DLN: 93493131000182 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)

Open to Public Inspection

Department of the Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

For the 2020 calendar year, or tax year beginning 07-01-2020 , and ending 06-30-2021 **C** Name of organization D Employer identification number B Check if applicable: **GOUCHER COLLEGE** ☐ Address change 52-0591613 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1021 Dulaney Valley Road □ Application pending (410) 337-6000 City or town, state or province, country, and ZIP or foreign postal code Baltimore, MD $\,$ 21204 $\,$ G Gross receipts \$ 126,195,222 Name and address of principal officer: H(a) Is this a group return for Kent Deveraux □Yes ☑No subordinates? 1021 Dulaney Valley Road Towson, MD 21204 H(b) Are all subordinates ☐ Yes ☐No included? Tax-exempt status: **☑** 501(c)(3) 4947(a)(1) or If "No," attach a list. (see instructions) 501(c) () ◀ (insert no.) **H(c)** Group exemption number ▶ Website: ► www.goucher.edu L Year of formation: 1885 M State of legal domicile: K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► Summary 1 Briefly describe the organization's mission or most significant activities: Goucher College provides an innovative liberal arts education that prepares students with a broad, humane perspective for a life of inquiry, creativity, and critical and analytical thinking. Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 38 4 37 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 1,391 Total number of volunteers (estimate if necessary) . . . 6 363 7a 254,339 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 39 7b **Prior Year Current Year** 10,189,472 23,481,871 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 79,463,432 59,811,953 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 2,682,013 9,933,474 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,413,311 305,666 93,748,228 93,532,964 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 40,071,471 31,355,534 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 36,842,948 32,169,206 Expenses 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶1,972,748 33,534,282 26,114,723 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 110,448,701 89,639,463 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 . -16,700,473 3,893,501 Net Assets or Fund Balances Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . 394,278,148 461,840,721 130,023,099 21 Total liabilities (Part X, line 26) . 134,676,572 22 Net assets or fund balances. Subtract line 21 from line 20 . 331.817.622 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 2022-05-11 Signature of officer Sign Here Noel Ward AVP for Finance and Controller Type or print name and title

Preparer's signature

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Print/Type preparer's name

Firm's name

Firm's address ▶

Paid

Preparer Use Only

Cat. No. 11282Y

Check | if

self-employed

Firm's EIN ▶

Date

Form 990 (2020)

☐ Yes ☐ No

Б.	990 (2020)					Page 2
Pa	Statement	of Program Ser	vice Accomplis	hments		
	Check if Sched	dule O contains a re	esponse or note to a	any line in this Part III		🗆
1	Briefly describe the o	rganization's missio	on:	•		
and		ninking. The College	e's vision is to beco	me a top-100 national	th a broad, humane perspective liberal arts college known for of bbal community.	
2	the prior Form 990 or	r 990-EZ?		5 /	which were not listed on	☐ Yes ☑ No
3	If "Yes," describe the Did the organization of services?			changes in how it con	ducts, any program	. □Yes ☑No
	If "Yes," describe the	se changes on Sch	edule O.			
4	Describe the organiza	tion's program ser	vice accomplishmer	6	- 1	annual by avances
		d 501(c)(4) organiz	ations are required	to report the amount	of grants and allocations to othe	
	Section 501(c)(3) and	d 501(c)(4) organiz	ations are required	to report the amount ported.		
4a	Section 501(c)(3) and expenses, and revent	d 501(c)(4) organizue, if any, for each	ations are required program service re	to report the amount ported.	of grants and allocations to othe	ers, the total
4a 4b	Section 501(c)(3) and expenses, and revenu	d 501(c)(4) organizue, if any, for each	ations are required program service re	to report the amount ported.	of grants and allocations to othe	ers, the total
	Section 501(c)(3) and expenses, and revenue (Code: See Additional Data (Code:	d 501(c)(4) organizue, if any, for each) (Expenses \$	ations are required program service re 66,841,154	to report the amount ported. including grants of \$	of grants and allocations to other	50,778,742)
4b	Section 501(c)(3) and expenses, and revenue (Code: See Additional Data (Code: See Additional Data	d 501(c)(4) organizue, if any, for each) (Expenses \$) (Expenses \$	ations are required program service re 66,841,154 7,048,928	to report the amount ported. including grants of \$ including grants of \$	of grants and allocations to other 29,981,916) (Revenue \$ 1,373,618) (Revenue \$	50,778,742) 8,128,312)
4b	Section 501(c)(3) and expenses, and revenue (Code: See Additional Data (Code: See Additional Data (Code:	d 501(c)(4) organizue, if any, for each) (Expenses \$) (Expenses \$) (Expenses \$	7,048,928	to report the amount ported. including grants of \$ including grants of \$	of grants and allocations to other 29,981,916) (Revenue \$ 1,373,618) (Revenue \$	50,778,742) 8,128,312)
4b	Section 501(c)(3) and expenses, and revenue (Code: See Additional Data (Code: See Additional Data (Code: See Additional Data	d 501(c)(4) organizue, if any, for each) (Expenses \$) (Expenses \$) (Expenses \$	7,048,928	to report the amount ported. including grants of \$ including grants of \$ including grants of \$	of grants and allocations to other 29,981,916) (Revenue \$ 1,373,618) (Revenue \$	50,778,742) 8,128,312)

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Par	TIV Checklist of Required Schedules		V	N.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete	1	Yes Yes	No
2	Schedule A 🕏	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
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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? <i>If "Yes," complete Schedule D,</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	,		
	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	
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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	1	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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		No
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		No
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	lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	complete Schedule G, Part III	19		No
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	ا مما	1 '	Nο

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

Νo

21

The organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, in (A), line 2? If "Yes," complete Schedule I, Parts I and III	22 t 23 24a 24b	Yes Yes Yes	No
In (A), line 2? If "Yes," complete Schedule I, Parts I and III	23 24a	Yes	No
In (A), line 2? If "Yes," complete Schedule I, Parts I and III	23 24a	Yes	
ormer officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete fule J	23 24a		
st day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and lete Schedule K. If "No," go to line 25a		Yes	
e organization maintain an escrow account other than a refunding escrow at any time during the year ease any tax-exempt bonds?	24h	1 53	
ease any tax-exempt bonds?	- 70		No
o organization act as an "on bohalf of" issuer for bonds outstanding at any time during the year?	24c		No
le organization act as an on behalf of issuer for bonds outstanding at any time during the year!	24d		No
on 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit action with a disqualified person during the year? If "Yes," complete Schedule L, Part	25a		No
organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and he transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete</i> fule L, Part I	25b		No
le organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or forme r, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family per of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
ne organization provide a grant or other assistance to any current or former officer, director, trustee, key byee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete fule L,Part III	27		No
he organization a party to a business transaction with one of the following parties (see Schedule L, Part IV ctions for applicable filing thresholds, conditions, and exceptions):			
rent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> lete Schedule L, Part IV	28a		No
ily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
6 controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," lete Schedule L, Part IV	28c		No
e organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
butions? If "Yes," complete Schedule M	30	Yes	
e organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
e organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete fule N, Part II	32		No
e organization own 100% of an entity disregarded as separate from the organization under Regulations sections 701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
he organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and ', line 1	34	Yes	
e organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
s' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity In the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R. Part V, line 2</i>	35b		
on 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		No
			No
		Yes	
۲, / ۱۵ s	the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and line 1	and organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and line 1	re organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and line 1

	All Form 990 filers are required to complete Schedule O			38	163	
Par	tV Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V	/ .				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3,773			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to ver (gambling) winnings to prize winners?			1c		

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Pai	statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	.,391					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority ove financial account in a foreign country (such as a bank account, securities account, or other financial account)? . If "Yes," enter the name of the foreign country: ►BD	r, a 4a	Yes				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	. 5a		No			
5a b	 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		No ——			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			No No			
	solicit any contributions that were not tax deductible as charitable contributions?						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts we not tax deductible?	ere 6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser provided to the payor?	vices 7a		No			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	file 7 c		No			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a For 1098-C?	m 7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders						
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans						
С	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or exceparachute payment(s) during the year?	15		No			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.	. 16		No			

	,			
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	" 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 38			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 37			
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		No
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?	7 b		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?	8 b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	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	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
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			
17	List the states with which a copy of this Form 990 is required to be filed AK , CO , DC , FL , MA , MD , MI , NH , NJ OR , SC , WA	, NV , I	NY , OH	, ок ,
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: Noel Ward 1021 Dulaney Valley Road Baltimore, MD 21204 (410) 337-6132			

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII . . .

