

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

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

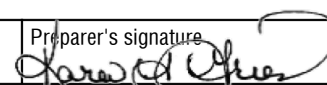
<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>LAFAYETTE COLLEGE</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>730 SULLIVAN ROAD, 030 MARQUIS HALL</b> City or town, state or province, country, and ZIP or foreign postal code <b>EASTON, PA 18042-1798</b> <b>F</b> Name and address of principal officer: <b>DR. ALISON BYERLY</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>24-0795686</b> <b>E</b> Telephone number <b>610-330-5136</b> <b>G</b> Gross receipts \$ <b>712,891,911.</b> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.LAFAYETTE.EDU</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>1826</b>		<b>M</b> State of legal domicile: <b>PA</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>PROVISION OF EDUCATIONAL SERVICES AS AN ACCREDITED FOUR-YEAR UNDERGRADUATE COLLEGE.</b>	
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>34</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>33</b>
<b>5</b>	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>2574</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>3070</b>
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>-82,593.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>-20,511.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>40,798,536.</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>158,075,417.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>60,364,121.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>2,224,245.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>261,462,319.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>43,500,173.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>88,407,811.</b>
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>250,792.</b>
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>5,390,424.</b>	
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>76,322,653.</b>
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>208,481,429.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>52,980,890.</b>
<b>20</b>	Total assets (Part X, line 16)	<b>1,332,988,727.</b>
<b>21</b>	Total liabilities (Part X, line 26)	<b>391,197,376.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>941,791,351.</b>

**Part II 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.

<b>Sign Here</b>	Signature of officer <b>ANDREA BOHN, ASSISTANT VP AND CONTROLLER</b> Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KAREN GRIES</b>	Preparer's signature 	Date <b>5/13/19</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00078514</b>
	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>			
	Firm's address ▶ <b>610 W. GERMANTOWN PIKE, STE. 400 PLYMOUTH MEETING, PA 19462</b>		Phone no. <b>215-643-3900</b>		

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 151,620,839. including grants of \$ 47,050,544. ) (Revenue \$ 132,950,400. ) LAFAYETTE COLLEGE IS A LIBERAL ARTS COLLEGE OFFERING BACHELOR OF ARTS AND BACHELOR OF SCIENCE DEGREES IN FOUR DISCIPLINES IN HUMANITIES, ENGINEERING, NATURAL SCIENCES, AND SOCIAL SCIENCES. IN FALL 2017, THE 2,551 FULL-TIME STUDENTS CAME FROM 46 STATES AND 48 COUNTRIES. THE STUDENT-TO-FACULTY RATIO AT THE COLLEGE IS APPROXIMATELY 10 TO 1. 233 OF THE 237 FULL-TIME FACULTY HOLD A DOCTORATE OR OTHER TERMINAL DEGREE. APPROXIMATELY 46% OF THE STUDENTS ATTENDING LAFAYETTE COLLEGE RECEIVE FINANCIAL ASSISTANCE. 606 STUDENTS WERE AWARDED AN UNDERGRADUATE DEGREE. LAFAYETTE COLLEGE HAS A FOUR-YEAR GRADUATION RATE OF 86% AND SIX-YEAR GRADUATION RATE OF 90%. APPROXIMATELY 95% OF THE COLLEGE'S GRADUATES WERE EMPLOYED, IN GRADUATE SCHOOL, OR SECURED INTERNSHIPS WITHIN 6 MONTHS AFTER GRADUATION.

4b (Code: ) (Expenses \$ 29,986,000. including grants of \$ 0. ) (Revenue \$ 32,805,861. ) AS A RESIDENTIAL COLLEGE, LAFAYETTE STUDENTS COMPLEMENT THEIR ACADEMIC SCHOLARSHIP WITH MYRIAD OPPORTUNITIES TO CONNECT WITH ONE ANOTHER AND LEARN FROM THE LARGE WORLD REPRESENTED ON THE COLLEGE'S CAMPUS. AS PART OF THEIR EXPERIENCE AT A RESIDENTIAL COLLEGE, LAFAYETTE STUDENTS ARE DEEPLY ENGAGED ACADEMICALLY AND HAVE SIGNIFICANT OPPORTUNITIES TO ENGAGE IN A VAST OFFERING OF EXTRACURRICULAR AND CO-CURRICULAR POSSIBILITIES. LAFAYETTE COLLEGE OFFERS MORE THAN 250 STUDENT CLUBS AND ORGANIZATIONS, 23 NCAA DIVISION 1 ATHLETIC PROGRAMS, AND NUMEROUS EXPERIENCES IN THE FINE ARTS AND PERFORMING ARTS ALL OF WHICH ARE COMPLEMENTED BY A STRONG STUDENT LIFE PROGRAM THAT ENHANCES THE LAFAYETTE EXPERIENCE BEYOND THE CLASSROOM.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 181,606,839.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> 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, Part I</i> .....		X
<b>7</b> 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> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	X	
<b>9</b> 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> .....	X	
<b>10</b> 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> .....	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	X	
<b>c</b> 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> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	X	
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i> .....	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Main table with columns for question numbers (1a-14b), Yes/No, and numerical responses (e.g., 2906, 0, 2574).

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 34		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 33		
<b>2</b>	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?	X	
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</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?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>12c</b>		X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</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?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **PA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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: **CRAIG BECKER - 610-330-5957**  
**730 SULLIVAN ROAD, 030 MARQUIS HALL, EASTON, PA 18042-1798**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EDWARD W. AHART CHAIR	5.00	X		X				0.	0.	0.
(2) ROBERT E. SELL VICE CHAIR	5.00	X		X				0.	0.	0.
(3) NANCY J. KUENSTNER SECRETARY	5.00	X		X				0.	0.	0.
(4) SAMUEL R. CHAPIN EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(5) JAMES R. FISHER EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(6) LEO A. HELMERS EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(7) BARBARA LEVY EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(8) ELISABETH H. MACDONALD EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(9) ANGEL L. MENDEZ EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(10) DONALD E. MOREL JR. EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(11) STEPHEN D. PRYOR EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(12) J.B. REILLY EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(13) SYLVIA DANIELS WEAVER EXECUTIVE COMMITTEE	3.00	X						0.	0.	0.
(14) JAMES L. BENJAMIN TRUSTEE	2.00	X						0.	0.	0.
(15) JAMES R. BIRLE, JR. TRUSTEE	2.00	X						0.	0.	0.
(16) LINDA ASSANTE CARRASCO TRUSTEE	2.00	X						0.	0.	0.
(17) HARRY S. CHERKEN TRUSTEE	2.00	X						0.	0.	0.

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANTONIO F. FERNANDEZ TRUSTEE	2.00	X						0.	0.	0.
(19) SUSAN L. FOX TRUSTEE	2.00	X						0.	0.	0.
(20) JOHN A. FRY TRUSTEE	2.00	X						0.	0.	0.
(21) MICHAEL C. HEANEY TRUSTEE	2.00	X						0.	0.	0.
(22) HAROLD N. KAMINE TRUSTEE	2.00	X						0.	0.	0.
(23) CLAUDINE C. LILIE TRUSTEE	2.00	X						0.	0.	0.
(24) JUDSON C. LINVILLE TRUSTEE	2.00	X						0.	0.	0.
(25) KEVIN R. MANDIA TRUSTEE	2.00	X						0.	0.	0.
(26) D. CHRISTIAN MCCUMBER TRUSTEE	2.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								5,565,507.	0.	891,483.
<b>d Total (add lines 1b and 1c)</b>								5,565,507.	0.	891,483.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 159

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
TURNER CONSTRUCTION COMPANY, 1500 SPRING GARDEN ST, SUITE 220, PHILADELPHIA, PA	CONSTRUCTION	12,718,394.
BON APPETIT MANAGEMENT COMPANY PO BOX 417632, BOSTON, MA 02241	DINING SERVICES	9,856,260.
DEL VALLEY PROPERTIES, INC. 379 RT 3 31 N, RINGOES, NJ 08551	CONSTRUCTION	4,954,217.
PAYETTE ASSOCIATES, INC. 290 CONGRESS ST., BOSTON, MA 02210	CONSTRUCTION	1,626,387.
MOBILEASE MODULAR SPACE 201 ROUTE 130, PEDRICKTOWN, NJ 08067	CONSTRUCTION	1,490,720.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 79

