YEAR LIBERAL ARTS INSTITUTION HILLSDALE DOES NOT ACCEPT ANY FEDERAL OR STATE MONIES FOR THE OPERATION OF THE COLLEGE ENDOWMENT FUNDS ARE INVESTED IN SUCH A MANNER AS TO PRESERVE AND PROTECT THE COLLEGE'S INDEPENDENCE FROM GOVERNMENT FUNDS EARNINGS FROM THE ENDOWMENT ARE PRIMARILY USED TO PROVIDE SCHOLARSHIPS TO STUDENTS AND TO FUND THE OPERATIONS OF THE COLLEGE

Supplemental Information	_
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN SPLIT INTEREST AGREEMENTS -2,305,924 WITTE FOUNDATION CONSOLIDATED REVENUE 705,901

Supplemental Information Return Reference Explanation PART XI, LINE 4B - OTHER CGS BOOKSTORE -686,086 CGS PRESS GAMING EXPENSE -58,017 TUITION AND FEES 29,244,690 I ADJUSTMENTS

Supplemental Information	
Return Reference	Explanation
•	GAMING EXPENSE 58,017 CGS BOOKSTORE 686,086 CGS PRESS WITTE FOUNDATION CONSOLIDATED EXPENSES 1,250,963

Supplemental Information							
Return Reference	Explanation						
PART XII, LINE 4B - OTHER ADJUSTMENTS	TUITION AND FEES 29,244,690						

S

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493139015520 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 ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** HILLSDALE COLLEGE 38-1374230 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 Nο 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 5c c Employment of faculty or administrative staff? 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 Νo 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) (2018)

Explanation

HILLSDALE COLLEGE'S POLICY OF NON-DISCRIMINATION IS WRITTEN INTO ITS ORIGINAL ARTICLES OF ASSOCIATION, WHICH WERE ADOPTED IN

Schedule F (Form 990 or 990-F7) (2018)

Return Reference

SCHEDULE E, PART I, LINE 3

	1853 THEY STATE, "THE OBJECT OF THIS INSTITUTION IS AND SHALL BE TO FURNISH TO ALL PERSONS WHO WISH, IRRESPECTIVE OF NATIONALITY, COLOR, OR SEX, A LITERARY, SCIENTIFIC OR THEOLOGICAL EDUCATION AS COMPREHENSIVE AND THOROUGH AS IS USUALLY PURSUED IN OTHER COLLEGES OR THEOLOGICAL SCHOOLS IN THIS COUNTRY, AND TO COMBINE WITH THIS, SUCH MORAL, SOCIAL AND ARTISTIC INSTRUCTION AND CULTURE AS WELL BEST DEVELOP THE MINDS AND IMPROVE THE HEARTS OF THE STUDENTS "HILLSDALE COLLEGE CONTINUES TO BE GOVERNED BY THESE WORDS, AND THEY ARE INCORPORATED INTO THE SCHOOL'S MORE RECENT MISSION STATEMENT THESE WORDS ARE INCLUDED IN THE COLLEGE CATALOG, AND THEY ARE FEATURED PROMINENTLY IN THE HILLSDALE COLLEGE HONOR CODE
SCHEDULE E, PART I, LINE 4	IN 1844, HILLSDALE COLLEGE WAS FOUNDED ON THE THEN TRULY EXCEPTIONAL PRECEPT OF OFFERING AN EDUCATION TO "ALL PERSONS, IRRESPECTIVE OF NATIONALITY, COLOR OR SEX." IT ENROLLED AFRICAN AMERICANS, WOMEN, AND OTHER MINORITIES NEARLY TWO DECADES BEFORE THE CIVIL WAR HILLSDALE WAS THE FIRST COLLEGE IN THE NATION TO HAVE ITS PRINCIPLES OF NONDISCRIMINATION WRITTEN INTO ITS STATE CHARTER IT WAS THE FIRST MICHIGAN COLLEGE AND THE SECOND IN THE NATION TO ADMIT WOMEN ON AN EQUAL BASIS WITH MEN, AND IT WAS THE SECOND COLLEGE IN THE NATION TO CONFER THE B A TO WOMEN EVEN PRIOR TO THE CIVIL WAR, IT REFUSED TO SPECIFY RACE ON RECORDS OR TO BASE DECISIONS OR POLICIES ON THE RACE OF ITS STUDENTS, FACULTY, OR STAFF TODAY, IT BASES ADMISSIONS AND HIRING PRACTICES ON QUALIFICATION, COMPETENCE, AND MERIT WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR ANY OTHER LEGALLY PROTECTED STATUS ACCORDINGLY, IT DOES NOT KEEP RECORD OF THE RACE OF ANY OF ITS STUDENTS, FACULTY,

Internal Revenue Servic			Activities (Outside the Uni	ted S	tates	OMB No 1545-0047
Department of the Treas Internal Revenue Servic Name of the organi	► Comp	lete if the organi					
nternal Revenue Servic		-		Yes" to Form 990, Part IV, I	ıne 14b, 1	.5, or 16.	2018
nternal Revenue Servic	_			to Form 990.			
	surv	Go to www.irs.g	gov/rorm990 for II	nstructions and the latest ir	itormatioi	n.	Open to Public Inspection
varne or the organi						Emmlayor idan	tification number
HILLSDALE COLLEC	GE					Employer iden	uncation number
						38-1374230	
	eral Information n 990, Part IV, line		Outside the U	Jnited States. Comple	te ıf the	organization a	nswered "Yes" to
1 For grantm	nakers. Does the or	ganızatıon maı	ntaın records to	substantiate the amount	of its gr	ants and	
other assist	ance, the grantees'	eligibility for th	ie grants or assis	stance, and the selection	criteria	used	
to award the	e grants or assistan	ce?					✓ Yes ☐ No
	nakers. Describe in United States	Part V the orga	anızatıon's proce	dures for monitoring the	use of it	ts grants and oth	ner assistance
3 Activites per	Region (The following	ng Part I, line 3 t	table can be dupli	cated if additional space is	needed)	
(a)	Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		program spe	vity listed in (d) is a n service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region
See Add'l Da	ta						
3a Sub-total		(0				7,817,928
	ntinuation sheets to						1,750,551
Part I c Totals (add II	ines 3a and 3b)		0				9,568,479