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

	for related							/W 2/1000	(1) 2/1000	organization and
	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
See Additional Data Table										
-										
										Form 990 (2020)

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Part VII Section A. Officers, Direct	1	, Key l	Empl			and	Higl			ted Em		(conti		`
(A) Name and title	(B) Average hours per week (list any hours for related	than o	Position (do not check more than one box, unless person is both an officer and a director/trustee) Rep comp fro orga							(D) (E) Report compersation from renization organize 2/1099- (W-2/2)			(F Estim amount o comper from organizat	ated of other sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MIS			MISC)		relai organiz	ted
See Additional Data Table					_									
					_									
					_					-				
				<u> </u>	\vdash					_				
										+				
1b Sub-Total						<u> </u>		•		'		<u> </u>		
c Total from continuation sheets to Pad Total (add lines 1b and 1c)						>		1,34	9,236			0		166,499
2 Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rec	eived more	than s	\$100,000)			
							,						Yes	No
3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>				•	mplo •	oyee,	or hi •	ghest com	oensate • •	ed emplo	yee on •	3	Yes	
For any individual listed on line 1a, is organization and related organization individual												4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization									on or ir	ndividual	for	5		No
Section B. Independent Contract	, ,											<u> </u>		INO
1 Complete this table for your five higher from the organization. Report comper												mpens	sation	
	(A) and business addre	ess									of services			nsation
Bon Appetit Management Co 1021 Dulaney Valley Road								Fo	ood serv	ice provid	er		1	1,197,563
Baltimore, MD 21204 Whelan Security Mid Atlantic Inc								S	ecurity					779,278
d/b/a GardaWorld Security Services 1699 S Hanley Rd Suite 350 St Louis, MO 63144														- ,
Educators Advancement Group Inc dba K-12 Teach	ers Alliance							Pi	ogram					586,422
20624 Abbey Woods Court North Frank Frankfort, IL 60423														
Ellucian Company LP 4375 Fair Lakes Court								S	oftware	Licensing				329,013
Fairfax, VA 22033 Cambridge Associates LLC								In	vestme	nt Advisin	a			290,600
100 Summer Street										, ۷13111	IJ			
Boston, MA 02110 2 Total number of independent contractor		not lim	ited t	o th	ose	listed	abov	ve) who red	eived	more tha	an \$100,0	00 of		
compensation from the organization > 2	21			_	_								Form 99	0 (2020)

		(2020)								Page 9
Part	VIII				respo	nse or note to any	line in this Part VIII			\square
		Check if Sched	uie	O CONTAINS a	тезро	inse of flote to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1 a	Federated campaig	gns	1	.a	0		Tevenue		312 - 314
unts unts	b	Membership dues		. 1	.b	0				
Grants mounts	С	Fundraising events		. 1	lc	0				
3. ₹	d	Related organization	ons	1	.d	0				
ons, Gift Similar	е	Government grants (contri	ibutions) 1	.е	13,379,690				
Sin	f	All other contributions and similar amounts i	s, gift	schidod I						
tributi Other		above		<u></u>	Lf	10,102,181				
	g	lines 1a - 1f:\$	5 IIICI		.g	810,712				
Cont	h	Total. Add lines 1a	a-1f			•	23,481,871			
						Business Code				
	2a	Undergrad Tuition, Ro	oom 8	& Board		611310	50,778,742	50,778,742	0	0
n e	b	Graduate Tuition, Roo	om &	. Board		611210	8,128,312	0	0	
Program Service Revenue						611310				
ce F	С	Continuing Profession	al Ec	ducation		611310	904,899	904,899	0	0
er vi										
S	d									
ogra	e									
Ě	_						0	0	0	0
		All other program				50.044.050				
	Ь—	Total. Add lines 2 Investment income				59,811,953 hterest and other	1	I	I	
	s	imilar amounts) .				•	1,374,677		<u> </u>	1,356,115
	l	Income from invest	men	nt of tax-exen	npt bo	nd proceeds	0			_
	5	Royalties	_	(i) Real	• •	(ii) Personal	0		1	0
				(I) Real		(II) Personal				
		Gross rents	6a	!	53,077	C	<u>)</u>			
	b	Less: rental expenses	6b	14	47,249	C				
	С	Rental income					-			
	ا	or (loss) Net rental income	6c		94,172		 -94,172		-35,261	-58,911
	`	Net rental income	; OI ((i) Securit		· · · ▶ (ii) Other	1 .,2		33,201	33,511
	7a	Gross amount	_	.,			-			
		from sales of assets other than inventory		34,2	27,241	6,830,911				
							_			
	b	other basis and				2,863,141				
		·	_				-			
	l	Gain or (loss) Net gain or (loss)	7 c		91,027		8,558,797	'	20,015	8,538,782
	ı	Gross income from fu				• • • •	0,330,737		20,013	0,330,702
3u e				0 of						
₹		See Part IV, line 18			8a	0				
Å.	b	Less: direct expen	ses		8b	0	1			
Other Revenue	c	Net income or (los	s) fr	om fundraisii	ng eve	ents 🕨	0		0	0
ō	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19	•		9a	0				
	ı	Less: direct expen			9b	0				
	C	Net income or (los	s) fr	om gaming a	ctiviti	es >	0		0	0
	10a	Gross sales of inve	entor	ry, less						
		returns and allowa			10a	38,422				
	l	Less: cost of good			10 b	15,654] 22,768			22,768
		Net income or (los Miscellaneo			nvente 	Business Code	22,700			22,700
	11	a Summer Camp	45 10	evende		611620	6,100		0	6,100
		····r								
	b	Pilates				611699	251,744	. (251,744	0
	٥	Pool				713940	-721	. (-721	0
	d	All other revenue	•				119,947	(0	119,947
	e	Total. Add lines 1	1a-1	11d		•	377,070			
	12	Total revenue. S	ee ir	nstructions .			93,532,964		254,339	9,984,801
							30,002,004	00,011,000	254,555	Form 990 (2020)

P	art IX Statement of Functional Expenses				rage 10
	Section $501(c)(3)$ and $501(c)(4)$ organizations must c	omplete all columns.	All other organizatio	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX			<u> \square</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	31,355,534	31,355,534		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	734,976	412,462	273,427	49,087
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	26,254,853	19,943,167	5,011,528	1,300,158
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	71,578	33,961	35,807	1,810
9	Other employee benefits	3,158,101	2,252,272	803,048	102,781
10	Payroll taxes	1,949,698	1,480,789	371,249	97,660
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	352,259	63,618	285,627	3,014
c	Accounting	133,077	0	133,077	0
d	Lobbying	16,555	0	16,555	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	904,119	0	904,119	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,234,564	2,453,529	683,220	97,815
12	Advertising and promotion	239,538	56,808	53,888	128,842
13	Office expenses	2,135,168	1,440,212	623,070	71,886
14	Information technology	1,664,711	210,390	1,453,401	920
15	Royalties	0	0	0	0
16	Occupancy	2,772,589	1,427,205	1,331,965	13,419
17	Travel	37,565	35,213	959	1,393
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0	0	0	0
19	Conferences, conventions, and meetings	116,937	97,477	5,879	13,581
20	Interest	3,840,651	3,840,651	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	8,895,734	8,361,990	444,787	88,957
23	Insurance	586,057	0	586,057	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Food Service Cost	945,404	945,404	0	0
	b Study abroad expense	-23,252	-23,252	0	0
	c Food	22,631	9,273	12,158	1,200
,	d Other Administrative	240,416	66,296	173,895	225
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	89,639,463	74,462,999	13,203,716	1,972,748
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).				

Form 990 (2020)

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Assets

Liabilities

Fund Balances

ō 29

Assets 30

23

24

25

26

27

28

31

32

33

11,040,477

1,199,593

1,029,558

5,744,378

1,860,508

171,892,257

174,769,840

83,364,294

3,548,561

7,391,255

7,856,409

3,500,807

0

0

15,635,505

130.023.099

95,430,519

236,387,103

331,817,622

461,840,721

Form 990 (2020)

103.030.378

461,840,721

0

(B) End of year

Beginning of year

3,779,575

1,171,640

1,051,498

2,304,279

1,288,163

179,792,123

140,361,216

55.467.361

3,471,327

5,590,966

6,545,193

5,364,366

105.382.804

394,278,148

0

0 18

0 21

0 22 0 23

0 24

17,384,209

134.676.572

82,463,243

177,138,333

259,601,576

394,278,148

0 5

0 6 0

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Page **11**

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

Cash-non-interest-bearing		•									
Savings and temporary cash	inv	estn	nent	15	_	_	_	_	_	_	_

Pledges and grants receivable, net . . .

305,507,008

133,614,751

Accounts receivable, net . Loans and other payables to any current or former officer, director, trustee,

key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net Inventories for sale or use . . Prepaid expenses and deferred charges . 10a basis. Complete Part VI of Schedule D

10a Land, buildings, and equipment: cost or other b Less: accumulated depreciation

10b

Investments—publicly traded securities .

11 12 13 14 Intangible assets .

Investments—other securities. See Part IV, line 11 . . . Investments—program-related. See Part IV, line 11 . Other assets. See Part IV, line 11 . . .

15 16 **Total assets.** Add lines 1 through 15 (must equal line 33) . .

17 Accounts payable and accrued expenses . 18 Grants payable .

Deferred revenue . . . Tax-exempt bond liabilities . . . Escrow or custodial account liability. Complete Part IV of Schedule D

19 20 21 22 Loans and other payables to any current or former officer, director, trustee, key

employee, creator or founder, substantial contributor, or 35% controlled entity

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

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

Organizations that follow FASB ASC 958, check here <a> \square and

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

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

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

Retained earnings, endowment, accumulated income, or other funds

Unsecured notes and loans payable to unrelated third parties .