SEE PART VII, SECTION A CONTINUATION SHEETS



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(27) CYNTHIA Y. PAIGE TRUSTEE	2.00	X						0.	0.	0.	
(28) PAMELA S. PASSMAN TRUSTEE	2.00	X						0.	0.	0.	
(29) DAVID A. REIF TRUSTEE	2.00	X						0.	0.	0.	
(30) S. KENT ROCKWELL TRUSTEE	2.00	X						0.	0.	0.	
(31) DAVID M. ROTH TRUSTEE	2.00	X						0.	0.	0.	
(32) WYNNE A. WHITMAN TRUSTEE	2.00	X						0.	0.	0.	
(33) ALVIN M. YEARWOOD TRUSTEE	2.00	X						0.	0.	0.	
(34) ALISON R. BYERLY PRESIDENT	50.00	X	X					603,235.	0.	96,789.	
(35) JOSEPH S. BOHRER CHIEF INVESTMENT OFFICER	50.00			X				557,974.	0.	35,923.	
(36) ROGER A. DEMARESKI VP OF FINANCE & ADMINISTRATION/TREAS	50.00			X				388,849.	0.	49,367.	
(37) ANNETTE DIORIO VP OF CAMPUS LIFE/SR. DIVERSITY OFFI	50.00			X				213,715.	0.	31,000.	
(38) MARK EYERLY VP FOR MARKETING & COMMUNICATIONS	50.00			X				199,929.	0.	39,177.	
(39) JAMES F. KRIVOSKI VP & LIAISON TO BOARD OF TRUSTEES	50.00			X				225,177.	0.	29,003.	
(40) GREGORY V. MACDONALD VP OF ENROLLMENT MANAGEMENT	50.00			X				227,941.	0.	149,758.	
(41) LESLIE F. MUHLFELDER VP OF HUMAN RESOURCES & GENERAL COUN	50.00			X				316,197.	0.	63,333.	
(42) JOHN L. O'KEEFE VP & CHIEF INFORMATION OFFICER	50.00			X				217,804.	0.	46,097.	
(43) KIMBERLY A. SPANG VP OF DEVELOPMENT & COLLEGE RELATION	50.00			X				296,645.	0.	49,019.	
(44) SAIYID A. RIZVI PROVOST	50.00			X				343,128.	0.	48,117.	
(45) CRAIG BECKER ASSOC VP FOR FINANCE, PLANNING & CAP	50.00				X			279,211.	0.	48,052.	
(46) MERVIN A. BURTON DIRECTOR OF INVESTMENTS	50.00					X		382,547.	0.	24,614.	
Total to Part VII, Section A, line 1c .....											



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	37,369.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	1,457,561.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	32,024,301.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		12,866,253.				
	<b>h Total.</b> Add lines 1a-1f		33,519,231.				
<b>Program Service Revenue</b>	<b>2 a</b> TUITION AND FEES	<b>Business Code</b>					
		611710	130,772,757.	130,772,757.			
	<b>b</b> AUXILIARY SERVICES	611710	32,805,861.	32,805,861.			
	<b>c</b> ATHLETICS/SPORTS NETWORK	611710	1,258,224.	1,258,224.			
	<b>d</b> CENTER FOR TALENTED YOUTH	611710	919,419.	919,419.			
	<b>e</b>						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f		165,756,261.					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		22,727,579.		-126,222.	22,853,801.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	(i) Real	800,016.				
		(ii) Personal					
		<b>b</b> Less: rental expenses	568,546.				
	<b>c</b> Rental income or (loss)	231,470.					
	<b>d</b> Net rental income or (loss)		231,470.			231,470.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	485,050,652.				
		(ii) Other	16,607.				
		<b>b</b> Less: cost or other basis and sales expenses	447,748,566.	0.			
		<b>c</b> Gain or (loss)	37,302,086.	16,607.			
	<b>d</b> Net gain or (loss)		37,318,693.			37,318,693.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 37,369. of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	115,785.				
		<b>b</b> Less: direct expenses	55,213.				
<b>c</b> Net income or (loss) from fundraising events			60,572.			60,572.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>	1,906,222.					
	<b>b</b> Less: cost of goods sold	1,654,291.					
	<b>c</b> Net income or (loss) from sales of inventory		251,931.		26,754.	225,177.	
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> FEES, FINES AND COST RECOVERY	900099	630,837.		16,875.	613,962.		
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue	900099	2,368,721.			2,368,721.		
<b>e Total.</b> Add lines 11a-11d		2,999,558.					
<b>12 Total revenue.</b> See instructions.		262,865,295.	165,756,261.	-82,593.	63,672,396.		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	55,024.	55,024.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	46,860,170.	46,860,170.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	135,350.	135,350.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,876,453.	480,465.	3,083,668.	312,320.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	65,210,869.	53,512,041.	8,839,457.	2,859,371.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,909,141.	4,738,415.	852,878.	317,848.
9 Other employee benefits	9,861,034.	7,883,820.	1,440,407.	536,807.
10 Payroll taxes	4,834,526.	3,876,704.	697,777.	260,045.
11 Fees for services (non-employees):				
a Management				
b Legal	421,254.	10,481.	389,998.	20,775.
c Accounting	138,469.		138,469.	
d Lobbying	66,199.		66,199.	
e Professional fundraising services. See Part IV, line 17	250,792.			250,792.
f Investment management fees	727,461.		727,461.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	14,263,172.	10,972,196.	3,253,774.	37,202.
12 Advertising and promotion	144,771.	76,493.	65,278.	3,000.
13 Office expenses	2,193,430.	1,530,379.	423,690.	239,361.
14 Information technology	1,949,359.	590,275.	1,340,444.	18,640.
15 Royalties				
16 Occupancy	4,767,403.	4,415,538.	351,865.	
17 Travel	5,626,527.	4,511,228.	852,108.	263,191.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,659,039.	915,342.	468,362.	275,335.
20 Interest	8,165,133.	7,753,341.	411,792.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,378,055.	14,675,437.	1,702,618.	
23 Insurance	1,961,487.	248,669.	1,712,818.	
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 <b>AUXILIARY SERVICES</b>	8,520,551.	8,520,551.		
b <b>NON OFFICE SUPPLIES</b>	3,591,405.	3,557,674.	31,565.	2,166.
c <b>ALLOCATION OF INDIRECT</b>	0.	-729,048.	729,048.	
d				
e All other expenses	7,783,941.	7,016,294.	774,076.	-6,429.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>215,351,015.</b>	<b>181,606,839.</b>	<b>28,353,752.</b>	<b>5,390,424.</b>
<b>26 Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	41,926.	<b>1</b>	21,899.	
	<b>2</b> Savings and temporary cash investments .....	46,662,760.	<b>2</b>	43,176,338.	
	<b>3</b> Pledges and grants receivable, net .....	31,261,878.	<b>3</b>	27,901,634.	
	<b>4</b> Accounts receivable, net .....	3,492,356.	<b>4</b>	3,657,780.	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....	694,381.	<b>8</b>	675,988.	
	<b>9</b> Prepaid expenses and deferred charges .....	3,225,588.	<b>9</b>	2,019,119.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 577,187,262.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 243,243,769.			
	<b>11</b> Investments - publicly traded securities .....	311,547,780.	<b>10c</b>	333,943,493.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	273,481,876.	<b>11</b>	299,999,312.	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	579,227,396.	<b>12</b>	601,969,323.	
	<b>14</b> Intangible assets .....	3,341,463.	<b>13</b>	3,039,704.	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>		
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	80,011,323.	<b>15</b>	60,215,765.		
	1,332,988,727.	<b>16</b>	1,376,620,355.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	12,403,571.	<b>17</b>	12,445,291.	
	<b>18</b> Grants payable .....	2,066,700.	<b>18</b>	1,246,125.	
	<b>19</b> Deferred revenue .....	4,685,202.	<b>19</b>	3,525,024.	
	<b>20</b> Tax-exempt bond liabilities .....	276,152,536.	<b>20</b>	274,089,871.	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	3,041,578.	<b>21</b>	3,063,533.	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	4,828,432.	<b>23</b>	4,088,866.	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	88,019,357.	<b>25</b>	82,904,309.	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	391,197,376.	<b>26</b>	381,363,019.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	289,448,387.	<b>27</b>	305,159,806.	
	<b>28</b> Temporarily restricted net assets .....	322,626,734.	<b>28</b>	329,596,462.	
	<b>29</b> Permanently restricted net assets .....	329,716,230.	<b>29</b>	360,501,068.	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
	<b>33</b> <b>Total net assets or fund balances</b> .....	941,791,351.	<b>33</b>	995,257,336.	
	<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	1,332,988,727.	<b>34</b>	1,376,620,355.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	262,865,295.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	215,351,015.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	47,514,280.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	941,791,351.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-114,833.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	6,066,538.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	995,257,336.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b>	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b>	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? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2017)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	39,023,899.	25,830,722.	27,747,289.	40,798,536.	33,481,862.	166,882,308.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	39,023,899.	25,830,722.	27,747,289.	40,798,536.	33,481,862.	166,882,308.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						18,269,203.
<b>6 Public support.</b> Subtract line 5 from line 4.						148,613,105.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b> Amounts from line 4 .....	39,023,899.	25,830,722.	27,747,289.	40,798,536.	33,481,862.	166,882,308.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	12,754,814.	14,508,841.	9,000,126.	9,391,557.	23,653,817.	69,309,155.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....			88,267.			88,267.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	1,153,077.	1,875,752.	867,269.	1,832,825.	2,982,683.	8,711,606.
<b>11 Total support.</b> Add lines 7 through 10						244,991,336.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	764,107,068.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	60.66 %
<b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14 .....	<b>15</b>	64.38 %
<b>16a 33 1/3% support test - 2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2017.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2016.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2016 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
<b>2a</b>			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2017 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
<b>1</b> Distributable amount for 2017 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2017			
<b>a</b>			
<b>b</b> From 2013			
<b>c</b> From 2014			
<b>d</b> From 2015			
<b>e</b> From 2016			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2017 distributable amount			
<b>i</b> Carryover from 2012 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2017 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2017 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2018.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2013			
<b>b</b> Excess from 2014			
<b>c</b> Excess from 2015			
<b>d</b> Excess from 2016			
<b>e</b> Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