Schedule F (Form 990) 20	.018							Page 2
			nizations or Entitie d more than \$5,000.				n answered "Yes"	to Form 990, Part
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	STUDENT TUITION	104,353V	WIRE		[воок
		EUROPE	HONORAIUM	11,642	WIRE			ВООК
			above that are recogn nsel has provided a se				,	0
3 Enter total number	r of other orc	janizations or entities	s	<u> </u>	<u></u>	<u> •</u>	,	4

Page **3** Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Type of grant or assistance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of cash	(f) Amount of	(g) Description	(h) Method of
, ,, ,	,	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
See Add'l Data							

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	□Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	☐Yes	☑ No

Page 5

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Explanation

Return Reference	Explanation
PART I, LINE 2	HILLSDALE COLLEGE OFFERS SCHOLARSHIPS AND GRANTS TO INTERNATIONAL STUDENTS (STUDENTS ATTENDING HILLSDALE UNDER F-1 STUDENT VISAS) BASED UPON EITHER ACADEMIC MERIT OR DEMONSTRATED FINANCIAL NEED THE ASSESSMENT FOR AWARDING INITIAL MERIT-BASED SCHOLARSHIP CONSIDERS THE ACADEMIC CREDENTIAL OF THESE INTERNATIONAL STUDENTS NEED-BASED GRANTS ARE AWARDED TO INTERNATIONAL STUDENTS BASED UPON DEMONSTRATED FINANCIAL NEED EVIDENCED FROM INCOME AND ASSET INFORMATION REPORTED ON HILLSDALE COLLEGE'S INTERNATIONAL FINANCIAL AID APPLICATION RENEWAL OF MERIT-BASED INTERNATIONAL AWARDS ARE CONTINGENT UPON THE INTERNATIONAL STUDENT MAINTAINING A 3 0 OR HIGHER CUMULATIVE GRADE POINT AVERAGE THIS GRADE POINT THRESHOLD IS MONITORED AT THE CONCLUSION OF EACH ACADEMIC SEMESTER INTERNATIONAL STUDENTS NOT MEETING THAT GPA THRESHOLD FOR THE FIRST TIME RECEIVE A LETTER REMINDING THEM OF THIS CRITERION A SECOND SEMESTER BELOW THE 3 0 GPA REQUIREMENT RESULTS IN SCHOLARSHIP PROBATION, AND A THIRD CONSECUTIVE SEMESTER NOT MEETING THIS 3 0 GPA RESULTS IN LOSS OF THE MERIT-BASED SCHOLARSHIP RENEWAL OF A NEED-BASED GRANT REQUIRES THAT INTERNATIONAL STUDENTS CONTINUE TO EVIDENCE FINANCIAL NEED EACH YEAR AS DETERMINED BY SUBMISSION OF HILLSDALE'S INTERNATIONAL FINANCIAL AID APPLICATION (2) HONORARIA AND TRAVEL REIMBURSEMENTS WERE PAID TO VARIOUS INTERNATIONAL SPEAKERS ON CAMPUS AS WELL AS HONORARIA PAID FOR EDITORIAL WORK (3) TOUR FEES WERE PAID FOR SCHOOL-SPONSORED INTERNATIONAL TRIPS (4) THE BOOK TOTAL AMOUNT OF INVESTMENTS IN CENTRAL AMERICA AND THE CAYMAN ISLANDS IS \$77,052,981

Additional Data

CENTRAL AMERICA AND THE

CARIBBEAN

Software ID: Software Version:

EIN: 38-1374230

Name: HILLSDALE COLLEGE

INSURANCE

1,500

Form 990 Schedule	F Part I - Activities	Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	INVESTMENTS	7,606,216

0 MANAGEMENT

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 ın 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) EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES 6.525 IRECRUITMENT EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICES **IEDITORIAL WORK** 11,692 AND GREENLAND)

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 ın 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 0 PROGRAM SERVICES COLLEGE SPONSORED 104.353 AND GREENLAND) ISTUDENT TRIP EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICES **HONORARIUMS** 56,300 AND GREENLAND)

<u>Form 990 Schedule F Part</u>	orm 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	SPEAKER EXPENSES	18,292					
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDENT STIPENDS	13,050					

Form 990 Schedule F Par	t I - Activities	Outside The L	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	MANAGEMENT	LEGAL FEES, SOFTWARE	16,029
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	SUBSCRIPTIONS	12,737

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) O MANAGEMENT INSURANCE 12,000 NORTH AMERICA NORTH AMERICA 0 PROGRAM SERVICES PROFESSIONAL SERVICES 4,625

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICES ICHAPEL CONSTRUCTION 1.004.174 NORTH AMERICA NORTH AMERICA 0 PROGRAM SERVICES **IHONORARIUMS** 1,629

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 ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICES SPEAKING AT 747 NORTH AMERICA SEMINARS/CONFERENCES 0 PROGRAM SERVICES PURCHASE OF GOODS 88,550 NORTH AMERICA

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) SUB-SAHARAN AFRICA 0 PROGRAM SERVICES STUDENT STIPENDS 6.220 E ASIA & PACIFIC 0 ISCHOLARSHIPS IN/A 81,996

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 ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) **EUROPE** 0 ISCHOLARSHIPS IN/A 241.642 MIDDLE EAST & NORTH 0 SCHOLARSHIPS IN/A 22,100 AFRICA