Yes

Yes

Yes (2020)

2c

3a

3b

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

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

Audit Act and OMB Circular A-133?

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

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

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

Additional Data

Software ID: 20012124

Software Version: v1.00

EIN: 52-0591613

Name: GOUCHER COLLEGE

Form 990 (2020)

candidates to have.

Form 990, Part III, Line 4a: The College provided an Undergraduate Arts and Sciences education to 1.114 students. Goucher's academic philosophy is focused on 3Rs; relationships, resilience, and reflection, and coursework reflects the core values of a liberal arts education; proficiency in English composition and in a foreign language, solid foundations in history, abstract reasoning, scientific discovery and experimentation, problem-solving, social structures, and environmental sustainability. A highlight of Goucher's unique liberal arts curriculum is the requirement that all undergraduates must study abroad at least once before graduation, making the College among the first in the nation to make such a bold move in globalized education. Goucher strives to educate the whole student and promotes a broad education over narrow career training. This gives graduates a wide range of professional options and increased ability to take advantage of new opportunities in developing fields-and even the capability to change careers. Goucher students master a range of knowledge, including the communication, critical thinking, and quantitative reasoning skills that U.S. employers overwhelmingly say they want job

The College provided a graduate education to 901 students. The Welch Center for Graduate and Professional Studies offers a diverse range of academic programs, including: Master of Arts and Master of Fine Arts degrees in areas such as education, teaching, historic preservation, arts administration, cultural sustainability, digital arts, nonfiction,

management, and environmental sustainability, plus a post-baccalaureate premedical program. These programs are led by industry leaders who help students strengthen their skills, add to their knowledge base, and create professional opportunities wherever their passions lead.

Form 990, Part III, Line 4b:

Form 990, Part III, Line 4c:

The College provided credit and non-credit continuing studies course work for 783 participants. Goucher is home to the College Board's Advanced Placement (AP) Summer

Institute, training teachers in AP courses from across the country and around the world. The Advanced Placement Summer Institute allows teachers to earn graduate credit

while gaining College Board-certified preparation in most subject areas offered through AP programs.

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

and Independent Contractors

Barbara Stob

General Counsel

Michele Y Ewina

Elaine Meyer-Lee

David Grossman

Lynne Lochte

Martin Sweidel

Associate Professor

Provost

VP for Advancement

......

Former VP for Finance and Administration

Former Sr VP for Strategic Initiatives

	any hours	and	a dir	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
Kent Devereaux President	40	Х		х				294,041	0	54,062
Jonathan Lindsay VP for Enrollment Management	40				х			185,591	0	24,705
William Leimbach	40					Х		158,802	0	14,308

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128,686

119,800

121,502

128,185

62,927

16,014

10,883

13,330

17,476

11,838

4,389

3,174

12,334

0

0

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Jonathan Lindsay	40		x		185,591	
VP for Enrollment Management	0		,		100,031	
William Leimbach	40			_	158,802	
VP for Information Technology and Planning				^	158,802	
Scott Sibley	40			_	133,688	
Professor	0			^	133,000	

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

and Independent Contractors

Kara Byrne Bundy-Class of 02

Melinda J Burdette-Class of 72

Henry Cubillan Class of 97

Elizabeth Ellers-Class of 81

Trustee

Trustee

Trustee Richard J Davis

Trustee

Trustee

	any nours	anu	a uii	ecto		ustee,	,	Organization	organizations	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Kimara Ahnert-Class of 91 Trustee	0.00	х						0	0	0	
Patricia Batza-Class of 91 Trustee	5	х						0	0	0	
David I Bavar Trustee	0.00	х						0	0	0	
Robert Lee Bull Jr-Class of 93 Trustee	10.00	Х						0	0	0	

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David I Bavar	5	¥					
Trustee	0.00	^				0	
Robert Lee Bull Jr-Class of 93	10.00					0	
Trustee	0	^					
Michael Bulnes-Class of 18	5	×				(0
Trustee		X					

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

and Independent Contractors

Miriam Brown Hutchins-Class of 73

Miriam E Katowitz-Class of 73

Ruth Shapiro Lenrow-Class of 74

John Edward Nobriga-Class of 2019

John Olszewski Jr-Class of 04

Antonia Pettit - Class of 20

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Trustee

Trustee

Trustee

Trustee

Trustee

Trustee, Chair

	any hours	and	a dir	ecto	or/tr	ustee)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Elaine K Freeman-Class of 58 Trustee	5	X						0	0	0	
Norma Lynn Fox-Class of 76 Trustee	5	X						0	0	0	
Jay Gilman-Class of 2009 Trustee	10	х						0	0	0	
	l	1 '	1			1 !					

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Norma Lymin rox class or 70		Х			0	
Trustee	0					
Jay Gilman-Class of 2009	10	X			0	
Trustee	0	Α.				
Linda K Himmelberger-Class of 74	5	X			0	
Trustee	0	^				

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

and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Stewart Thomsen

Theodore Venetoulis

Jodie H Slaughter-Class of 79

Lisa Lyden Stromberg-Class of 83

Marilyn S Warshawsky-Class of 68

	any hours	and	ı a dir	recto	r/trد	rustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Faye Polayes-Class of 73 Trustee	5	X						0	0	0	
Robert J Proutt Trustee		X						0	0	0	
William E Pugh II-Class of 94 Trustee, Treasurer	10	X						0	0	0	
	5	.[—					

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Robert J Proutt		X			0	
Trustee	0	*			9	
William E Pugh II-Class of 94	10	X			0	
Trustee, Treasurer	0	χ.			9	
Dr Jocelyn Reader-Class of 02	5	×			0	
Trustee	0	^				
Rainh M Segali	10					

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

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Craig Watson Trustee	5	Х						0	0	0
Betsy Weingarten-Class of 88 Trustee	5	х						0	0	0
Toby Wertheim-Class of 68	5	Х						0	0	0

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betsy weingarten-class or 66		Х			0	
Trustee	0	χ.			9	
Toby Wertheim-Class of 68	5	×			0	
Trustee, Secretary	0	^				
Jon Wexler-Class of 94	10	X			0	
Trustee					Ĭ	

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and Independent Contractors

Wendy S White-Class of 72

Margaret M Winslow-Class of 69

Trustee, Vice Chair

Trustee Alex O Wood

Trustee

efil	e GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 93493131000182					
SCI		ULE A	- Dublic 4	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047				
	m 99			rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2020				
		the Treasury	► Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection				
Nam	ll Reven e of th HER CC	nie Service ne organiza	tion				Employer identific	<u> </u>				
)LLEGE					52-0591613					
	rt I		for Public Charity State				See instructions.					
1 ne c	rganiz		a private foundation because onvention of churches, or as	•			(A)(:)					
		•	,			, ,, ,						
2	✓		scribed in section 170(b)(,	, ,						
3		·	or a cooperative hospital serv	-			-					
4		A medical r name, city,	esearch organization operator and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's				
5		-	ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in section 170				
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	λ)(v).					
7			ation that normally receives (0(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the genera	al public described in				
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi).	(Complete Part I	I.)						
9			ural research organization de rant college of agriculture. S					ege or university or a				
10		from activit investment	ation that normally receives: lies related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	ections—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross				
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).					
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a					
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or composite or elect a major	ontrolled by its s	upported organiz	zation(s), typically by					
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ervised or controlled i ation vested in the sar								
С		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its				
d		Type III n functionally	on-functionally integrated integrated. The organization (s). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar					
е			box if the organization receiver Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally				
f	Enter	the number	of supported organizations				<u> </u>	_				
g			ing information about the su	<u> </u>	r '			T				
	(i) N	Name of supp organizatior		(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						
Tota			tion Act Notice, see the I		Cat. No. 11285		Schedule A (Form 9					

17a 10%-facts-and-circumstances test—2020. 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