**Part VI**

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

Multiple horizontal lines for supplemental information.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

<b>Name of organization</b>  <b>LAFAYETTE COLLEGE</b>	<b>Employer identification number</b>  <b>24-0795686</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>5,050,230.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,091,930.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>2,050,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>1,634,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>1,500,986.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>1,128,243.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



<b>Name of organization</b>  <b>LAFAYETTE COLLEGE</b>	<b>Employer identification number</b>  <b>24-0795686</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 998,250.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 768,214.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 736,833.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ 700,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>LAFAYETTE COLLEGE</b>	Employer identification number  <b>24-0795686</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	VARIOUS STOCKS _____ _____ _____	\$ 4,221,818.	12/29/17
2	VARIOUS STOCKS _____ _____ _____	\$ 2,974,455.	03/08/18
5	20525 SHARES OF EVERCORE, INC. _____ _____ _____	\$ 1,500,976.	05/31/18
7	7 PHOTOGRAPHS _____ _____ _____	\$ 998,250.	12/29/17
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization <b>LAFAYETTE COLLEGE</b>	Employer identification number <b>24-0795686</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2017**

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public Inspection**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>LAFAYETTE COLLEGE</b>	Employer identification number <b>24-0795686</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ..... ▶ \$ 0.

3 Volunteer hours for political campaign activities ..... 0.

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No

4a Was a correction made?  Yes  No

b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_

4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from 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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2017

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b>	Other exempt purpose expenditures .....														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
<b>2a</b>	Lobbying nontaxable amount				
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))				
<b>c</b>	Total lobbying expenditures				
<b>d</b>	Grassroots nontaxable amount				
<b>e</b>	Grassroots ceiling amount (150% of line 2d, column (e))				
<b>f</b>	Grassroots lobbying expenditures				

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?		X	
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	X		66,199.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?		X	
<b>j</b> Total. Add lines 1c through 1i			66,199.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE COLLEGE IS A MEMBER OF THE AMERICAN COUNCIL ON EDUCATION, THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES OF PENNSYLVANIA, THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES AND THE LEHIGH VALLEY ASSOCIATION OF INDEPENDENT COLLEGES. THROUGH THESE ORGANIZATIONS, THE COLLEGE MAY, FROM TIME TO TIME, LOBBY THE CITY OF

**Part IV** Supplemental Information *(continued)*

EASTON, THE COMMONWEALTH OF PENNSYLVANIA OR THE FEDERAL GOVERNMENT IN SUPPORT OF HIGHER EDUCATION ISSUES AND LEGISLATION OR IN THE ASSISTANCE IN PROCURING GRANTS. THE COLLEGE NEITHER EMPLOYS A LOBBYIST OR LOBBYING FIRM NOR INCURS LOBBYING EXPENSES FOR LEGISLATION ON THE COLLEGE'S BEHALF. THE COLLEGE EMPLOYS THE DELTA DEVELOPMENT GROUP FOR ASSISTANCE IN SECURING FEDERAL AND STATE GRANTS.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

**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) .....		
3 Aggregate value of grants from (during year) .....		
4 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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> 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 private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of a historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ 1,254,255.

(ii) Assets included in Form 990, Part X .....

▶ \$ 5,851,315.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

Schedule D (Form 990) 2017



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	833,069,757.	774,730,899.	809,061,387.	832,811,462.	749,031,061.
b Contributions	21,306,093.	11,203,342.	13,123,784.	2,547,962.	8,166,810.
c Net investment earnings, gains, and losses	59,205,615.	88,282,832.	-7,354,992.	9,573,228.	109,777,933.
d Grants or scholarships	8,175,815.	8,041,278.	7,654,691.	7,142,699.	7,064,627.
e Other expenditures for facilities and programs	31,783,314.	30,368,897.	28,795,873.	26,383,005.	24,722,271.
f Administrative expenses	2,877,713.	2,737,141.	3,648,716.	2,345,561.	2,377,444.
g End of year balance	870,744,623.	833,069,757.	774,730,899.	809,061,387.	832,811,462.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  25.90 %
- b Permanent endowment  41.40 %
- c Temporarily restricted endowment  32.70 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,733,633.		7,733,633.
b Buildings		399,975,464.	163,956,003.	236,019,461.
c Leasehold improvements		60,183,126.	27,713,056.	32,470,070.
d Equipment		72,911,339.	51,574,710.	21,336,629.
e Other		36,383,700.		36,383,700.

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)  333,943,493.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) EQ. INSTIT. MUTUAL FUNDS	198,393,621.	END-OF-YEAR MARKET VALUE
(B) EVENT DRIVEN/DISTRESSED	48,737,503.	END-OF-YEAR MARKET VALUE
(C) LONG/SHORT EQUITY	100,478,356.	END-OF-YEAR MARKET VALUE
(D) MULTI-STRAT./ABS. RETURN	98,624,894.	END-OF-YEAR MARKET VALUE
(E) REAL ESTATE	17,063,731.	END-OF-YEAR MARKET VALUE
(F) PRIVATE EQUITY	76,008,284.	END-OF-YEAR MARKET VALUE
(G) FIXED INCOME INSTIT.		
(H) MUTUAL FUNDS	62,662,934.	END-OF-YEAR MARKET VALUE
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>601,969,323.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED GIVING LIABILITY	23,010,055.
(3) POST RETIREMENT BENEFITS	46,883,000.
(4) COND. ASSET RETIREMENT OBLIGATION	1,806,284.
(5) INT. RATE HEDGE/SWAP AGREEMENTS	11,204,970.
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>82,904,309.</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	223,678,695.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-114,833.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-40,622,355.	
e	Add lines 2a through 2d	2e		-40,737,188.
3	Subtract line 2e from line 1	3		264,415,883.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	727,461.	
b	Other (Describe in Part XIII.)	4b	-2,278,049.	
c	Add lines 4a and 4b	4c		-1,550,588.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		262,865,295.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

1	Total expenses and losses per audited financial statements		1	170,212,710.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	2,278,049.	
e	Add lines 2a through 2d	2e		2,278,049.
3	Subtract line 2e from line 1	3		167,934,661.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	727,461.	
b	Other (Describe in Part XIII.)	4b	46,688,893.	
c	Add lines 4a and 4b	4c		47,416,354.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		215,351,015.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART IV, LINE 2B:**

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

**PART V, LINE 4:**

THE INTENT OF THE COLLEGE'S INVESTMENT GUIDELINES FOR ITS ENDOWMENT IS TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO THE COLLEGE'S PROGRAMS FROM THE ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 1,300 ENDOWED FUNDS THAT ARE ESTABLISHED FOR A VARIETY OF PURPOSES. ENDOWMENT CONTRIBUTIONS INCLUDE GIFTS AS WELL AS TRANSFERS TO BOARD DESIGNATED FUNDS. EARNINGS ON ENDOWMENT FUNDS ARE DESIGNATED FOR SCHOLARSHIPS,

**Part XIII** Supplemental Information (continued)

PROFESSORSHIPS, CHAIRS, STUDENT LOANS, INSTRUCTIONAL PROGRAMS, LIBRARY  
PURCHASES, GENERAL OPERATIONS, AND OTHER DESIGNATED PURPOSES.