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 ISCHOLARSHIPS IN/A 57,700 NORTH AMERICA SOUTH AMERICA 0 SCHOLARSHIPS IN/A 26,300

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 ın region (by type) (i e , is a program service, for region describe specific type of fundraising, program region agents in services, grants to service(s) in region region recipients located in the region) SUB-SAHARAN AFRICA 0 ISCHOLARSHIPS 174,102 N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of disbursement assistance cash grant non-cash valuation (book. non-cash recipients FMV, appraisal, assistance assistance other) SCHOLARSHIP 81,996 APPLIED AGAINST Івоок IEAST ASIA & **IACCOUNT** THE PACIFIC

Івоок

10.050 WIRE

STUDENT STIPEND

IEUROPE

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number I (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) HONORARIUM 25,050 WIRE **IBOOK** leurope. HONORARIUM 10,146 CHECK воок **IEUROPE**

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (e) Manner of cash (h) Method of (a) Type of grant or (b) Region (c)Number (d) Amount of (f) Amount of (g) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) SCHOLARSHIP 241,642 APPLIED AGAINST Івоок **IEUROPE** IACCOUNT SCHOLARSHIP 22,100 APPLIED AGAINST Івоок MIDDLE EAST IACCOUNT

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (h) Method of (b) Region (f) Amount of (g) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIP 57,700 APPLIED AGAINST Івоок INORTH IACCOUNT AMERICA SCHOLARSHIP 26,300 APPLIED AGAINST Івоок ISOUTH IACCOUNT AMERICA

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (c)Number assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) STUDENT STIPEND 5,720 CHECK Івоок SUB-SAHARAN AFRICA SCHOLARSHIP 174,102 APPLIED AGAINST lbook ISUB-SAHARAN ACCOUNT AFRICA

Employer identification number Name of the organization HILLSDALE COLLEGE 38-1374230 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2018

Supplemental Information Regarding

Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Go to www irs gov/Form990 for instructions and the latest information

DLN: 93493139015520 OMB No 1545-0047

Open to Public

Inspection

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Sche	dule G (Form	990 or 990-EZ) 2018					Page 3
11	Does the org	ganization conduct gaming	activities with nonme	mbers?		Yes	✓ No
12	Is the organ formed to ac	□Yes	✓ No				
13	Indicate the	percentage of gaming act	ıvıty conducted ın			- 133	
а	The organiza	ation's facility			13a		100 000 %
b	An outside f	acılıty			13b		0 %
14	Enter the na	ame and address of the pe	rson who prepares the	organization's gaming/special events books and	d records		_
	Name >	PATRICK H FLANNERY					
	Address >	33 EAST COLLEGE STR HILLSDALE, MI 49242	EET				
15a		ganization have a contract	with a third party from	n whom the organization receives gaming			
	revenue?					☐ Yes	☑ No
b		er the amount of gaming i aming revenue retained b		ne organization 🕨 \$ and	d the		
•							
С	ir res, ent	er name and address of th	, ,				
	Name 🟲						
	Address ►						
16	Gamıng mar	nager information					
	Name >	PATRICK H FLANNERY					
	Gaming mar	nager compensation > \$		0			
	Description (of services provided > S	EE SCHEDULE G, PART	T IV, STATEMENT 1			
	☑ Director	r/officer	☐ Employee	☐ Independent contractor			
17	Mandatory d	listributions					
- <i>'</i>	•		te law to make charita	ble distributions from the gaming proceeds to			
	retain the st	ate gaming license?				☐Yes	☑ No
b		•		istributed to other exempt organizations or sper	nt		
		ization's own exempt activ					
Pai				lanations required by Part I, line 2b, colur applicable. Also provide any additional in			
	Retu	ırn Reference		Explanation			
SCHEDULE G, PART III, LINE 16, DESCRIPTION OF SERVICES PROVIDED AS TREASURER OF THE COLLEGE, PATRICK H FLANNERY WORKS WITH VARIOUS GROUPS ON CAN IN SECURING A RAFFLE LICENSE FROM THE STATE OF MICHIGAN THESE LICENSES ARE EFFECTIVE ONLY FOR THE DATE OF THE RAFFLE FURTHER, THE TREASURER COMPLETES THE RAFFLE FINANCE STATEMENT AND SUBMITS IT TO THE STATE OF MICHIGAN FOLLOWING THE RAFFLE							
			1	Sch	nedule G (F	orm 990 or	990-EZ) 2018

efile GRAPHIC print - DO N	OT PROCESS	As Filed Data -					DL	N: 93493139015	520		
Note: To capture the full co	ntent of this d	ocument, please sel	lect landscape mode	e (11" x 8.5") whe	n printing.						
Schedule I (Form 990)		Governments a	Other Assistand and Individuals tion answered "Yes," o	s in the Unite	d States			2018 Open to Public			
Department of the Treasury Internal Revenue Service		► Go to <u>www</u>	Attach to Form w.irs.gov/Form990 for		on.			Inspection			
Name of the organization HILLSDALE COLLEGE							nployer identific	cation number			
Part I General Informat						38	-1374230				
 Does the organization maintainth the selection criteria used to Describe in Part IV the organ Part III Grants and Other As 	award the grants ization's procedur	or assistance? es for monitoring the use	e of grant funds in the Un	ited States		,	0, Part IV, line		□ No		
		can be duplicated if add									
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)) Description of neash assistance (h) Purpose of or assistance		ant		
(1) ATLANTA CLASSICAL ACADEMY 3260 NORTHSIDE DR ATLANTA, GA 30305	45-4342063	GOVERNMENTAL UNIT	25,000					EXCELLENCE IN TEACHING AWARD			
(2) HC REAL ESTATE INC 33 E COLLEGE ST HILLSDALE, MI 49242	83-2541397	501(C)(3)	300,400					FOR EDUCATIONAL PURPOSES			
2 Enter total number of section	1 501(c)(3) and go	overnment organizations	listed in the line 1 table .				. •	•	2		
3 Enter total number of other of	organizations listed	d in the line 1 table	<u> </u>	<u></u>	<u> </u>		. ▶		0		
For Paperwork Reduction Act Notice,	see the Instruction	ns for Form 990.		Cat No 50055P					18		