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

Schedule A (Form 990 or 990-F7) 2020

Р	Support Schedule for												
	(Complete only if you c						er Part II. If						
	the organization fails to qualify under the tests listed below, please complete Part II.) Section A Public Support												
Se	ection A. Public Support						1						
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total						
	(or fiscal year beginning in) ► Gifts, grants, contributions, and												
-	membership fees received. (Do not												
	include any "unusual grants.") .												
2	Gross receipts from admissions,												
	merchandise sold or services												
	performed, or facilities furnished in												
	any activity that is related to the organization's tax-exempt purpose												
3	Gross receipts from activities that are												
•	not an unrelated trade or business												
	under section 513												
4	Tax revenues levied for the												
	organization's benefit and either paid												
5	to or expended on its behalf The value of services or facilities												
3	furnished by a governmental unit to												
	the organization without charge												
6	Total. Add lines 1 through 5												
7a	Amounts included on lines 1, 2, and												
	3 received from disqualified persons												
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.												
С	Add lines 7a and 7b												
8	Public support. (Subtract line 7c												
	from line 6.)												
	ection B. Total Support		1	1	Γ	Π	1						
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total						
9	Amounts from line 6												
10a	Gross income from interest,												
	dividends, payments received on	I											
	securities loans, rents, royalties and	I											
	income from similar sources.												
b	Unrelated business taxable income	I											
	(less section 511 taxes) from businesses acquired after June 30,	I											
	1975.	I											
C	Add lines 10a and 10b.												
11	Net income from unrelated business												
	activities not included in line 10b,	I											
	whether or not the business is	I											
12	regularly carried on.		-				1						
12	Other income. Do not include gain or loss from the sale of capital assets	1											
	(Explain in Part VI.)	1											
13													
	11, and 12.).		<u> </u>	1.6 11 6601 1		F04()(2)	<u> </u>						
14	First 5 years. If the Form 990 is for the	-			•	. , , ,	· —						
	check this box and stop here					<u></u>	<u>▶⊔</u>						
	ection C. Computation of Public S			1 (6)									
15	Public support percentage for 2020 (lin					15							
16	Public support percentage from 2019 S					16							
	ection D. Computation of Investi				.,								
17	Investment income percentage for 202	•	.,	•	• •	17							
18	Investment income percentage from 2	019 Schedule A,	Part III, line 17 .			18							
19a	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more thar	33 1/3%, and lin	e 17 is not						
	more than 33 1/3%, check this box and s	stop here. The o	rganization qualifi	es as a publicly su	ipported organiza	tion	. ▶□						
	33 1/3% support tests—2019. 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	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	▶□						

Page 4

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,							
	describe the designation. If historic and continuing relationship, explain.	1						
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described							
	ction 509(a)(1) or (2).	2						
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and							
	3c below.	3a						
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the							
	determination.							
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?							

	III Section 303(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and			
	3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.				
aeterm	determination.	3b			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.				
	If tes, explain in Part v1 what controls the organization put in place to ensure such use.	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
to the foreig	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c			
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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				

C				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or			
	ervised by or in connection with its supported organizations.	4b		
С	the organization support any foreign supported organization that does not have an IRS determination under sections (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		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the			
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b 5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in 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

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

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

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

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

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

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

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

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

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

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

the organization had excess business holdings).

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

provide detail in Part VI.

answer line 10b below.

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
		e organization accepted a gift or contribution from any of the following persons?			
а		on who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the hing body of a supported organization?	11a		
b	A fami	ily member of a person described in 11a above?	11b		
		o controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
_	VI.	B. Type I Supporting Organizations			
	ection	b. Type I Supporting Organizations		Yes	No
1	appoir descrit activit remov	e officers, directors, trustees, or membership of one or more supported organizations have the power to regularly be or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," be in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's ies. If the organization had more than one supported organization, describe how the powers to appoint and/or be directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and 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		
_					
5	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		163	110
-	each d	of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the rting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection	D. All Type III Supporting Organizations			
				Yes	No
1	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				
	docum	nents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).				
_			2		
3	voice i	ison of the relationship described in line 2 above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at all times 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			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons):		
	a 🗌	The organization satisfied the Activities Test. Complete line 2 below.			
	b 🗆	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c 🗌	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activit	ies Test. Answer lines 2a and 2b below.		Yes	No
	suppor o rgan respor	bstantially all of the organization's activities during the tax year directly further the exempt purposes of the rted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported lizations and explain how these activities directly furthered their exempt purposes, how the organization was sive to those supported organizations, and how the organization determined that these activities constituted	2-		
		entially all of its activities. e activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the	2a		
	organi <i>organi</i>	zation's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the zation's position that its supported organization(s) would have engaged in these activities but for the organization's ement.	2b		
3		of Supported Organizations. Answer lines 3a and 3b below.	20		
	a Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of pported organizations? If "Yes" or "No" provide details in Part VI .	3a		
		e organization exercise a substantial degree of direction over the policies, programs and activities of each of its red organizations? <i>If "Yes," describe in Part VI. the role played by the organization in this regard.</i>	3b		
			30		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 1 instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 3 Add lines 1 through 3 4 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year):

а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
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 0.015 of line 3 (for greater amount, see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)				
6	Multiply line 5 by 0.035	6			
7	7 Recoveries of prior-year distributions				
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				
5	Income tax imposed in prior year			_	
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-integrated Type III supporting organization (see				

instructions) Schedule A (Form 990 or 990-F7) 2020

1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.	7			
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions				
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions) (i) (ii) Underdistributions Pre-2020		ons	(iii) Distributable Amount for 2020	
1 Distributable amount for 2020 from Section C, line 6				
2 Underdictributions if any for years prior to 2020				

	Total allitual allocations, and mice a divough of	_			
8	8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions				
9	Distributable amount for 2020 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount					
	Section E - Distribution Allocations (see instructions) (i) (ii) Underdistributions Pre-2020		ons	(iii) Distributable Amount for 2020	
1	Distributable amount for 2020 from Section C, line 6	ributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.					
3 Excess distributions carryover, if any, to 2020:					
a	From 2015				
b	From 2016				
_	F 2017		1		

10 Line 8 amount divided by Line 9 amount	10		
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through e			

1 Distributable amount for 2020 from Section C, line 6		
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
b From 2016		
c From 2017		
d From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		

i Carryover from 2015 not applied (see

4 Distributions for 2020 from Section D, line 7:

a Applied to underdistributions of prior years

j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

7 Excess distributions carryover to 2021. Add lines

a Excess from 2016. **b** Excess from 2017. . . . **c** Excess from 2018.

e Excess from 2020.

instructions)

3j and 4c. 8 Breakdown of line 7:

d Excess from 2019.

b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.		
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		

Schedule A (Form 990 or 990-EZ) (2020)

Schedule A	dule A (Form 990 or 990-EZ) 2020 Page 8					
Part VI	Section A, lines 1, 2 Part IV, Section D,	ormation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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; 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, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See				
		Facts And Circumstances Test				
<u></u>						
<u>990 Sche</u>	dule A, Suppleme	ental Information				
Ret	turn Reference	Explanation				
Schedule A	chedule A, Part II, Line 10 Includes other revenue					

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493131000182

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

• S • S • S • S • S • S • S • S	Section 501(c) (other than section 5 Section 527 organizations: Complet corganization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form t have filed Form 5768 (election under t have NOT filed Form 5768 (election u n Form 990, Part IV, Line 5 (Proxy Ta s), then	ts I-A and C below 990-EZ, Part VI, Iii section 501(h)): Co inder section 501(h	ne 47 (Lobbying Activitie omplete Part II-A. Do not o n)): Complete Part II-B. Do	es), then complete Part II-B. o not complete Part II-A.
Nar	ne of the organization			Employer ide	entification number
GOL	JCHER COLLEGE				
Descri	t I-A Complete if the orga	nization is exempt under secti	on EO1/a) ar is	52-0591613	ization
1		ization's direct and indirect political ca			
2	, , ,	litures (see instructions)		_	\$
3		paign activities (see instructions)			
		nization is exempt under sections			
1	-	ex incurred by the organization under s			ф
2	, , , , , , , , , , , , , , , , , , ,	ax incurred by organization managers (\$
3	,	tion 4955 tax, did it file Form 4720 for			*
3	•	,	•		☐ Yes ☐ No
4a	Was a correction made?				🗌 Yes 🔲 No
b					
Par	t I-C Complete if the orga	nization is exempt under secti	on 501(c), exc	ept section 501(c)(3) .
1	Enter the amount directly expend	ed by the filing organization for section	n 527 exempt func	tion activities 🕨	\$
2		anization's funds contributed to other			\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and o	on Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			Y Yes No
5	organization made payments. For of political contributions received	employer identification number (EIN) or each organization listed, enter the am that were promptly and directly delive ee (PAC). If additional space is needed	nount paid from the red to a separate p	e filing organization's fund political organization, such	s. Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
4					
5					
5					
or P	aperwork Reduction Act Notice, see	ı the instructions for Form 990 or 990-EZ.	Cat	No. 50084S Schedule C	(Form 990 or 990-EZ) 2020