## PART X, LINE 2:

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

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

SCHOLARSHIPS AND FELLOWSHIPS	-46,688,893.
CHANGE IN ANNUITIES PAYABLE ESTIMATE	2,767,476.
CHANGE IN FAIR VALUE OF INTEREST RATE HEDGE/SWAP AGREEMENTS	3,191,062.
CHANGE IN POST RETIREMENT BENEFIT COST	108,000.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-40,622,355.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL REVENUES TO EXTENT EXPENDED	-568,546.
COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED	-1,654,291.
DIRECT SPECIAL EVENT EXPENSES	-55,212.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-2,278,049.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL REVENUES TO EXTENT EXPENDED	568,546.
COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED	1,654,291.
DIRECT SPECIAL EVENT EXPENSES	55,212.

**Part XIII** Supplemental Information (continued)

TOTAL TO SCHEDULE D, PART XII, LINE 2D 2,278,049.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS AND FELLOWSHIPS 46,688,893.

## FORM 990, SCHEDULE D, PART III, LINE 4

AMONG THE RICH RESOURCES PROVIDED FOR STUDENTS IS A FINE, SMALL ART COLLECTION. THE COLLECTION INCLUDES EIGHTEENTH-THROUGH EARLY TWENTY-FIRST CENTURY AMERICAN AND EUROPEAN PAINTINGS, PRINTS, AND SCULPTURE; VINTAGE PHOTOGRAPHS; AND CONTEMPORARY AMERICAN SCULPTURE AND PAINTINGS. RECENT ACQUISITIONS BUILD ON THE STRENGTH OF THE EXISTING COLLECTIONS.

THE MISSION STATEMENT FOR THE ART COLLECTIONS IS TO DOCUMENT, PRESERVE FOR FUTURE GENERATIONS, EXHIBIT, AND MAKE ACCESSIBLE THE COLLEGE'S ART COLLECTION TO THE STUDENTS, PUBLIC, AND SCHOLARS THROUGH EXHIBITIONS, PUBLICATIONS, REPRODUCTIONS, AND BY GRANTING ACCESS FOR RESEARCH PURPOSES. THE ADMINISTRATION OF THE ART COLLECTION COMPLIES WITH MUSEUM-FIELD WIDE STANDARDS OF CARE (SEE AMERICAN ALLIANCE OF MUSEUMS, AAM). STUDENTS HAVE CURATED EXHIBITIONS FROM THE COLLECTIONS; WHEN APPROPRIATE, ARTWORK IS LOANED TO OTHER INSTITUTIONS FOR EXHIBITIONS OF SCHOLARLY IMPORTANCE; IMAGES OF ARTWORK ARE READILY AVAILABLE FOR REPRODUCTIONS IN COMMERCIAL (EX: TEXT BOOKS) AND ACADEMIC-SCHOLARLY PUBLICATIONS (GENERALLY AT NO CHARGE OR A NOMINAL FEE).

THE LAFAYETTE COLLEGE'S SPECIAL COLLECTIONS AND COLLEGE ARCHIVES ARE HOME TO APPROXIMATELY 20,000 RARE BOOKS AND MORE THAN 2,000 CUBIC FEET OF MANUSCRIPTS AND ARCHIVES. THE HOLDINGS INCLUDE MANUSCRIPTS, RARE BOOK COLLECTIONS ON STEPHEN CRANE, ANGLING, MINIATURE BOOKS, AND ARTISTS'

**Part XIII** Supplemental Information *(continued)*

BOOKS; PAPERS OF FORMER TREASURY SECRETARY WILLIAM E. SIMON, NEW JERSEY GOVERNOR ROBERT E. MEYNER AND CONGRESSWOMAN HELEN MEYNER; THE EARLY RECORDS OF THE EASTON-BASED DIXIE CUP COMPANY AND THE PAPERS OF NOTED ILLUSTRATOR AND ARTIST HOWARD CHANDLER CHRISTY.

THE COLLEGE ARCHIVES SERVE AS THE REPOSITORY FOR THE RECORDS OF LAFAYETTE COLLEGE, DATING BACK TO THE FOUNDING OF THE COLLEGE IN 1824-1826. IT IS CHARGED WITH RECORDS MANAGEMENT RESPONSIBILITIES FOR CURRENT COLLEGE RECORDS. THE ARCHIVES ALSO INCLUDE MORE THAN 50,000 PHOTOGRAPHS, AUDIO-VISUAL RECORDINGS, AND OBJECTS THAT DOCUMENT THE COLLEGE'S HISTORY.

THE DEPARTMENT OF GEOLOGY AND ENVIRONMENTAL GEOSCIENCE HOUSES THE COLLEGE'S MINERAL, GEM, AND FOSSIL COLLECTION THAT CONSISTS OF MORE THAN 10,000 SPECIMENS. THE COLLECTION WAS STARTED OVER A CENTURY AGO AND HAS GROWN THROUGH THE GIFTS OF MANY PRIVATE COLLECTIONS. THE COLLECTION IS HOUSED IN VAN WICKLE HALL AND A LARGE NUMBER OF SPECIMENS ARE ON DISPLAY IN THE GEOLOGY MUSEUM IN THE CENTER OF VAN WICKLE HALL. THE COLLECTION IS MANAGED BY A PROFESSIONAL CURATOR WHO WORKS PART TIME TO CURATE THE COLLECTION AND CYCLE MINERALS FROM STORAGE THROUGH THE DISPLAY CASES. THE GROWTH AND MAINTENANCE OF THE COLLECTION IS PARTIALLY SUPPORTED BY AN ENDOWED FUND GIFTED BY JOHN POHL ALONG WITH THE DONATION OF HIS MINERAL COLLECTION IN 1952. THE COLLECTION HAS GROWN SIGNIFICANTLY DURING THE PAST 10 YEARS WITH DONATIONS TOTALING MORE THAN 1,000 SPECIMENS FROM SEVERAL DONORS. THE CENTERPIECE OF THE COLLECTION IS A TWO-TON PIECE OF ORBICULAR GRANODIORITE QUARRIED IN WESTERN AUSTRALIA. THE GRANITOID FORMED IN A MAGMA CHAMBER 2.7 BILLION YEARS AGO AND THE ORBICULAR TEXTURE EARNED IT THE INFORMAL NAME OF THE LEOPARD ROCK. THE COLLECTION IS ENJOYED BY THE LAFAYETTE COMMUNITY, ELEMENTARY AND SECONDARY STUDENTS, YOUTH GROUPS, AND

**Part XIII** Supplemental Information *(continued)*

THE COMMUNITY AT LARGE.

Multiple horizontal lines for supplemental information.

**SCHEDULE E**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Schools**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
- ▶ Attach to Form 990 or Form 990-EZ.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

**LAFAYETTE COLLEGE**

Employer identification number

**24-0795686**

**Part I**

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....
- 2 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? .....
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.  
If you need more space, use Part II .....
- 4 Does the organization maintain the following?
  - a Records indicating the racial composition of the student body, faculty, and administrative staff? .....
  - b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....
  - c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....
  - d Copies of all material used by the organization or on its behalf to solicit contributions? .....
 If you answered "No" to any of the above, please explain. If you need more space, use Part II.
- 5 Does the organization discriminate by race in any way with respect to:
  - a Students' rights or privileges? .....
  - b Admissions policies? .....
  - c Employment of faculty or administrative staff? .....
  - d Scholarships or other financial assistance? .....
  - e Educational policies? .....
  - f Use of facilities? .....
  - g Athletic programs? .....
  - h Other extracurricular activities? .....
 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? .....
- 6b Has the organization's right to such aid ever been revoked or suspended? .....
- 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 .....

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a	X	
6b		X
7	X	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Schedule E (Form 990 or 990-EZ) 2017



**Part II** Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE COLLEGE RECEIVES FINANCIAL AID AND ASSISTANCE FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES UNDER THEIR RESPECTIVE STUDENT FINANCIAL AID ASSISTANCE PROGRAMS. FEDERAL GRANT PROGRAMS INCLUDE PELL GRANTS, DIRECT LOAN PROGRAMS, WORK-STUDY, THE PERKINS LOAN PROGRAM, AND FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS. STATE PROGRAMS INCLUDE THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE AGENCY. IN ADDITION, THE COLLEGE IS AWARDED RESEARCH GRANTS AND OTHER PROJECT GRANTS BY VARIOUS FEDERAL AND STATE AGENCIES.