Schedule I (Form 990) 2018						Page 2	
Part III Grants and Other Part III can be dupl	Assistance to plicated if addition	Domestic Individu onal space is needed	ıals. Complete if the orga	inization answered "Yes"	on Form 990, Part IV, line 22		
(a) Type of grant or ass	sistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
(1) SCHOLARSHIPS AND GRAN	NTS	1420	26,041,216	0	N/A	N/A	
(2)	,						
(3)				l			
(4)				1			
(5)				1			
(6)							
(7)				1			
Part IV Supplement	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.						
Return Reference	curn Reference Explanation						
PART I, LINE 2	DURING FISCAL YEAR 2019, HILLSDALE COLLEGE AWARDED MONETARY GRANTS/PRIZES TO ONE INSTITUTION BASED ON SPECIFIED CRITERIA ONE GRANT IS THE HENRY SALVATORI PRIZE FOR EXCELLENCE IN TEACHING, WHICH HONORS ONE K-12 SCHOOL EACH YEAR FOR ITS OUTSTANDING EDUCATIONAL PROGRAM ALL PUBLIC AND PRIVATE SCHOOLS WHOSE TEACHING REFLECTS THE BEST TRADITIONS OF WESTERN EDUCATION ARE WELCOME TO APPLY THE WINNING SCHOOL IS REQUIRED TO PREPARE AN ANNUAL REPORT ON THE EXPENDITURE(S) OF THE PRIZE UNTIL SUCH FUNDS ARE ENTIRELY EXPENDED. ONE OTHER GRANT SUPPORTED ONE OF THE TWENTY CLASSICAL K-12 CHAPTER AND PROVIDES CURRICULAR SUPPORT AND TEACHER AND PRINCIPAL TRAINING. THIS GRANT SUPPORTED THE						

HILLSDALE COLLEGE STAFF VISIT THE SCHOOLS EACH YEAR

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Dat	a -	DLN: 934	9313	39015	520	
Sch	edule J	Com	pensati	ion Information	МО	IB No	1545-0	0047	
(For	n 990)	For certain Officers,	Directors, T	rustees, Key Employees, and High	est				
		Complete if the organi	Compensa zation answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20	18	₹ .	
	▶ Attach to Form 990.								
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/F</u>	<u>orm990</u> for	instructions and the latest inform	ation.		to Pul ectio		
	ne of the organiza	ation			Employer identificat				
HILI	SDALE COLLEGE				38-1374230				
Pa	rt I Questi	ons Regarding Compensation	1	·					
							Yes	No	
1a				the following to or for a person listed y relevant information regarding thes					
		or charter travel	✓	Housing allowance or residence for p	ersonal use				
	_	companions	✓	Payments for business use of person					
		nification and gross-up payments	✓	Health or social club dues or initiatio					
	Discretion	ary spending account	Ш	Personal services (e g , maid, chauff	eur, cner)				
b		kes in line 1a are checked, did the o ill of the expenses described above?		ollow a written policy regarding paymo iplete Part III to explain	ent or reimbursement	1b	Yes		
2				or allowing expenses incurred by all r, regarding the items checked in line	1-2	2	Yes		
	directors, truste	es, officers, including the CEO/Exec	utive Directo	r, regarding the items checked in line	Ia				
3		If any, of the following the filing org EO/Executive Director Check all tha		ed to establish the compensation of the	e				
	_	•		CEO/Executive Director, but explain in	Part III				
	✓ Compensa	ation committee	П	Written employment contract					
		ent compensation consultant	✓	Compensation survey or study					
		of other organizations	<u></u>	Approval by the board or compensat	ion committee				
4			Part VII, Se	ction A, line 1a, with respect to the fil	ing organization or a				
	related organiza								
a		ance payment or change-of-control				4a		No	
b c	•	r receive payment from, a suppleme r receive payment from, an equity-b	•	· ·		4b 4c		No No	
·	•			plicable amounts for each item in Part	III	40		INO	
), 501(c)(4), and 501(c)(29) org	-						
5		ed on Form 990, Part VII, Section A, ontingent on the revenues of	line 1a, did	the organization pay or accrue any					
a	The organization					5a	Yes		
b	Any related orga	anization? 5a or 5b, describe in Part III				5b		No	
6	-	ed on Form 990, Part VII, Section A,	line 15 did	the organization hav or accrue any					
Ü	compensation c	ontingent on the net earnings of	iiie 1a, uiu	the organization pay or accrue any					
a	The organization					6a		No	
Ь	Any related orga	anization? 6a or 6b, describe in Part III				6 b		No	
7	•		line 15 did	the organization provide any nonfixed					
	payments not d	escribed in lines 5 and 6? If "Yes," d	escribe in Pa	rt III		7		No	
8		nts reported on Form 990, Part VII, litial contract exception described in		red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	scribe	8		No	
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow th	e rebuttable	presumption procedure described in F	Regulations section	9			
Ear I	Danarwork Body	ction Act Notice, see the Instru	tions for Ec	rm 990 Cat No 50	0053T Schedule 1	/Earn	, 000)	2018	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Part II Officers, Directors, Trustees, key Employees, and Trig							
For each individual whose compensation must be reported on Schedule J, report on instructions, on row (ii) Do not list any individuals that are not listed on Form 99	90, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	al amount of Fo	rm 990, Part VII, Se	≥ction A, line 1a, a	pplicable column (Γ	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Brea	akdown of W-2 and/o compensation		and other	(D) Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1	1	1	I	1
							!
	+						
	+						
	+	+		+			
	+	-		+		-	
			1				