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2020

ress,	EIN,	

Page 2

١	Check ▶ ☐ if the filing organization belongs expenses, and share of excess lob			in Part IV each a	ffiliated group	member's nam	e, ado	iress, EIN,	
3	Check ▶ ☐ if the filing organization checked	box A and "lir	mited control" p	rovisions apply.					
	Limits on Lobb (The term "expenditures" n	ying Expe	nditures			(a) Filing organization's totals	(b)	Affiliated group totals	
.a	Total lobbying expenditures to influence public	opinion (grass	roots lobbying)			1		
	Total lobbying expenditures to influence a legis						1		
c	Total lobbying expenditures (add lines 1a and 1	1b)							
d	Other exempt purpose expenditures								
е	Total exempt purpose expenditures (add lines :	1c and 1d)							
	Lobbying nontaxable amount. Enter the amoun columns.								
	If the amount on line 1e, column (a) or (b) is: The lob	bying nontax	able amount is:					
	Not over \$500,000	20% of t	he amount on line	1e.					
	Over \$500,000 but not over \$1,000,000	\$100,000	plus 15% of the	excess over \$500,00	0.				
	Over \$1,000,000 but not over \$1,500,000	\$175,000	plus 10% of the	excess over \$1,000,0	000.				
	Over \$1,500,000 but not over \$17,000,000	\$225,000) plus 5% of the ex	cess over \$1,500,00	00.				
	Over \$17,000,000	\$1,000,0							
j	(Some organizations that mad	ar Averagin de a sectior	g Period Und	ler Section 50	1(h) ave to comp	elete all of th		Yes 🗌 No ———	
	columns below. S	See the sep	arate instru	tions for lines	2a throug	1 2f.)			
	Lobbying	Expenditur	es During 4-	Year Averagir	ng Period				
	Calendar year (or fiscal year beginning in)		(a) 2017	(b) 2018	(c) 2019	(d) 2020	,	(e) Total	
2a	Lobbying nontaxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	: Total lobbying expenditures						\perp		
d	Grassroots nontaxable amount						\perp		
e	Grassroots ceiling amount								

	edule C (Form 990 or 990-EZ) 20:					P	age 3
Pa		organization is exempt under section 501(c)(3) and has NOT fition under section 501(h)).	ied 				
For each "Yes" response on lines 1a thro activity.		hrough 1i below, provide in Part IV a detailed description of the lobbying	(;	(b)			
		modyn i below, provide in rare iv a decaned description of the lossying	Yes	No	Δ	mou	nt
1		rganization attempt to influence foreign, national, state or local legislation, nce public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		Yes				
b	Paid staff or management (incl	ude compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media advertisements?			No			
d	Mailings to members, legislator	s, or the public?		No			
e	· ·	oadcast statements?		No			
f	-	or lobbying purposes?		No			
g		their staffs, government officials, or a legislative body?	Yes				4,732
h		ars, conventions, speeches, lectures, or any similar means?		No			
i			Yes				11,823
j n-	<u> </u>	a bland and a significant and a significant in a satisfact FO1/2/2/2	ľ	N			16,555
2a L		e the organization to be not described in section 501(c)(3)?		No			
b	•	ny tax incurred by organization managers under section 4912					
q	·	ed a section 4912 tax, did it file Form 4720 for this year?					
		organization is exempt under section 501(c)(4), section 501(c)	(5) 0	r secti	On.		
	501(c)(6).	organization is exempt under section sortes, section sortes	(3), 0	. 3000	U		
	1,7,7			_		Yes	No
1	, ,	more) dues received nondeductible by members?			1		
2		in-house lobbying expenditures of \$2,000 or less?			2		
3		arry over lobbying and political expenditures from the prior year?			3		
Pai	and if either (a)	organization is exempt under section 501(c)(4), section 501(c) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part				01(0	:)(6)
1	answered "Yes."	amounts from members	1				
2	Section 162(e) nondeductible le	obbying and political expenditures (do not include amounts of political	-				
_	expenses for which the sect		2a				
a b			2b				
c	,		2c				
3		section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3				
4		nount on line 2c exceeds the amount on line 3, what portion of the excess does					
		over to the reasonable estimate of nondeductible lobbying and political	ı				
_		d a district and a district of the bound of the second of	5				
5		d political expenditures (see instructions)	5				
	art IV Supplemental In						
	·	⁻ Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); lso, complete this part for any additional information.	Part II-	A, lines	1 and	d 2 (s	ee ——
	Return Reference	Explanation					
Sche	edule C, Part II-B, Line 1	Members of Goucher's senior management team and a select number of stud Independent Higher Education Day. The event was held virtually and sponsor Independent College and University Associate (MICUA), of which Goucher is a students and administrators from across the state to Maryland's capital for a officials. In addition, members of Goucher's staff met with elected officials or associated compensation for these activities is reported on lines 1g. The orgato the National Association of Independent Colleges and Universities (NAICU) Independent Colleges and Universities Association (MICUA), both of which en NAICU and MICUA set aside a portion of the dues paid to engage in non-deductive expenditures. Accordingly, the College has reported an equal amount on line	ed by the member of the member	ne Maryl er, and and vis of the C paid m the Mar lobbyin	land broug its wi ollege embe yland g acti	iht th ele e. The rship vity.	cted dues
		Schedule		m 990	or 99	OEZ)	2020

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

DLN: 93493131000182

OMB No. 1545-0047

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.

Internal Revenue Service

(Form 990)

Open to Public ► Attach to Form 990. Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** GOUCHER COLLEGE 52-0591613 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 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 FASB ASC 958 relating to these items:

 ${f c}$ Leasehold improvements

d Equipment .

e Other .

		(101111 990) 2020				! =			011	· · · · · · · · · · · · · · · · · · ·		rage Z
	3111		aintaining Collection								•	
3	items	g the organization's acq s (check all that apply):		other record		any of	the fo	llowing th	at are a s	ignificant (use of its o	collection
а	✓	Public exhibition			d	✓	Loan	or excha	nge progr	ams		
b	✓	Scholarly research			e	✓	Othe	rEducati	on			
C	✓	Preservation for future	generations									
4	Provi Part :	de a description of the oxi	organization's collection	s and explair	n how the	y furth	er the	e organiza	ntion's exe	mpt purpo	se in	
5		ng the year, did the organs to be sold to raise fur									☐ Yes	☑ No
Pai	t IV		odial Arrangement ganization answered		orm 990	, Part	IV, li	ne 9, or	reported	l an amou	unt on Fo	orm 990, Part
1a		e organization an agent ded on Form 990, Part)									☐ Yes	□ No
b	If "Y€	es," explain the arrange	ment in Part XIII and c	omplete the	following	table:		Γ		A	mount	
С	Beair	nning balance							1c			
d	_	ions during the year .							1d			
е		butions during the year							1e			
f		ng balance							1f			
2a	Did tl	he organization include	an amount on Form 99	0, Part X, line	e 21, for	escrow	or cu	- stodial ac	count liab	ility?	☐ Yes	 □ No
b	If "Ye	es," explain the arrange	ment in Part XIII. Chec	k here if the	explanati	on has	been	provided	in Part XI	ш	П	
	rt V	Endowment Fund						p				
			ganization answered	"Yes" on Fo	orm 990	, Part	IV, li	ne 10.				
		'		Current year		rior yea			ars back (d) Three ye	ars back (e) Four years back
1 a	Beginn	ning of year balance .		191,378,000) 2	203,430	,000	214	,921,000	209,	,577,000	201,482,000
b	Contrib	outions		73,947,000)	1,330	,000	1	,330,000		845,000	785,000
С	Net inv	vestment earnings, gair	is, and losses	5,993,000)	7,470	,000	7	7,470,000	16,	,871,000	19,455,000
d	Grants	or scholarships		4,842,000)	4,547	,000	4	,785,000	4,	,785,000	4,404,000
		expenditures for facilitie	es	7,135,000		15,744	,000	15	5,744,000	7,	,587,000	7,741,000
f	Admin	istrative expenses .		()		0		0		0	0
g	End of	year balance		259,341,000) 1	191,939	,000	203	3,192,000	214,	,921,000	209,577,000
2 a		de the estimated perceid designated or quasi-e	-		ce (line 1g	g, colur	nn (a)) held as	:			
b	Perm	anent endowment ►	36 %									
_		******	.2 %									
С		***************************************		al 1000/s								
За	Are t	percentages on lines 2a, here endowment funds nization by:			ation that	are he	eld an	d adminis	tered for	the		Yes No
	_	nrelated organizations									3a(
	` '	Related organizations									3a(
b		es" on 3a(ii), are the rel		d as required	d on Sche	dule Rî	? .	: :			31	-
4	Desci	ribe in Part XIII the inte	nded uses of the organ	ization's end	owment f	unds.						
Pai	t VI	Land, Buildings,	and Equipment. ganization answered	"Yes" on Fo	orm 990	Part	T\/ i	ne 11a	See Forr	n 990 Pa	ırt X line	10
	Descr	iption of property	(a) Cost or other basi (investment)		st or other				mulated de) Book value
12	Land			0		14.67	4,905					14,674,905
		ngs		0		259,18			10	08,563,343		150,623,646
_		1		1				1		· · · · · · · · · · · · · · · · · · ·		, ,