FORM 990, SCHEDULE E, PART I, LINE 3

THE COLLEGE'S RACIAL NONDISCRIMINATORY POLICY IS PUBLICIZED WITHIN THE COLLEGE'S CATALOG WHICH CAN BE FOUND AT [HTTP://CATALOG.LAFAYETTE.EDU/](http://catalog.lafayette.edu/). IN ADDITION, THE COLLEGE HAS A SEPARATE DIVERSITY AND INCLUSIVENESS STATEMENT WHICH IS ALSO INCLUDED WITHIN THE COLLEGE'S CATALOG AT [HTTP://CATALOG.LAFAYETTE.EDU/](http://catalog.lafayette.edu/).

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		222,507,089.
EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS		9,652,502.
NORTH AMERICA	0	0	INVESTMENTS		88,614,941.
SOUTH ASIA	0	0	INVESTMENTS		23,480,273.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	MANAGEMENT AND GENERAL	INSTITUTIONAL SUPPORT	920.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	INSTRUCTION	21,450.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	3,897.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INSTRUCTION	152,275.
<b>3 a</b> Sub-total .....	0	0			344,433,347.
<b>b</b> Total from continuation sheets to Part I .....	0	0			1,720,485.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			346,153,832.

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

Schedule F (Form 990) 2017

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH	4,876.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDENT SERVICES	20,858.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	MANAGEMENT AND GENERAL	INSTITUTIONAL SUPPORT	6,346.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	60,989.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	INSTRUCTION	1,418,377.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	RESEARCH	35,379.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT SERVICES	23,255.
NORTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	9,680.
NORTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	3,475.
NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	1,600.
<b>Totals</b> .....					

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(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
NORTH AMERICA	0	0	PROGRAM SERVICES	STUDENT SERVICES	20,536.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	1,300.
SOUTH AMERICA	0	0	MANAGEMENT AND GENERAL	INSTITUTIONAL SUPPORT	2,986.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	39,487.
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	6,977.
SOUTH ASIA	0	0	PROGRAM SERVICES	INSTRUCTION	780.
SUB-SAHARAN AFRICA	0	0	MANAGEMENT AND GENERAL	INSTITUTIONAL SUPPORT	12,903.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	785.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	29,896.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT SERVICES	20,000.
<b>Totals</b> .....					1,720,485.





Part 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) 2017

**Part V Supplemental Information**

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

**PART I, LINE 2:**

THE AMOUNTS REPORTED ON PART I ARE IDENTIFIED ON A REASONABLE EFFORTS BASIS WHERE SUCH ACTIVITIES WERE NOT TRACKED SEPARATELY UNDER THE COLLEGE'S ACCOUNTING PROCEDURES. THESE REASONABLE EFFORTS INCLUDE REVIEWS OF FINANCIAL RECORDS AND INTERVIEWS WITH COLLEGE PERSONNEL. THE COLLEGE EXPENDS FUNDS OUTSIDE OF THE UNITED STATES ON VARIOUS STUDY ABROAD PROGRAMS. STUDENTS ENROLLED IN STUDY ABROAD PROGRAMS PAY THEIR TUITION AND FEES DIRECTLY TO LAFAYETTE COLLEGE AND THE COLLEGE REMITS PAYMENTS TO THE OVERSEAS PROGRAM ON STUDENTS' BEHALF.

**PART II, LINE 1**

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



**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
STEEGE THOMSON COMMUNICATIONS - 4606 SPRUCE STREET,	CAMPAIGN MARKETING		X	0.	191,114.	0.
WASHBURN & MCGOLDRICK - 950 NEW LOUDON ROAD, STE. 210,	CAMPAIGN CONSULTING		X	0.	34,206.	0.
IMODULES SOFTWARE, INC. - PO BOX 25671, OVERLAND PARK, KS	LICENSE AND CONSULTING SERVICE		X	0.	19,579.	0.
CRESCENDO INTERACTIVE INC. - 110 CAMINO RUIZ, CAMARILLO,	GIFTLEGACY SERVICE AND UPGRADE		X	0.	5,893.	0.
<b>Total</b>					250,792.	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.  
**CA, FL, NH, NJ, NY, WA, PA**

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		MC GOLF OUTING	LACROSSE AUCTION	NONE	
		(event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....	66,614.	86,540.		153,154.
	<b>2</b> Less: Contributions .....	23,584.	13,785.		37,369.
	<b>3</b> Gross income (line 1 minus line 2) .....	43,030.	72,755.		115,785.
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....	2,995.			2,995.
	<b>6</b> Rent/facility costs .....	12,972.	2,549.		15,521.
	<b>7</b> Food and beverages .....	7,568.	17,358.		24,926.
	<b>8</b> Entertainment .....		500.		500.
	<b>9</b> Other direct expenses .....	5,848.	5,423.		11,271.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				55,213.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				60,572.	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue .....				
Direct Expenses	<b>2</b> Cash prizes .....				
	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
**b** If "No," explain: \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
**b** If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

- (I) NAME OF FUNDRAISER: STEEGE THOMSON COMMUNICATIONS
- (I) ADDRESS OF FUNDRAISER: 4606 SPRUCE STREET, PHILADELPHIA, PA 19139
- (I) NAME OF FUNDRAISER: WASHBURN & MCGOLDRICK
- (I) ADDRESS OF FUNDRAISER: 950 NEW LOUDON ROAD, STE. 210, LATHAM, NY 12110
- (I) NAME OF FUNDRAISER: IMODULES SOFTWARE, INC.

**Part IV** Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: PO BOX 25671, OVERLAND PARK, KS 66225

(I) NAME OF FUNDRAISER: CRESCENDO INTERACTIVE INC.

(I) ADDRESS OF FUNDRAISER: 110 CAMINO RUIZ, CAMARILLO, CA 93012

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
YALE UNIVERSITY OFFICE OF SPONSORED PROJECTS, PO BOX NEW HAVEN, CT 06508	06-0646973	501(C)(3)	16,260.	0.	N/A	N/A	NHI GRANT

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 1

**3** Enter total number of other organizations listed in the line 1 table ▶ 0

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

Schedule I (Form 990) (2017)

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INSTITUTIONAL SCHOLARSHIP AWARDS	1192	0.	46,688,893.	FMV	CREDIT TO STUDENT'S ACCOUNT
ACADEMIC PRIZES, AWARDS, AND FELLOWSHIPS	208	163,094.	0.	N/A	N/A

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

PART I, LINE 2:

LAFAYETTE COLLEGE MAINTAINS A POLICY DEFINING ITS PROCEDURES FOR MONITORING THE USE OF SPONSORED FUNDS BY SUB-RECIPIENTS WHO ARE PERFORMING A PORTION OF A SPONSORED PROJECT EXTERNALLY AWARDED TO LAFAYETTE. THIS POLICY PROVIDES GUIDANCE TO ENSURE THAT SUB-RECIPIENTS CONDUCT THEIR PORTION OF SPONSORED PROJECTS IN COMPLIANCE WITH THE LAWS, REGULATIONS, TERMS AND CONDITIONS OF AWARDS AND SUB AWARDS, AND THAT REIMBURSEMENT COSTS INCURRED BY SUB-RECIPIENTS ARE ALLOWED.

**Part IV** Supplemental Information

PART III, LINE 1

THE COLLEGE CONSIDERS THE AWARDING OF FINANCIAL AID (PRIMARILY GRANTS, SCHOLARSHIPS, LOANS, AND WORK-STUDY) TO ITS STUDENTS, INCLUDING NON-RESIDENT ALIEN STUDENTS, TO BE A U.S. BASED ACTIVITY AS STUDENTS OF THE COLLEGE ARE DEEMED TO BE LIVING IN THE UNITED STATES THROUGHOUT THEIR COMPLETION OF THE COLLEGE'S ACADEMIC CURRICULUM AND SUPPORTING PROGRAMS. THE COLLEGE AWARDS SCHOLARSHIPS AND FELLOWSHIPS ON THE BASIS OF MERIT AND/OR FINANCIAL NEED. THE SELECTION CRITERIA ARE BASED ON THE CALCULATED EXPECTED FAMILY CONTRIBUTION, WHICH IS DERIVED BY USING COMPLEX FORMULAS INVOLVING FAMILIES' INCOME, ASSETS, AND HOUSEHOLD SIZES INCLUDING, AMONG OTHER FACTORS, DEPENDENTS IN COLLEGE. THE COLLEGE'S FINANCIAL AID OFFICE ADMINISTERS AND MONITORS THESE AWARDS TO HELP ENSURE THAT THESE FUNDS ARE AWARDED TO ELIGIBLE RECIPIENTS IN ACCORDANCE WITH APPLICABLE FEDERAL, STATE, AND OTHER REQUIREMENTS, AS WELL AS RELEVANT INTERNAL COLLEGE POLICIES AND OPERATIONAL GUIDELINES. ACADEMIC PRIZES, AWARDS, FELLOWSHIP, AND INTERNSHIPS ARE AWARDED BASED ON A REVIEW BY THE APPLICABLE ACADEMIC DEPARTMENT. ALL AWARDED SCHOLARSHIPS ARE CREDITED TO THE STUDENT'S ACCOUNT AT THE COLLEGE AND ARE APPLIED TO BILLED CHARGES.