	<u> </u>							
Part III Supplemental Inform	art III Supplemental Information							
rovide 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							
·	BY THE NATURE OF THE POSITION, THE CEO IS REQUIRED TO FULFILL SEVERAL OBLIGATIONS/COMMITMENTS WHICH MAY RESULT IN TRAVELLING FIRST-CLASS AND/OR CHARTER TO ACCOMMODATE REQUIRED APPOINTMENTS FURTHER, HIS SPOUSE MAY ACCOMPANY HIM AS DICTATED BY HER REQUIRED PRESENCE FOR AN EVENT THE CEO HAS AVAILABLE TO HIM A DISCRETIONARY FUND (BUDGETED EACH YEAR) FOR ASSISTING INDIVIDUALS AND/OR PROJECTS IN NEED OF							

Page 3

AND/OR CHARTER TO ACCOMMODATE REQUIRED APPOINTMENTS FURTHER, HIS SPOUSE MAY ACCOMPANY HIM AS DICTATED BY HER REQUIRED PRESENCE FOR AN EVENT. THE CEO HAS AVAILABLE TO HIM A DISCRETIONARY FUND (BUDGETED EACH YEAR) FOR ASSISTING INDIVIDUALS AND/OR PROJECTS IN NEED OF SUPPORT FURTHER, THE CEO IS REQUIRED TO RESIDE IN COLLEGE-OWNED HOUSING FOR THE PURPOSE OF BEING A PRESENCE ON CAMPUS AND FOR ENTERTAINMENT PURPOSES AS THE RESULT OF LIVING IN A COLLEGE-OWNED RESIDENCE, THE COLLEGE PROVIDES, AS WITH ALL CAMPUS BUILDINGS, LIGHT HOUSEKEEPING. THE POSITION OF CEO ALSO REQUIRES MEMBERSHIP IN CERTAIN SOCIAL/ACADEMIC ORGANIZATIONS AND THEREFORE THE COLLEGE PROVIDES THE DUES/FEES ASSOCIATED WITH THAT MEMBERSHIP. FROM TIME TO TIME THE COLLEGE UTILIZES THE COLLEGE PRESIDENT'S PERSONAL

RESIDENCE FOR COLLEGE EVENTS AND HOUSING OF COLLEGE GUESTS

Schedule J (Form 990) 2018

Return Reference	Explanation
,	THE PRUDENTIAL COMMITTEE (EXECUTIVE COMMITTEE) OF THE BOARD OF TRUSTEES APPROVES THE CEO'S ANNUAL SALARY THE TREASURER'S OFFICE SECURES SALARY INFORMATION SUPPLIED BY THE CHRONICLE OF HIGHER EDUCATION, IRS FORM 990 OF OTHER ORGANIZATIONS, COMPENSATION
	CONSULTANTS, AND WRITTEN CONTRACT THIS INFORMATION IS THEN PROVIDED TO THE PRUDENTIAL COMMITTEE FOR THEIR REVIEW AND EVALUATION

Return Reference	Explanation
PART I, LINE 5	DEPENDING ON THE LEVELS OF GIFT REVENUE, BONUSES WERE PAID

Additional Data

(A) Name and Title

PATRICK H FLANNERY

VP OF ADMIN AFFAIRS &

VP FOR FINANCE & TREASURER RICHARD P PEWE

SECRETARY LARRY P ARNN

PRESIDENT

JOHN CERVINI

DAVID M WHALEN

ROBERT NORTON

VP & GENERAL COUNSEL

ROBERT BLACKSTOCK

MATTHEW SCHLIENTZ

VP FOR MARKETING

MATTHEW SPALDING

DN OF EDUC PROGRAMS KIRBY CENTER DOUGLAS JEFFREY

VP FOR EXTERNAL AFFAIRS

PROFESSOR OF LAW

VP FOR INST ADVANCEMENT

PROVOST

(1)

(1)

(i)

(III)

(1)

(1)

(1)

(i)

(1)

(i) Base Compensation

156,709

208,890

479,757

359,465

209,448

232,816

196,319

199,227

256,792

197,353

Software ID:

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

1,000

1,000

486,741

109,700

1,000

16,270

7,690

1,000

1,000

1,000

Software Version:

(B) Breakdown of W-2 and/or 1099-MISC compensation

(ii)

Bonus & incentive

compensation

(iii)

Other reportable

compensation

EIN: 38-1374230 Name: HILLSDALE COLLEGE

24,000

13,900

11,589

(C) Retirement and

other deferred

compensation

16,521

21,978

27,500

27,500

21,941

23,986

20,037

20,713

26,754

20,251

(D) Nontaxable

benefits

22,836

24,719

66,206

30,320

25,166

25,278

21,437

23,640

25,286

17,024

(E) Total of columns

(B)(i)-(D)