0

0

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

29,208,841

2,436,273

4,157,433

2,436,273

25,051,408

Part VII	Complete if the organization answered "Yes" on F	orm 990. Part IV. line 1	1b.See Form 990, P	art X. line 12.
	(a) Description of security or category	(b) Book value	(c) Method	l of valuation:
	(including name of security)			year market value
(1) Financia (2) Closely-l	I derivatives held equity interests	0		
(3) Other				E
(A) Hedge Fu		25,510,334		F
(B) Limited F	Partnership Interest	57,853,960		F
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Columi Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.	83,364,294		
reileviii	Complete if the organization answered 'Yes' on F	orm 990, Part IV, line 1	.1c. See Form 990, F	Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year marke
				value
(1)				
(2)				
(3)				
(4)				
(5)				
(6) ————————————————————————————————————				
(7)				
(8)				
(9)				
(10)				
	4)			
Total. (Columnia Part IX	on (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		•	
	Complete if the organization answered 'Yes' on Fo		1d. See Form 990, Parl	
(1)	(a) Description	1		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15.)			b
Part X	Other Liabilities.			<u> </u>
	Complete if the organization answered 'Yes' on Fo		e or 11t.See Form 9 	990, Part X, line 25. (b) Book
1. (1) Federal i		ability		value 0
	income taxes ng term liabilies			6,132,623
-	n under interest rate swap agreement			4,429,705
	ole advances from U.S. government			1,268,208
	tirement Obligation and deferred revenues under split interest arrangements			2,098,708 1,706,261
(6) Payables	and deferred revenues under split interest affangements			1,700,201
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col.(B) line 25.)			15,635,505
	or uncertain tax positions. In Part XIII, provide the text of a positions under FIN 48 (ASC 740). Check here if the tex			
	- F Silver Fait 10 (NOC 7-10), Check here it the tex	_ s. ss received has beelf	F. C. GOG III TOTO ATTI	_

2

3

4

b

C 5

1

2

C

d

3

4

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2020

Page 4

36,716,834

93,571,166

-38,202

93,532,964

58,071,000

37,247

58,033,753

31,605,710

89.639.463

Schedule D (Form 990) 2020

e	Add lines 2a through 2d			2e	
d	Other (Describe in Part XIII.)	2d	-29,970,583		
c	Recoveries of prior year grants	2c	0		
				I	i

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

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

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

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

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

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

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

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

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

Supplemental Information

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

Total expenses and losses per audited financial statements

Donated services and use of facilities . . .

Subtract line 2e from line 1

Add lines 4a and 4b

Donated services and use of facilities .

Other (Describe in Part XIII.) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Return Reference

Prior year adjustments

4a

4b

2a 2b

2c

2d

4a

4b

Explanation

66.687.417

-38,202

0

2e

3

4c

37,247

31.605.710

4c

chedule D (Form 990) 2020	Page 5
Part XIII Supplemental Info	rmation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2020

Additional Data



Software Version: v1.00 **EIN:** 52-0591613 Name: GOUCHER COLLEGE

Software ID: 20012124

The College did not disclose its collection and related policies in its financial statements.

Supplemental Information Return Reference

Schedule D, Part III, Line 1

Explanation

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 4	The College art collection is comprised of works of fine art, including two-dimensional an d three-dimensional art objects and miscellaneous objects of value. The art collection is owned by the College. Art objects are housed in buildings or on the campus grounds of the College, or are loaned by the College to other institutions. The collection includes sculp tures, prints, photographs, drawings, paintings and other artistic objects. The collection is used for scholarly research, education and public exhibition in furtherance of the exe mpt purposes of the College.

Supplemental Information		
Return Reference	Explanation	
	The endowment of Goucher College generated income to support the College both generally an d in specific ways designated by our generous donors. Income, allocated across approximate ly 730 endowments, supports both merit and need-based scholarships of undergraduate and graduate students; fellowships; internships; professorships; lectureships; the College library; and the College's general operating budget.	

Sι

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	The College is qualified as a not for profit organization under section 501(c)(3) of the I nternal Revenue Code, as amended. Accordingly, the College is not subject to income taxes except to the extent it has taxable income from activities that are not related to its exe mpt purpose. No provision for income taxes was required for 2021 or 2020. Management has a nalyzed the tax positions taken by the College and has concluded that as of June 30, 2021 and 2020, there are no uncertain positions taken or expected to be taken that would requir e recognition or disclosure in the accompanying financial statements. The College is subject to routine audits by taxing jurisdictions; however, there are currently no audits for a

ny tax period in progress.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2d	Schedule D, Part XI, Line 2d - Includes student financial aid of (\$30,346,052), KTA Revenu e Share of (\$586,422), cost of study abroad of \$23,252, investment fees (\$904,119), unreal ized gain on swap agreement of \$1,635,128, net of reimbursements of expense, reclassified

from revenue to expense of \$125,556, revenue and other contra revenue of \$82,072.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4b	Schedule D, Part XI, Line 4b - Expenses presented net within revenue, of (\$38,202).

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2d	Schedule D, Part XII, Line 2d - Expenses presented net within revenue, of \$37,247.

supplemental Information	
Return Reference	Explanation
	Schedule D, Part XII, Line 4b - Includes student financial aid of \$30,346,052, KTA revenue share of \$586,422, investment fees of \$904,119, less cost of study abroad of \$23,252, les

s certain expenses presented net within revenue, of \$125,556, and other of \$82,072.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE E**

Schools

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

▶ Go to www.irs.gov/Form990EZ for the latest information.

DLN: 93493131000182 OMB No. 1545-0047

Inspection

Employer identification number

Open to Public

Namel&thelo8ganization
GOUCHER COLLEGE

Department of the Treasury

(Form 990 or 990-

EZ)

► Attach to Form 990 or Form 990-EZ.

52-0591613 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 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 on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4с 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: 5a Νo **b** Admissions policies? 5b Nο c Employment of faculty or administrative staff? . . 5c No d Scholarships or other financial assistance? . . 5d Νo e Educational policies? . 5e Νo 5f f Use of facilities? . . No g Athletic programs? . 5g Νo **h** Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 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. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2020)

Schedule E (Form 990 or 990EZ) (2020)	Page 2
Part II Supplemental Information. Provide any other additional information. See inst	e the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide structions.
Return Reference	Explanation
Schedule E, Part I, Line 3	The racially nondiscriminatory policy is published in the College's academic catalog, student handbook and on the website.
Schedule E, Part I, Line 6	The College participates in the following federal programs which provide financial aid to undergraduate and graduate students: Pell Grant Program, Supplemental Educational Opportunity Grant Program, Federal Work Study Program, Perkins Loan Program, Federal Direct Student Loans, and Teacher Education Assistance for College and Higher Education. The College also received grants from the Maryland State Department of Education, Maryland Higher Education Commission and participates in Maryland Sellinger Program. In addition, the College was awarded sponsored research and other program grants funded by National Institute of Health, National Endowment for the Humanities, and the US Department of Education
Schedule E, Part I, Line 6a	The College participates in the following federal programs which provide financial aid to undergraduate and graduate students: Pell Grant Program, Supplemental Educational Opportunity Grant Program, Federal Work Study Program, Perkins Loan Program, Federal Direct Student Loans, and Teacher Education Assistance for College and Higher Education. The College also received grants from the Maryland State Department of Education, Maryland Higher Education Commission and participates in the Maryland Sellinger Program. In addition, the College was awarded sponsored research and other program grants funded by the National Institute of Health, National Endowment for the Humanities, and the US

Department of Education.

SCHEDULE F State		ement of A	Activities (Outside the Uni	ited St	tates	OMB No. 1545-0047	
(Form 990) Department of the Treasury	► Comp	ellete if the organization answered "Yes" to Form 990, Part IV, line 14b, Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information				5, or 16.	2020 Open to Public Inspection	
Internal Revenue Service Name of the organization					Т	Employer iden	tification number	
GOUCHER COLLEGE						52-0591613		
	nformation Part IV, line		Outside the U	Jnited States. Comple	te if the	organization a	nswered "Yes" on	
other assistance, t to award the grant	he grantees' s or assistan • Describe in	eligibility for th	e grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria u	sed 	✓ Yes □	
		ng Part I, line 3 t	able 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		(e) If active program spec	ity listed in (d) is a service, describe cific type of s) in the region	for and investments in the region	
See Add'l Data								
3a Sub-total b Total from continuati								
ruici			0				6,047,	

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

90, Part IV, line 16	swered "Yes" on Form 9	tne organization ans	ea States. Complete if				
				eded.	<u>tional space is ne</u>	duplicated if addit	Part III can be d
(h) Method of valuation (book, FMV, appraisal, other	(g) Description of noncash assistance	(f) Amount of noncash assistance	(e) Manner of cash disbursement	(d) Amount of cash grant	(c) Number of recipients	(b) Region	Type of grant or assistance

Sched	dule F (Form 990) 2020		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

Schedule F (Form 990) 2020 Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting me 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 the information. See instructions. 290 Schedule F, Supplemental Information					
Prov amo met	de the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; ints of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting od); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide				
990 Schedule	, Supplemental Information				
Return Referenc	Explanation				

Schedule F, Part I, The College, through its investment in various alternative assets, has transfers to foreign corporations during the year. The College will file Line 1 Forms 926 where transfers to foreign corporations exceed \$100,000.

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2	The College provides institutional grant funds limited to need-based and merit-based assistance to its students while they participate in study abroad experiences. In general, grants are credited into the student's tuition account. Financial need is determined by subtracting the expected family contribution - as calculated on the Free Application of Federal Student Aid (FAFSA) - from the student's total cost of attendance. Financial aid is awarded for one year only and must be renewed annually. Need-based aid is renewed to continuing students who demonstrate need and who are making satisfactory progress toward their degrees. Institutional merit-based scholarship requirements vary depending on the award. Compliance with those requirements is also overseen by the Office of Student Financial Aid, in cooperation with the Office of Global Education. However, none of our students traveled abroad, therefore, foreign aid is \$0.