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**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2017**

Open to Public Inspection

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**LAFAYETTE COLLEGE**

Employer identification number

**24-0795686**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |  |
|---|--|
| <input type="checkbox"/> First-class or charter travel                        | <input checked="" type="checkbox"/> Housing allowance or residence for personal use    |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence               |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account                       | <input checked="" type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2017



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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALISON R. BYERLY PRESIDENT	(i)	503,267.	20,000.	79,968.	25,650.	71,139.	700,024.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOSEPH S. BOHRER CHIEF INVESTMENT OFFICER	(i)	347,975.	200,000.	9,999.	25,650.	10,273.	593,897.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROGER A. DEMARESKI VP OF FINANCE & ADMINISTRATION/TREAS	(i)	344,821.	25,000.	19,028.	25,650.	23,717.	438,216.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANNETTE DIORIO VP OF CAMPUS LIFE/SR. DIVERSITY OFFI	(i)	207,099.	5,000.	1,616.	19,998.	11,002.	244,715.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARK EYERLY VP FOR MARKETING & COMMUNICATIONS	(i)	197,458.	0.	2,471.	19,285.	19,892.	239,106.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JAMES F. KRIVOSKI VP & LIAISON TO BOARD OF TRUSTEES	(i)	196,376.	0.	28,801.	19,416.	9,587.	254,180.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GREGORY V. MACDONALD VP OF ENROLLMENT MANAGEMENT	(i)	216,654.	5,000.	6,287.	21,592.	128,166.	377,699.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LESLIE F. MUHLFELDER VP OF HUMAN RESOURCES & GENERAL COUN	(i)	304,242.	4,000.	7,955.	25,650.	37,683.	379,530.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JOHN L. O'KEEFE VP & CHIEF INFORMATION OFFICER	(i)	216,598.	0.	1,206.	21,482.	24,615.	263,901.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) KIMBERLY A. SPANG VP OF DEVELOPMENT & COLLEGE RELATION	(i)	267,567.	20,000.	9,078.	25,650.	23,369.	345,664.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SAIYID A. RIZVI PROVOST	(i)	315,745.	20,000.	7,383.	25,650.	22,467.	391,245.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) CRAIG BECKER ASSOC VP FOR FINANCE, PLANNING & CAP	(i)	224,032.	15,000.	40,179.	22,293.	25,759.	327,263.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MERVIN A. BURTON DIRECTOR OF INVESTMENTS	(i)	231,980.	150,000.	567.	22,156.	2,458.	407,161.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JOHN GARRETT HEAD FOOTBALL COACH	(i)	217,025.	5,000.	5,381.	20,900.	33,649.	281,955.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JOHN KINCAID PROFESSOR/DIRECTOR OF MEYNER CENTER	(i)	231,424.	0.	2,575.	22,270.	10,381.	266,650.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) BRUCE A. MURPHY KIRBY PROFESSOR OF GOVERNMENT & LAW	(i)	232,113.	0.	5,616.	23,697.	21,845.	283,271.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) FRANCIS B. O'HANLON HEAD MEN'S BASKETBALL COACH	(i)	235,931.	0.	6,565.	23,377.	25,115.	290,988.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) FRANK TAVANI HEAD FOOTBALL COACH	(i)	0.	0.	371,525.	0.	0.	371,525.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**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.

**PART I, LINE 1A:**

TRAVEL FOR COMPANIONS - IN ACCORDANCE WITH COLLEGE POLICY, IN LIMITED INSTANCES WITH DOCUMENTATION FOR THE BUSINESS PURPOSE FULFILLED BY THE COMPANION AND ANY REQUIRED PRIOR APPROVALS, THE COLLEGE WILL PAY FOR TRAVEL EXPENSES OF A COMPANION WHEN THE COMPANION TRAVEL IS 1] FOR A BONA FIDE BUSINESS PURPOSE, AND 2] IMPORTANT TO THE ACHIEVEMENT OF THE COLLEGE'S PURPOSES THAT REQUIRE THE TRAVEL OF THE EMPLOYEE AND COMPANION.

TAX INDEMNIFICATION - DURING CALENDAR YEAR 2017, A \$2,917 TAX EQUALIZATION PAYMENT WAS MADE TO ALISON BYERLY (PRESIDENT). THE PAYMENT IS IN ACCORDANCE WITH THE EMPLOYMENT CONTRACT AND/OR AUTHORIZATIONS FROM THE BOARD OF TRUSTEES AND ARE SPECIFIC TO THE PRESIDENT.

HOUSING ALLOWANCE - AS PART OF THEIR EMPLOYMENT CONTRACT AND FOR THE CONVENIENCE OF THE COLLEGE, A COLLEGE-OWNED RESIDENCE WAS PROVIDED TO OFFICER ALISON BYERLY (PRESIDENT). THE HOUSING PROVIDED IS LOCATED ON COLLEGE PROPERTY AND IS IN CONJUNCTION WITH THE OFFICER'S DUTIES. THE ESTIMATED ANNUAL VALUE OF THE HOUSING PROVIDED IS INCLUDED AS A NONTAXABLE BENEFIT IN THIS RETURN IN THE AMOUNT OF \$46,257 FOR PRESIDENT BYERLY. IT IS

**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.

THE POLICY OF THE COLLEGE'S BOARD OF TRUSTEES THAT THE PRESIDENT RESIDE ON COLLEGE PROPERTY. THE PRESIDENT DETERMINES IF THE DUTIES OF OTHER OFFICERS REQUIRE THEM TO RESIDE ON COLLEGE PROPERTY.

PERSONAL SERVICES - IN ACCORDANCE WITH THE POLICY OF THE COLLEGE'S BOARD OF TRUSTEES AND THE PRESIDENT'S EMPLOYMENT CONTRACT, THE PRESIDENT OF THE COLLEGE IS REQUIRED TO RESIDE ON COLLEGE PROPERTY. THE PRESIDENT'S HOUSE SERVES NOT ONLY AS A RESIDENCE, BUT ALSO AS A HOST LOCATION FOR MANY COLLEGE EVENTS AND THE COLLEGE PROVIDES STAFF TO MAINTAIN THE HOME. FOR CALENDAR YEAR 2017, \$6,075 WAS THE PORTION OF THE HOUSEKEEPER'S SALARY WAS DETERMINED TO BE FOR PERSONAL SERVICES AND INCLUDED AS REPORTABLE COMPENSATION.

SOCIAL CLUB - THE COLLEGE MAINTAINS A SOCIAL CLUB MEMBERSHIP IN THE NAME OF THE PRESIDENT THAT IS PRIMARILY USED FOR BUSINESS PURPOSES, INCLUDING FUNDRAISING AND DONOR RELATION ACTIVITIES.

PART I, LINE 3:

THE COMPENSATION COMMITTEE ESTABLISHES THE PRESIDENT'S COMPENSATION. THE

**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.

COMMITTEE REVIEWS DATA OBTAINED FROM ITS EXTERNAL COMPENSATION CONSULTANT ON PRESIDENTIAL SALARIES FROM COMPARABLE INSTITUTIONS AND UPDATES OR ADJUSTS THAT DATA THROUGH SURVEYS AND OTHER AVAILABLE RESOURCES. IN ADDITION, AN ANNUAL PERFORMANCE REVIEW IS CONDUCTED.

PART I, LINE 7:

FROM TIME TO TIME CERTAIN EMPLOYMENT CONTRACTS CONTAIN BONUS CLAUSES. THESE BONUSES ARE BASED ON METRICS SPECIFIC TO THE POSITION. IN ADDITION, FROM TIME TO TIME, THE GOVERNING BODY PROVIDES BONUSES TO OFFICERS, DIRECTORS, KEY EMPLOYEES, AND OTHER STAFF BASED ON PERFORMANCE THEY DEEM TO BE WORTHY OF THE AWARD. THESE BONUSES ARE COMPLETELY DISCRETIONARY.