197,066

256,587

1,084,204

526,985

271,455

298,350

257,072

244,580

309,832

235,628

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

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	e: To capture the full conte	nt of this docum	ent, please sele	ct landscape mode	(11" x 8.	5") wh	en pi	rinting.			1			
	hedule K	Sur	onlemental l	nformation o	n Tax-F	- - - - -	ot B	onds				OMB No	1545-004	17
(Fo	orm 990)		•	wered "Yes" to Form					criptions,			20	118	
		-	•	, and any additional		in Part	VI.		•				10	
	rtment of the Treasury nal Revenue Service			Attach to Form 990 irs.gov/Form990 for		nformati	ion.						to Public ection	
	e of the organization SDALE COLLEGE									Employ	yer iden	tification nu	mber	
птгг	SDALE COLLEGE									38-13	74230			
Pa	rt I Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Description	on of purpose	(g) De	feased	(h) On behalf of	,) Pool ancing
												issuer		
										Yes	No	Yes N		
Α	MICHIGAN FINANCE AUTHORITY	80-0596186	NONEAVAIL	09-19-2014	10,9	ا 000,000	REFUN	NDING BONI	os		Х			X
Pa	rt II Proceeds					-								
					i	A		E		С			D	
1	Amount of bonds retired													
2	Amount of bonds legally defease													
3	Total proceeds of issue					10,900,	.000							
4	Gross proceeds in reserve funds													
5	Capitalized interest from proceed													
6	Proceeds in refunding escrows .					10,900,	.000							
7_	Issuance costs from proceeds .													
8	Credit enhancement from procee													
9	Working capital expenditures fro													
10	Capital expenditures from proces													
11	Other spent proceeds Other unspent proceeds													
12 13	Year of substantial completion .				2/		_							
13	real of substantial completion :			• •	Yes	014 No	_	Yes	No	Yes	No	Ye		No
14	Were the bonds issued as part of	f a current refunding	issue?		X	110		163	140	163	110	- 10	-	140
15	Were the bonds issued as part of				X								_	
16	Has the final allocation of procee				X								-+	
17	Does the organization maintain a						-						-+	
	proceeds?				X									
Pa	rt III Private Business Use	e		Т								1		
					Yes	A No	-+	Vos		Yes		V-	D	No.
1	Was the organization a partner in financed by tax-exempt bonds?				Tes	X		Yes	No	res	No	Ye	>	No
2	Are there any lease arrangement property?	ts that may result in	private business use			Х								
For	Paperwork Reduction Act Notice				Ca	t No 50	193F				S	chedule K	Form 9	00) 2018

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

organization, or a state or local government

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?...

Rebate not due yet?

hedge with respect to the bond issue?

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

Was the hedge superintegrated?

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

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

d

6

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2018

No

Yes

0 %

0 %

0 %

Х

Χ

Χ

Yes

В

No

C

No

Yes

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

Α

No

Χ

Χ

Yes

Х

Were gross proceeds invested in a guaranteed investment contract

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?

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

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2018

(GIC)?

period?

Part VI

Nο

Yes

No

Yes

Yes

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

Yes No

Yes

Nο

Page 3

No

No

D

Yes

Schedule K (Form 990) 2018

Yes

efile GRAPHI	C print - DO	NOT PROCES	S As	Filed Data -					DL	N: 93	4931	390	15520
Schedule L (Form 990 or 990	I-EZ) ► Com	plete if the org	anizatior	ons with Ir	" on Form 9	90, Part IV, li	nes 2	5a, 2	25b, 26		MB No	1545	-0047
		27, 28a,	28c, or Form 99 ach to Form 990			ЮЬ.				20	1	8	
Department of the Trea	I	⊳ Go t	o <u>www.ii</u>	rs.gov/Form990	for the late	st informatior	۱.				Open	to P	ublic
Internal Revenue Servi Name of the org	anızatıon						Er	nplo	yer ide	ntifica	Ins ation r		
HILLSDALE COLLEC	GE						38	3-137	4230				
				01(c)(3), section 5 n Form 990, Part 1						20 40h			
		ualified person) Relationship be					escript		(d) Cor	rected?
1 (a) Name of all			· .	rganization			tr	ansactı	on	Y	es	No	
											-		
							-						
Part II Loc	ans to and/enplete if the or orted an amou	or From Interganization answent on Form 990, hip (c) Purpose	rested Pered "Yes" Part X, lin (d) Loa	on Form 990-EZ, le 5, 6, or 22 in to or from the ganization?			(g) defa	In ult?	(I Appro boai comm	o, or if h) ved by rd or nittee?	(i)Writ Jreem	ten ent?
			То	From			Yes	No	Yes	No	Yes		No
Total	•	•		•	\$								
Part III Gra	nts or Assis	tance Benefit	tina Inte	erested Perso	 1s.								
		organization an	swered '	'Yes" on Form 9	90, Part IV,	_							
(a) Name of Inter	rested person	(b) Relationship interested perso organizat	on and the		of assistance	(d) Type o	of assi	stanc	e	(e) Pu	rpose (of ass	stance
						1							
For Paperwork Red	luction Act Note	ce, see the Instru	ctions for	 Form 990 or 990-E	Z. C.	at No 50056A		Scl	nedule I	(Form	990 0	990-	EZ) 2018

Complete if the organization	answered "Yes" on Forr	n 990, Part IV, line 28a	a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz rever	f ation's
				Yes	No
(1) THOMAS DUKE	TRUSTEE	·	THOMAS DUKE IS 50% OWNER OF WEST STREET LIVING, LLC PAYMENTS FOR CONSTRUCTION OF TOWNHOUSES NEAR CAMPUS		No
(2) CLEVES DELP	TRUSTEE		INVESTMENT ADVISORY SERVICES FEES		No