990 Schedule F, Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
	The College, through its investment in various alternative assets and common collective trusts, was a direct or indirect shareholder of a passive foreign investment company or qualifying electing fund; however, the College is not required to file Form 8621.

990 Schedule F, Supplemental Information

Return Reference	Explanation	l
Schedule F, Part IV, Line 5	The College, through its investment in various alternative assets, has ownership in foreign partnerships. However, the College owned less than 10% of any single foreign partnership and it did not directly or indirectly transfer greater than \$100,000 to any foreign partnership. Accordingly, the	l

Additional Data

Central America and the

Caribbean

Software ID: 20012124 **Software Version:** v1.00

EIN: 52-0591613
Name: GOUCHER COLLEGE

Educational supplies

1,463

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	0	0	Investments	Investments	6,029,067

0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific 0 | Program Services 5.749 Educational supplies Europe (including Iceland and 0 Program Services Educational supplies 7,988 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of region agents in fundraising, program service(s) in region region services, grants to recipients located in the reaion) 3.469 North America (including 0 Program Services Educational supplies Canada and Mexico, but not the United States)

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990.

OMB No. 1545-0047

Open to Public

DLN: 93493131000182

reasury nternal Revenue Service		► Go to <u>wи</u>	w.irs.gov/Form990 for	the latest information	on.		Inspection
lame of the organization						Employer identifi	cation number
GOUCHER COLLEGE						52-0591613	
	ormation on Grants						
 Does the organization the selection criteria u 	maintain records to sub used to award the grants	stantiate the amount of	the grants or assistance,	the grantees' eligibility	for the grants or assistanc	e, and	☑ Yes ☐ No
			se of grant funds in the U				☑ Yes ☐ No
Part III Grants and Ot	her Assistance to Don nore than \$5,000. Part I	nestic Organizations a I can be duplicated if ad	and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, lin	e 21, for any recipient
(a) Name and address of organization or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
2 Enter total number of	section 501(c)(3) and g	overnment organization	s listed in the line 1 table			> _	
3 Enter total number of	other organizations liste	ed in the line 1 table .				. ►	

(Form 990)

Undergraduate and graduate grants, scholarships, and discounts

Prizes, awards, internships, and fellowships

(1)

(2)

(7)

Schedule I (Form 990) 2020

Explanation

Part III can be duplicated if additional space is needed.

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

(c) Amount of

cash grant

30,368,806

248,196

(b) Number of

recipients

1341

201

requirements is also overseen by the Office of Student Financial Aid.

Schedule I, Part I, Line 2 - Goucher College's institutional grant funds are limited to need-based and merit-based financial assistance for attendance at the College.

Goucher College's comprehensive program of need-based and merit-based financial assistance is managed by the Office of Student Financial Aid. Financial need is determined by subtracting the Expected Family Contribution - as calculated on the Free Application for Federal Student Aid (FAFSA) from the student's total cost of attendance. Financial aid is awarded for one year only and must be renewed annually. Need-based aid is renewed to continuing students who demonstrate need and who are making satisfactory progress toward their degrees. Institutional merit-based scholarship requirements vary depending on the award. Compliance with those

(d) Amount of

noncash assistance

(e) Method of valuation (book,

FMV, appraisal, other)

Page 2

(f) Description of noncash assistance

Schedule I (Form 990) 2020

(3) CRRSAA Grant 398 738.532 (3) (4) (5)

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

Schedule I, Part I, Line 2

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 93493	13100	0182				
Sch	nedule J	C	ompensat	ion Information	OMB N	o. 1545-	0047				
(Forr	m 990)		Compensa ganization answ	Trustees, Key Employees, and Highest ated Employees vered "Yes" on Form 990, Part IV, line 2 n to Form 990.	2	2020					
•	Department of the Treasury										
Nar	ne of the organiza	ı ation		Emplo	oyer identification	spection number					
GOL	JCHER COLLEGE			52-059	91613						
Pa	rt I Questi	ons Regarding Compensa	ition	1 2 2 2							
						Yes	No				
1a				f the following to or for a person listed on Fo y relevant information regarding these item							
	First-class	s or charter travel	led	Housing allowance or residence for persona	al use						
		companions		Payments for business use of personal resi							
		nification and gross-up payment		Health or social club dues or initiation fees							
	☐ Discretion	nary spending account	\checkmark	Personal services (e.g., maid, chauffeur, cl	nef)						
b				follow a written policy regarding payment o ve? If "No," complete Part III to explain	r 1 1	Yes					
2				or allowing expenses incurred by all	2	Yes					
	directors, truste	es, officers, including the CEO/	Executive Directo	r, regarding the items checked on Line 1a? .							
3				ed to establish the compensation of the							
				not check any boxes for methods CEO/Executive Director, but explain in Part :	III.						
	, 	-									
		ation committee	□	Written employment contract							
		ent compensation consultant of other organizations		Compensation survey or study Approval by the board or compensation con	mmittaa						
	L FOITH 990	or other organizations	<u> </u>	Approval by the board of compensation con	illilittee						
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the filing or	ganization or a						
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .		. 4a	Yes					
b	Participate in, o	r receive payment from, a supp	lemental nonqual	ified retirement plan?	41	,	No				
c	•			nsation arrangement?	40	:	No				
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	plicable amounts for each item in Part III.							
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9							
5	, ,,,		, ,	the organization pay or accrue any							
	compensation c	ontingent on the revenues of:		, ,							
а	The organization	n?			5a		No				
b					5t	,	No				
	If "Yes," on line	5a or 5b, describe in Part III.									
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any							
а	The organization	n?			68		No				
b					. 61)	No				
	•	6a or 6b, describe in Part III.									
7	payments not d	escribed in lines 5 and 6? If "Ye	s," describe in Pa	the organization provide any nonfixed rt III	7		No				
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describe			No				
9	If "Yes" on line	8, did the organization also follo	ow the rebuttable	presumption procedure described in Regula	tions section		No				
For F		iction Act Notice, see the Ins			Schedule J (Fo		2020				

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown	n of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
L Kent Devereaux	(i)	292,694 0		1,346	4,875	49,187	348,102	0
Kent Devereaux resident Jonathan Lindsay P for Enrollment lanagement William Leimbach P for Information	(ii)	0	0	0	0	0	0	0
2 Jonathan Lindsay /P for Enrollment	(i)	184,502	0	1,089	2,188	22,518	210,297	0
1anagement	(ii)	0	0	0	0	0	0	0
William Leimbach /P for Information	(i)	157,555	0	1,247	4,219	10,089	173,110	0
echnology and Planning	(ii)	0	0	0	0	0	0	0
	$\perp \perp$							
								<u> </u>
	$\perp \perp$							
		·		1				

Schedule J (Form 990) 2020									
Part III Supplemental Information									
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.									
Return Reference Explanation									
·	A residence and limited personal services are provided for the convenience of the President of the College. A housing allowance of \$26,000 is included in the President's non-taxable compensation. In addition, the College provides a de minims gross-up payment to senior staff to cover the tax impact of long-term disability insurance.								
Schedule J, Part I, Line 4	Lynne Lochte, the former VP for Finance and Administration, received \$33,408 in severance during the calendar year.								

Schedule 1 (Form 990) 2020

Are there any lease arrangements that may result in private business use of bond-financed

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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

DLN: 93493131000182

2020

OMB No. 1545-0047

Open to Public

Schedule K (Form 990) 2020

▶ Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Inspection

	e of the organization								Employ	er ident	tificatio	n numbe	r			
GOL	CHER COLLEGE										52-059	91613				
Pa	rt I Bond Issues															
	(a) Issuer name (b) Issuer EIN (c) CUSIP #		(c) CUSIP # (d) Date iss	sued	(e) Issue price		(f) Description of purpose		;	(g) De	feased	(h) On behalf of issuer			Pool ncing	
											Yes	No	Yes	No	Yes	No
A	MD Health and Higher Educational Facilities Authority Series 2012A	52-0936091	574218KW2 08-30-201	12	22,3	315,289		nd Series 200 nally issued <i>A</i>				Х		Х		Х
В	MD Health and Higher Educational Facilities Authority Goucher College Issue Series 2017A	52-0936091	5742182H5 06-20-201	17	60,5	65,232		nd MHHEFA S C bonds, dat		and		Х		Х		Х
С	MD Health and Higher Education Authority Goucher Issue 2017B	52-0936091	06-20-201	17	30,0	000,000	of ce	To finance and refinance the cost of certain capital projects to enhance residential life on campu				Х		Х		Х
Pa	rt III Proceeds			•						•						
					ı	A		E	1		С				D	
1						1,200	0,000		1,860,000			4,608,	.000			
2							0		0				0			
3					22,315,289 60,565,232			30,000,000								
4	Gross proceeds in reserve funds				1,423,732		1,122,416				0					
5	Capitalized interest from procee	ds				0 0			0							
6	Proceeds in refunding escrows .						0 0			0						
7	Issuance costs from proceeds .					87	7,289 1,068,599					0				
8	Credit enhancement from procee	eds					0 0		0							
9	Working capital expenditures fro	om proceeds					0 0		0							
10	Capital expenditures from proce	eds					0 0			0 30,000,000						
11	Other spent proceeds					22,228	8,000 60,488,631			1 0						
12	Other unspent proceeds						0						0			
13	Year of substantial completion .				2012 2017		17	2019								
					Yes	No	,	Yes	No	Ye	es	No		Yes		No
14	Were the bonds issued as part o bonds (or, if issued prior to 2019	of a current refunding 9, a current refundin	g issue of tax-exempt g issue)?			Х		Х				Х				
15		9, an advance refund	ding issue)?		Х				X			Х				
16	Has the final allocation of proceed	eds been made? .			Χ			Х		Х						
17	Does the organization maintain proceeds?		records to support the final allocation	ion of	Х			Х		Х	(
Pa	rt Ⅲ Private Business Us															
						A		E			ç				D	
1	Was the organization a partner i financed by tax-exempt bonds?		member of an LLC, which owned p	property	Yes	No X		Yes	No X	Ye	es	No X		Yes		No
			multiple business use of bond finance			1							-+		+	

Cat. No. 50193E

6

8a

Part IV

b

C

Arbitrage

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

hedge with respect to the bond issue?