Supplemental Information on Tax-Exempt Bonds

ENTITY 1

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017  
Open to Public  
Inspection

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

Part I Bond Issues SEE PART VI FOR COLUMN (F) CONTINUATIONS											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
NORTHAMPTON CITY GPA A (SERIES 2013 A)	23-3007498	66353LCF2	11/26/13	35,146,792.	REFUND SERIES 98A, 98B, VAR. CAP.		X		X		X
NORTHAMPTON CITY GPA B (SERIES 2010 A AND B)	23-3007498	66353LAY3	04/30/10	26,689,800.	REFUND SERIES 10A, VAR. CAP. PROJE		X		X		X
NORTHAMPTON CITY GPA C (SERIES 2008)	23-3007498	66353LAK3	08/21/08	98,638,389.	REFUND SERIES 97, 04, 04 2ND, 97 C		X		X		X
NORTHAMPTON CITY GPA D (SERIES 2006)	23-3007498	66353LAG2	09/14/06	15,100,000.	CONSTRUCT./RENOV. ATHLETIC FACILIT		X		X		X

Part II Proceeds										
	A		B		C		D			
1 Amount of bonds retired						1,500,000.			4,100,000.	
2 Amount of bonds legally defeased										
3 Total proceeds of issue	35,146,792.		26,690,421.		98,650,001.				15,312,344.	
4 Gross proceeds in reserve funds										
5 Capitalized interest from proceeds									108,121.	
6 Proceeds in refunding escrows										
7 Issuance costs from proceeds	346,792.									
8 Credit enhancement from proceeds										
9 Working capital expenditures from proceeds						697.			10,709.	
10 Capital expenditures from proceeds	12,600,000.		4,400,421.		6,314,304.				15,193,514.	
11 Other spent proceeds	22,200,000.		22,290,000.		92,335,000.					
12 Other unspent proceeds										
13 Year of substantial completion						2013		2011		2007
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?		X		X		X		X		X
15 Were the bonds issued as part of an advance refunding issue?	X		X		X		X		X	
16 Has the final allocation of proceeds been made?	X		X		X		X		X	
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X		X	

Part III Private Business Use										
	A		B		C		D			
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X		X
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X		X

**Supplemental Information on Tax-Exempt Bonds**

ENTITY 2

OMB No. 1545-0047

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
▶ **Attach to Form 990.** ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2017**  
**Open to Public**  
**Inspection**

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

<b>Part I Bond Issues</b>											
<b>SEE PART VI FOR COLUMN (F) CONTINUATIONS</b>											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> NORTHAMPTON CITY GPA (SERIES 2003)	23-3007498	66353LAA5	04/02/03	10,190,000.	REFUND SERIES 93		X		X		X
<b>B</b> NORTHAMPTON CITY GPA (SERIES 2017)	23-3007498	66353LDE4	06/14/17	158,271,482.	CONTRUCTION/PARTIAL ADVANCE REFUND		X		X		X
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	A		B		C		D			
<b>1</b> Amount of bonds retired										
<b>2</b> Amount of bonds legally defeased										
<b>3</b> Total proceeds of issue	10,190,000.		158,271,482.							
<b>4</b> Gross proceeds in reserve funds										
<b>5</b> Capitalized interest from proceeds										
<b>6</b> Proceeds in refunding escrows										
<b>7</b> Issuance costs from proceeds			1,011,988.							
<b>8</b> Credit enhancement from proceeds										
<b>9</b> Working capital expenditures from proceeds										
<b>10</b> Capital expenditures from proceeds			19,784,235.							
<b>11</b> Other spent proceeds	10,190,000.		77,259,495.							
<b>12</b> Other unspent proceeds			60,215,765.							
<b>13</b> Year of substantial completion	2003									
	Yes	No	Yes	No	Yes	No	Yes	No		
<b>14</b> Were the bonds issued as part of a current refunding issue?		X		X						
<b>15</b> Were the bonds issued as part of an advance refunding issue?	X		X							
<b>16</b> Has the final allocation of proceeds been made?	X		X							
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

<b>Part III Private Business Use</b>										
	A		B		C		D			
	Yes	No	Yes	No	Yes	No	Yes	No		
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property?		X		X						

**Part III Private Business Use** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X		X	X			X
<b>b</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			
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X		X		X		X
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		.00 %		.00 %		1.00 %		.00 %
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		.00 %		.00 %		1.00 %		.00 %
<b>6</b> Total of lines 4 and 5 .....		.00 %		.00 %		2.00 %		.00 %
<b>7</b> Does the bond issue meet the private security or payment test? .....		X		X		X		X
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X		X		X		X
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X		X		X		X	

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X		X		X		X
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X		X		X		X
<b>b</b> Exception to rebate? .....		X		X		X		X
<b>c</b> No rebate due? .....	X		X		X		X	
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X	X			X	X	
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X		X		X		X
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								



**Part III Private Business Use** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X		X				
<b>b</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? .....								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X		X				
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		.00 %		.00 %		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		.00 %		.00 %		%		%
<b>6</b> Total of lines 4 and 5 .....		.00 %		.00 %		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		X		X				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X		X				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X		X					

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X		X				
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X	X					
<b>b</b> Exception to rebate? .....		X		X				
<b>c</b> No rebate due? .....	X			X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....	X			X				
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X		X				
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								



**Part IV Arbitrage** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
<b>b</b> Name of provider								
<b>c</b> Term of GIC								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?		X		X				
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148?	X		X					

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	X		X					

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2013 A)

(F) DESCRIPTION OF PURPOSE: REFUND SERIES 98A, 98B, VAR. CAP. PROJECTS

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2010 A AND B)

(F) DESCRIPTION OF PURPOSE: REFUND SERIES 10A, VAR. CAP. PROJECTS

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2008)

(F) DESCRIPTION OF PURPOSE: REFUND SERIES 97, 04, 04 2ND, 97 CAP. NOTES

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2006)

(F) DESCRIPTION OF PURPOSE: CONSTRUCT./RENOV. ATHLETIC FACILITIES

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2017)

(F) DESCRIPTION OF PURPOSE:  
CONTRUCTION/PARTIAL ADVANCE REFUNDING PRIOR BOND

**SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:**

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2013 A)

DATE THE REBATE COMPUTATION WAS PERFORMED: 06/23/2017

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2010 A AND B)

DATE THE REBATE COMPUTATION WAS PERFORMED: 02/13/2015

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

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2008)  
DATE THE REBATE COMPUTATION WAS PERFORMED: 06/25/2012

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2006)  
DATE THE REBATE COMPUTATION WAS PERFORMED: 03/13/2015

(A) ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2003)  
DATE THE REBATE COMPUTATION WAS PERFORMED: 03/16/2015

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

SCHEDULE K, PART II, LINE 3:  
THE DIFFERENCE FROM PART I(E) IS DUE TO INVESTMENT EARNINGS.

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

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

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

INTEREST RATE HEDGES ARE INTEGRATED FOR TAX PURPOSES WITH A PARTICULAR DEBT ISSUANCE OF THE COLLEGE.



**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
DONNA KRIVOSKI	SPOUSE OF VICE PRES	48,281.	SEE PART V		X

**Part V Supplemental Information**

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: DONNA KRIVOSKI

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF VICE PRESIDENT, J. KRIVOSKI

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

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

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2017**

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ 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](http://www.irs.gov/Form990) for the latest information.

Name of the organization **LAFAYETTE COLLEGE** Employer identification number **24-0795686**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....	X	5	1,149,750.	APPRAISAL
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....	X		4,655.	APPRAISAL
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	100	11,553,746.	HIGH/LOW OF DAILY MV
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....	X	1	40,000.	APPRAISAL
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....	X	3	97,150.	APPRAISAL
24 Archeological artifacts .....				
25 Other ▶ ( <u>EQUIPMENT</u> ) .....	X	1	17,086.	FMV
26 Other ▶ ( <u>GOODS/SERVICE</u> ) .....	X	2	3,866.	FMV
27 Other ▶ ( _____ ) .....				
28 Other ▶ ( _____ ) .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29** **12**

	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 purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2017



**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

NUMBER OF CONTRIBUTORS.

Multiple horizontal lines for data entry.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Open to Public  
Inspection

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

FORM 990, PART III, LINE 1: MISSION STATEMENT

IN AN ENVIRONMENT THAT FOSTERS THE FREE EXCHANGE OF IDEAS, LAFAYETTE COLLEGE SEEKS TO NURTURE THE INQUIRING MIND AND TO INTEGRATE INTELLECTUAL, SOCIAL, AND PERSONAL GROWTH. THE COLLEGE STRIVES TO DEVELOP STUDENTS' SKILLS OF CRITICAL THINKING, VERBAL COMMUNICATION, AND QUANTITATIVE REASONING AND THEIR CAPACITY FOR CREATIVE ENDEAVOR; IT ENCOURAGES STUDENTS TO EXAMINE THE TRADITIONS OF THEIR OWN CULTURE AND THOSE OF OTHERS; TO DEVELOP SYSTEMS OF VALUES THAT INCLUDE AN UNDERSTANDING OF PERSONAL, SOCIAL, AND PROFESSIONAL RESPONSIBILITY; AND TO REGARD EDUCATION AS AN INDISPENSABLE, LIFELONG PROCESS.