		OF TOWNTOODED NEAR CAPITOD	
(2) CLEVES DELP	TRUSTEE	INVESTMENT ADVISORY SERVICES FEES	No

Supplemental Information

Part V

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

Schedule I. (Form 990 or 990-F7) 2018

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493139015520 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number HILLSDALE COLLEGE 38-1374230 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 167,000 APPRAISAL 1 Art-Works of art . . Х Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 26,795,607 HIGH/LOW FMV AVG 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 38,010 APPRAISAL 18 Collectibles Χ 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
	non required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part number of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER LISTED IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED
PART I, LINE 32B	INVESTMENT MANAGERS ASSIST IN THE SELLING OF STOCKS
·	DONATED ITEMS OF BOOKS, HOUSEHOLD ITEMS, COLLECTIBLES, AND VARIOUS MISCELLANY WHICH DO NOT HAVE AN APPRAISED VALUE ARE RECORDED AS ZERO GIFT REVENUE THE DONORS GENERALLY DO NOT REQUEST A TAX-DEDUCTIBLE GIFT RECEIPT OR RECEIVE IN-KIND RECEIPT WITH NO VALUE LISTED
	Schedule M (Form 990) (2018)

efile GRAPH	File GRAPHIC print - DO NOT PROCESS As Filed Data -						
SCHEDUL (Form 990 or EZ)	990-	Supplemental Information to Form 99 Complete to provide information for responses to specif Form 990 or 990-EZ or to provide any additional inf Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest info	ic questions on formation.	OMB No 1545-0047 2018 Open to Public Inspection			
Name Brtherorg HILLSDALE COLLEC 990 Schedule	GE	pplemental Information	38-13742	er identification number 230			
Return Reference		Explanation					
FORM 990, PART III, LINE 1	AND W US LIBI THESE HO WIS DUCAT AL INS NONSE HE IMM TSELF AND JE ELF-GG PARES ITS FAG PUBLIC	DALE COLLEGE IS AN INDEPENDENT INSTITUTION OF HIGHER LEAF /OMEN "GRATEFUL TO GOD FOR THE INESTIMABLE BLESSINGS" RE ERTY AND "BELIEVING THAT THE DIFFUSION OF LEARNING IS ESSI- EBLESSINGS" IT PURSUES THE STATED OBJECT OF THE FOUNDER SH, IRRESPECTIVE OF NATION, COLOR, OR SEX, A LITERARY SCIE! FION" OUTSTANDING AMONG AMERICAN COLLEGES AND TO COMB TRUCTION AS WILL BEST DEVELOP THE MINDS AND IMPROVE THE ECTARIAN CHRISTIAN INSTITUTION, HILLSDALE COLLEGE MAINTAIN MEMORIAL TEACHINGS AND PRACTICES OF THE CHRISTIAN FAITH A TRUSTEE OF OUR WESTERN PHILOSOPHICAL AND THEOLOGICA ERUSALEM, A HERITAGE FINDING ITS CLEAREST EXPRESSION IN TOVERNMENT UNDER LAW BY TRAINING THE YOUNG IN THE LIBER, S STUDENTS TO BECOME LEADERS WORTHY OF THAT LEGACY CULTY, IT CONTRIBUTES TO THE PRESERVATION OF THAT LEGACY CLY DEFENDING THAT LEGACY, IT ENLISTS THE AID OF OTHER FRI US SECURES THE CONDITIONS OF ITS OWN SURVIVAL AND INDEP	ESULTING FROM O ENTIAL TO THE PE RS "TO FURNISH A NTIFIC, [AND] THE INE WITH THIS SU HEARTS OF ITS F NS "BY PRECEPT A THE COLLEGE AL AL INHERITANCE T HE AMERICAN EX AL ARTS, HILLSDA Y FOR FUTURE GI ENDS OF FREE CI	CIVIL AND RELIGIO ERPETUITY OF ALL PERSONS W OLOGICAL E JUCH MORAL AND SOCI PUPILS " AS A AND EXAMPLE" T LSO CONSIDERS I FRACING TO ATHENS PERIMENT OF S ALE COLLEGE PRE THE SCHOLARSHIP OF ENERATIONS BY			

Return Explanation
Reference

LINE 2

FORM 990, PART VI, SECTION A.

Return Explanation

FORM 990, THE BOARD OF TRUSTEES OF THE COLLEGE VOTED TO NOT REVIEW THE 990 THE VICE PRESIDENT FOR F PART VI, INANCIAL AFFAIRS/TREASURER, AS WELL AS THE CONTROLLER, REVIEW THE 990 FOR THE COLLEGE PRIO SECTION B, R TO SUBMISSION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL VOTING MEMBERS OF THE BOARD COMPLETE A CONFLICT OF INTEREST POLICY FORM EACH YEAR, TH EY UPDATE THE FORM IF THERE ARE CHANGES THOSE FORMS ARE KEPT BY THE SECRETARY OF THE BOAR D IF A CONFLICT IS DETERMINED, IT WILL BE BROUGHT TO THE ATTENTION OF THE PRUDENTIAL COMM ITTEE OF THE BOARD OF TRUSTEES BOARD MEMBERS WHO HAVE A CONFLICT OF INTEREST WILL LEAVE T HE ROOM DURING DISCUSSION OF THE MATTER AND ABSTAIN FROM VOTING

Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990,
PART VI,
SECTION B,
LINE 15

THE COMPENSATION OF THE COLLEGE'S PRESIDENT IS DETERMINED BY THE PRUDENTIAL COMMITTEE OF T
HE BOARD OF TRUSTEES ALONG WITH RECOMMENDATION BY EXTERNAL CONSULTANTS AND 990 RESULTS LIS
TED IN THE CHRONICLE OF HIGHER EDUCATION THE COMPENSATION OF THE OTHER OFFICERS OF THE CO
LLEGE AS WELL AS KEY EMPLOYEES ARE RECOMMENDED BY THIRD PARTY CONSULTANTS THIS PROCESS WA
S LAST COMPLETED IN FISCAL YEAR 2019

Return Explanation

LINE 19

FORM 990, THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO PART VI, SECTION C,