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

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

Page 2

0 %

0 %

0 %

В

Yes

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Νo

Χ

Χ

Χ

Χ

Χ

0 %

0 %

0 %

Χ

No

Χ

Χ

Χ

Х

C

Χ

Х

Yes

Χ

Χ

0 %

0 %

0 %

D

Schedule K (Form 990) 2020

No

Yes

Χ

Χ

b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		Х		
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х		X	
4	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside							

Α

Yes

Χ

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

Page 3

No

D

D

Nο

Yes

Yes

В

No

Explanation

Schedule K, Part IV, Line 2c-08/30/2012 22,315,289 MD Health and Higher Educational Facilities Autho - BNY Mellon prepared the Goucher College MHHEFA Series

Yes

Χ

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

2012A rebate calculation as 7/1/17 and determined no rebate was due.

No

Yes

Yes

Nο

No

Yes

Nο

Yes

Schedule K (Form 990) 2020

(GIC)?

period?

Part V

Part VI

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Term of GIC

the GIC satisfied?

requirements of section 148? . . .

Return Reference

08/30/2012 22,315,289 MD Health and

Higher Educational Facilities Autho

Schedule K, Part IV, Line 2c-

DLN: 93493131000182 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶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** GOUCHER COLLEGE 52-0591613 Part I **Types of Property** (a) (b) (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 1 Art—Works of art . . Χ 0 policy 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 810,712 NYSE 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 . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► (Horse) 0 policy 26 Other ▶ (______) 27 Other ▶ (______) 28 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 isn't 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 Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2020) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2020)	Page 2									
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.										
Return Reference	Explanation									
Schedule M, Part I	Schedule M, Part I - The number reported in column (b) represents the number of items contributed, except for line 9 - securities where all securities donated on one day by the same donor was counted as one contribution.									
Schedule M, Part I, Line 33	Schedule M, Part I, Line 33 - It is the policy of the College to record works of art, books, horses and other non cash gifts received at a book value of zero.									
	Schedule M (Form 990) (2020)									

efile GRAPH	IC print - DO NOT PROCESS	-	DLN: 93493131000182
SCHEDUL (Form 990 or EZ)	990- Complete to provide information Form 990 or 990-EZ or to pr Attach to For	ion to Form 990 or 990-E2 for responses to specific questions on ovide any additional information. orm 990 or 990-EZ. 0990 for the latest information.	OMB No. 1545-0047 2020 Open to Public Inspection
Mannel Betherofe GOUCHER COLLEC	amigation	Employ 52-0591	er identification number 613
Return Reference		Explanation	
Form 990, Part VI, Section B, Line 11b	After review by the Audit Committee, the complete Forr electronically to all members of the Board of Trustees for lasting 7 days. At the conclusion of the periods of commudit Committee of the Board of Trustees was convened he Form 990 and 990T. The Forms were approved for rd of Trustees on May 9, 2022.	or a period of review and comment nent and review, a meeting of the A I to review and revise (if necessary) t	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	Every trustee, officer and key employee is provided a copy of the Conflict-of-Interest Pol icy annually and required to complete an annual disclosure form reporting any known materi al financial or other interest of the trustee, officer or key employee or a family member in any transaction or business relationship the College has or is considering, including m aterial financial or other interests in any outside entity involved in such transaction or relationship. A report of disclosures are presented to the Audit Committee of the Board o f Trustees. Committee members then determine what, if any, action should be taken as to ea ch disclosure and these actions are implemented by the CFO and VP for Finance & Administra tion. The policy directs the committee to review and update the list of the key employees,

and the policy itself is reviewed on a regular basis and revised as necessary.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	Goucher College uses the median of relevant markets to determine salary for positions. For exempt-level positions, the median of the market for private, independent colleges using CUPA-HR salary survey data is used. For non-exempt positions, both local market data (not higher education specific) and the median for private, independent colleges using CUPA-HR salary survey data is used. Faculty salaries have historically been determined solely by r ank; however, beginning in 2021, Goucher College began looking at the median of the market for private, independent colleges using CUPA-HR salary survey data by academic discipline . This compensation philosophy was discussed and agreed to by President's Cabinet. A Presi dential performance review form is used by the Board to evaluate the president's performance. A copy of the report is maintained by the Associate Vice President for Human Resources

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	The governing documents, conflict of interest policy, and audited financial statements are available to the public upon request. Some policies are also available on the College web site.

Return Explanation Reference

990 Schedule O, Supplemental Information

Form 990, Changes in fair value of interest rate swap agreement \$1,635,128. Part XI, Line

efile GRAPHIC print - De	O NOT PROCESS	As Filed Data -										DLN: 93493:	131000	182
SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	> (izations and Unrelated Partnerships Inswered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. <u>/Form990</u> for instructions and the latest information.									20 Public			
Name of the organization GOUCHER COLLEGE	1								Emp	loyer identif	icatior	number		
Part I Identification	of Discognided E	ntities. Complete if	the ergo	nization and	warad "Va	o" on Forn	2 000 Davit	· T\/ line 3		591613				
	(a) d EIN (if applicable) of dism	<u> </u>	the organ	(b) Primary a		Legal dom	c) nicile (state n country)	(d)		(e) End-of-year as	ssets	(f Direct coi enti		
	of Related Tax-Ex	empt Organizatior uring the tax year.	ı s. Compl	ete if the org	ganization	answered	l "Yes" on	Form 990	, Part I	V, line 34 be	ecause	it had one or	more	
Name, address, an	(a) nd EIN of related organizati	ion	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Coo			(e) harity status on 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?
													Tes	No
For Panerwork Peduction A	at Notice cas the To-	tructions for Earns 0	00			at No. 5013	DEV				Calc	edule D (Form	0007.30	20

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

- One of more related organization	nis created as a parenership	daring the ta	x year.											
(a) Name, address, and EI related organization	N of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomina income(rela unrelate excluded if tax unde sections 5 514)	ated, total incom d, rom er		(I Disprop alloca		(i) Code V-UBI amount in boo 20 of Schedule K-1 (Form 1065)	mana part	ral or aging	(k Percel owne	ntage
					314)			Yes	No	1	Yes	No		
Part IV Identification of Related Org because it had one or more rela							swered "Ye	s" on F	orm 9	990, Part IV	/, line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	Le doi (state e	(c) egal nicile or foreign intry)			(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) e of end- year assets	-of- Perce	h) entage ership	(1		512(b) trolled
(1)Pooled Income Fund (2)	Annuity	N	1D	N/A	Ī	-								No
1021 Dulaney Valley Road Baltimore, MD 21204														
(2)Charitable Remainder Unitrust (3)	Annuity	N	MD		Т	-		1						No

								-	
Part IV Identification of Related Org because it had one or more rela					nswered "Yes	" on Form 990	, Part IV, line :	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (13) co ent	(i) n 512(b) ontrolled tity?
(1)Pooled Income Fund (2)	Annuity	MD	N/A	Т				Yes	No No
1021 Dulaney Valley Road Baltimore, MD 21204									
(2)Charitable Remainder Unitrust (3)	Annuity	MD	N/A	Т				+	No
1021 Dulaney Valley Road Baltimore, MD 21204									
(3)Charitable Remainder Trust (1)	Annuity	FL	N/A	Т					No
1021 Dulaney Valley Road Baltmore, MD 21204									
			•			Sch	nedule R (Form	990) 20	020

Page **3**

Part V	Transactions With Related Organizations	. Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 34, 35b, or 36.	

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	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)	1 b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1 d		No
	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	\neg	No
h	Purchase of assets from related organization(s)	1h		No
	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
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
	(a) (b) (c) (d) Name of related organization Transaction Amount involved Method of determining amount invol	ount in	volved	

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	10	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ľ	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		,	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Form	990	0) 2020

chedule R (Form 990) 2020		Page 5	5
Part VII	Supplemental Information		
Provide additional information for responses to questions on Schedule R. (see instructions).			
Return Reference		Explanation	