FORM 990, PART VI, SECTION A, LINE 1:

GOVERNANCE, MANAGEMENT, AND DISCLOSURE - GOVERNING BODY AND MANAGEMENT

THE EXECUTIVE COMMITTEE OF THE BOARD CONSISTS OF THE CHAIR, VICE CHAIR, AND SECRETARY OF THE BOARD, THE CHAIRS OF THE STANDING COMMITTEES OF THE BOARD, THE PRESIDENT OF THE COLLEGE, AND THE IMMEDIATE PAST CHAIR OF THE BOARD FOR THE PERIOD OF ONE YEAR NEXT ENSUING THE TERMINATION OF HIS OR HER INCUMBENCY IN THAT OFFICE IN THE EVENT HE OR SHE CONTINUES TO SERVE DURING THAT PERIOD AS A MEMBER OF THE BOARD OF TRUSTEES.

THE EXECUTIVE COMMITTEE TRANSACTS SUCH BUSINESS AS MAY BE COMMITTED TO IT BY THE BOARD, AND, WHEN THE BUSINESS OF THE COLLEGE REQUIRES, IT MAY ACT FOR THE BOARD IN ALL MATTERS NOT ESPECIALLY RESERVED, SUBJECT TO APPROVAL BY THE BOARD AT ITS FIRST MEETING THEREAFTER. THE COMMITTEE HAS THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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

732211 09-07-17

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

FOLLOWING RESPONSIBILITIES: DEVELOPMENT OF A LONG-RANGE MASTER PLAN FOR THE COLLEGE SUBJECT TO PERIODIC REVIEW AND REVISION; CONSIDER AND RECOMMEND POLICIES FOR FINANCIAL LONG-RANGE PLANNING, BUDGETING, PRICING AND FEES; NOMINATE CANDIDATES FOR THE BOARD. COPIES OF THE MINUTES OF ITS TRANSACTIONS ARE CIRCULATED AMONG THE MEMBERS OF THE BOARD PRIOR TO THE NEXT ENSUING MEETING OF THE BOARD, AND, WHEN APPROVED, REPORTED AS TRANSACTIONS OF THE BOARD.

FORM 990, PART VI, SECTION A, LINE 2:

GOVERNANCE, MANAGEMENT, AND DISCLOSURE - GOVERNING BODY AND MANAGEMENT

FROM TIME TO TIME, VARIOUS TRUSTEES MAY HAVE RELATIONSHIPS OCCURRING IN THE NORMAL COURSE OF BUSINESS. THESE TRANSACTIONS ARE AT ARM'S LENGTH AND REPORTED TO THE COLLEGE IN COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 11B:

GOVERNANCE, MANAGEMENT, AND DISCLOSURE - POLICIES

PROCESS FOR THE REVIEW OF FORM 990

THE FORM 990 RETURN IS PREPARED BY THE COLLEGE'S ADMINISTRATION AND FORWARDED TO THE COLLEGE'S OUTSIDE TAX ADVISOR FOR REVIEW AND INPUT INTO ELECTRONIC MEDIA. THE COLLEGE WILL DISCUSS THE RETURN WITH ITS OUTSIDE TAX ADVISOR AND MAKE REVISIONS PRIOR TO PRINTING THE FIRST DRAFT RETURN. THE AUDIT COMMITTEE REVIEWS THE FIRST DRAFT RETURN, RECOMMENDS CHANGES, WHICH ARE THEN INCORPORATED INTO A REVISED DRAFT RETURN. THE AUDIT COMMITTEE REVIEWS THE SECOND DRAFT RETURN TO ENSURE THE COMMITTEE'S REQUESTED CHANGES WERE MADE.

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

THE ADMINISTRATION WILL THEN DISTRIBUTE THE SECOND DRAFT RETURN TO THE FULL BOARD OF TRUSTEES WITH A REQUEST FOR REVIEW AND COMMENT. IF ANY QUESTIONS OR COMMENTS ARE RECEIVED FROM A BOARD MEMBER AND THE RETURN IS REVISED AS A RESULT, THE ADMINISTRATION WILL ADVISE THE FULL BOARD OF THE CHANGE BEFORE FILING OF THE FINAL RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY FOR TRUSTEES, BOARD MEMBERS, OFFICERS OF THE ADMINISTRATION, AND OTHER KEY EMPLOYEES OF THE COLLEGE WAS APPROVED BY THE COLLEGE'S BOARD OF TRUSTEES ON OCTOBER 27, 1979. THIS POLICY IS PROVIDED TO ALL APPLICABLE INDIVIDUALS ANNUALLY FOR THEIR REVIEW AND DISCLOSURE OF BOTH ANY EXCEPTIONS TO THE POLICY AND ANY AFFILIATIONS FOR WHICH THE POLICY REQUIRES DISCLOSURE. THE COLLEGE ALSO REQUIRES THE SAME INDIVIDUALS TO PREPARE A FORM 990 DISCLOSURE ANNUALLY.

ALL DISCLOSURES REQUIRED UNDER THIS POLICY MUST BE DIRECTED IN WRITING TO THE SECRETARY OF THE BOARD OF TRUSTEES WHO IS RESPONSIBLE FOR THE ADMINISTRATION OF THIS POLICY. MATTERS UNDER THIS POLICY CONCERNING TRUSTEES ARE INITIALLY REPORTED TO THE CHAIRPERSON OF THE BOARD AND THE COLLEGE'S GENERAL COUNSEL FOR ACTION. MATTERS CONCERNING STAFF ARE REFERRED INITIALLY TO THE COLLEGE'S GENERAL COUNSEL AND THEN TO THE PRESIDENT. INFORMATION DISCLOSED TO THE SECRETARY (OR CHAIRPERSON OR PRESIDENT) IS HELD IN CONFIDENCE EXCEPT WHEN THE BEST INTEREST OF THE INSTITUTION IS SERVED BY DISCLOSING THE INFORMATION TO THE BOARD IN EXECUTIVE SESSION.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS FOR DETERMINING THE COMPENSATION OF THE OFFICERS OF THE

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

## ADMINISTRATION:

THE PRESIDENT RECOMMENDS THE COMPENSATION FOR OFFICERS (VICE-PRESIDENTS).  
 BASED ON A WRITTEN ANNUAL PERFORMANCE SUMMARY, EACH OFFICER'S COMPENSATION  
 IS THEN ESTABLISHED BY THE COMPENSATION COMMITTEE WHICH REVIEWS DATA  
 OBTAINED FROM ITS EXTERNAL COMPENSATION CONSULTANT ON SALARIES OF  
 COMPARABLE OFFICERS FROM COMPARABLE INSTITUTIONS AND ADJUSTS THAT DATA  
 THROUGH SURVEYS AND OTHER AVAILABLE RESOURCES.

## FORM 990, PART VI, SECTION C, LINE 19:

THE COLLEGE'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S  
 PUBLIC WEBSITE. THE COLLEGE'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST  
 POLICY ARE NOT AVAILABLE TO THE PUBLIC ON ITS WEBSITE.

REQUESTS FOR COPIES OF FORMS 990 AND 990T ARE PROVIDED PROMPTLY UPON  
 REQUEST IN EITHER HARD-COPY OR ELECTRONIC FORMS, AND THE COLLEGE DOES NOT  
 CHARGE FOR EITHER COPYING OR MAILING COSTS.

AFTER THE FILING OF THE FORM 990 RETURN FOR THE SAME TAX YEAR, THE COLLEGE  
 WILL PROVIDE A COPY TO GUIDESTAR FOR PUBLICATION ON THEIR WEBSITE.

## FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN ESTIMATE ANNUITIES PAYABLE	2,767,476.
CHANGE IN FAIR VALUE OF HEDGE/SWAPS	3,191,062.
CHANGE IN POSTRETIREMENT BENEFITS	108,000.
TOTAL TO FORM 990, PART XI, LINE 9	6,066,538.









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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....	X	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CHARITABLE REMAINDER TRUSTS	S	707,452.	CASH VALUE
(2) CHARITABLE REMAINDER TRUSTS	S	487,735.	CASH VALUE
(3)			
(4)			
(5)			
(6)			



**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.