990 Schedule O, Supplemental Information **Explanation** Return Reference

FORM 990,	PROFESSIONAL SERVICES, GENERAL PROGRAM SERVICE EXPENSES 1,639,982 MANAGEMENT AND GENERA
PART IX,	L EXPENSES 1,162,758 FUNDRAISING EXPENSES 13,846,337 TOTAL EXPENSES 16,649,077 PROFESSI
LINE 11G	ONAL SERVICES, CONSULTING PROGRAM SERVICE EXPENSES 115,773 MANAGEMENT AND GENERAL EXPENS
	ES 502,260 FUNDRAISING EXPENSES 72,900 TOTAL EXPENSES 690,933 PROFESSIONAL SERVICES, HO
	NORARIUMS PROGRAM SERVICE EXPENSES 592,814 MANAGEMENT AND GENERAL EXPENSES 103,581 FUND
	RAISING EXPENSES 29,037 TOTAL EXPENSES 725,432 OTHER MISC PROFESSIONAL SERVICES PROGRAM
	SERVICE EXPENSES 1,509 MANAGEMENT AND GENERAL EXPENSES 14,228 FUNDRAISING EXPENSES 6,60
	1 TOTAL EXPENSES 22.338
l l	

Explanation Return Reference

FORM 990. CHANGE IN SPLIT INTEREST AGREEMENTS -2,305,924

PART XI.

990 Schedule O, Supplemental Information

LINE 9

Return Explanation
Reference

FORM 990, PART XII, LINE 2C efile GRAPHIC print - DO NOT PROCESS As SCHEDULE R

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

HILLSDALE COLLEGE

As Filed Data -

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.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No 1545-0047

DLN: 93493139015520

2018

Open to Public Inspection

Employer identification number

Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Primary activity Legal domicile (state or foreign country) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Primary activity Primary activity Primary activity Primary activity Legal domicile (state or foreign country) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Primary activity Primary activity Provide Schon, Interpretation or foreign country) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Provide Schon, Primary activity Provide Schon, Primary activity Provide Schon, Primary activity Provide Schon, Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Provide Schon, Primary activity Provide Schon, Provide Schon, Primary activity Provide Schon, P	
Name, address, and EIN (if applicable) of disregarded entity REAL ESTATE HOLDING (1) SAGINAW RIVER HOLDINGS 201 W BIG BEAVER STE 500 TROY, MI 48084 80-10-77917 REAL ESTATE HOLDING MI 0 13 HULLSDALE COLLEGE Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Primary activity Legal domicile (state) MI 0 13 HULLSDALE (OLLEGE We should be cause it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	
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32-0538150 STALSBY CHARITABLE FOUNDATION TRUST PROVIDE SCHOLARSHIPS TO MI 501(C)(3) PF HILLSDALE COLLEGE	
(3)THE JACK E & GRETA W STALSBY CHARITABLE FOUNDATION TRUST PROVIDE SCHOLARSHIPS TO MI 501(C)(3) PF HILLSDALE COLLEGE	ı
33 EAST COLLEGE STREET SUPPORT HILLSDALE COLLEGE INDEPENDENCE FOUNDATION COLLEGE	No
HILLSDALE, MI 49242 94-3458983	İ
(4) DOROTHY D AND JOSEPH A MOLLER FOUNDATION PROVIDE SCHOLARSHIPS TO SUPPORT HILLSDALE COLLEGE STREET PROVIDE SCHOLARSHIPS TO MI 501(C)(3) PF HILLSDALE COLLEGE INDEPENDENCE FOUNDATION	No
HILLSDALE, MI 49242 74-6355685	İ
(5)HC REAL ESTATE HOLDING INC 33 EAST COLLEGE STREET SUPPORTING ORGANIZATION OF HILLSDALE COLLEGE MI 501(C)(3) LINE 12A, I HILLSDALE COLLEGE Yes	1
HILLSDALE, MI 49242 83-2541397	
For Paperwork Peduction Act Notice, see the Instructions for Form 990	(g) ction 512 (b)(13) introlled entity? No No No

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(F Disprop alloca	rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	aging ner?	(k Percen owner	itage
.) 842 2ND AVENUE LLC		REAL ESTATE	NY	HILLSDALE	<u> </u>	94,237		Yes	No No		Yes	No	100.0	000 %
3 EAST COLLEGE STREET ILLSDALE, MI 49242 1-3537380		INVESTMENT	IVI	COLLEGE		94,237			NO		163		100	700 %
Part IV Identification of Related Organ because it had one or more related						ızatıon an:	swered "Yo	es" on	Form	990, Part I	V, lır	ne 34		
(a) Name, address, and EIN of related organization	(b) Primary activity	de (state	(c) Legal omicile or foreigi ountry)		entity (C	(e) pe of entity corp, S corp, or trust)	(f) Share of tol Income	al Sha	(g) are of er year assets	nd-of- Per ow	(h) centaç nershi		Section (13) cor enti	ntrolle

Schedule R (Form 990) 2018			Pag	је З
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		Y	⁄es	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?		П		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a		No
b Gift, grant, or capital contribution to related organization(s)		1b Y	/es	
c Gift, grant, or capital contribution from related organization(s)		1c Y	/es	
d Loans or loan guarantees to or for related organization(s)		1d		No
e Loans or loan guarantees by related organization(s)		1e		No
f Dividends from related organization(s)		1f		No
g Sale of assets to related organization(s)		1 g		No
h Purchase of assets from related organization(s)		1h		No
i Exchange of assets with related organization(s)		1i		No
j Lease of facilities, equipment, or other assets to related organization(s)		1j		No
k Lease of facilities, equipment, or other assets from related organization(s)		1k	+	No
l Performance of services or membership or fundraising solicitations for related organization(s)		11 Y	/es	
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)	i	1n		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		1 q		No
r Other transfer of cash or property to related organization(s)		1r	\dashv	No
s Other transfer of cash or property from related organization(s)		1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction to	thresholds			
(a) (b) (c)	(d)			-

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations? m		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners Share of		Share of Share of total end-of-year	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	pox managing partner? e		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No						
													_					
													_					
	•								•	Schedul	e R (Forn	1 99	0) 2018					

