

Form **8879-TE**

# IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022

# 2021

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer LAFAYETTE COLLEGE EIN or SSN 24-0795686

Name and title of officer or person subject to tax ANDREA BOHN  
ASSISTANT VP & CONTROLLER

## Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>266,381,429.</u>
2a	Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a	Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a	Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a	Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a	Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a	Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

### PIN: check one box only

I authorize GRANT THORNTON LLP to enter my PIN 10156  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax [Signature] Date 5/11/2023 | 9:26 AM

## Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

13686736605

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Dan Romano Date 5/10/2023 | 8:41 PM CDT

**ERO Must Retain This Form - See Instructions**

**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2021**

Department of the Treasury  
Internal Revenue Service

▶ 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.

Open to Public Inspection

**A** For the **2021** calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022

<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 LAFAYETTE COLLEGE		<b>D</b> Employer identification number 24-0795686
	Doing business as		<b>E</b> Telephone number (610) 330-5136
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	730 SULLIVAN ROAD, 030 MARQUIS HALL		<b>G</b> Gross receipts \$ 691,566,100.
	City or town, state or province, country, and ZIP or foreign postal code EASTON, PA 18042-1778		
<b>F</b> Name and address of principal officer: NICOLE FARMER HURD SAME AS C ABOVE		<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 ▶	

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.LAFAYETTE.EDU

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: 1826 **M** State of legal domicile: PA

<b>Part I Summary</b>		Prior Year	Current Year
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: PROVISION OF EDUCATIONAL SERVICES AS AN ACCREDITED FOUR-YEAR UNDERGRADUATE COLLEGE.		
	<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>3</b>	35
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	34
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	2207
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	3413
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	-1,246,367.
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	20,693,664.	31,962,079.
	<b>9</b> Program service revenue (Part VIII, line 2g)	148,585,050.	191,649,866.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	64,069,048.	39,339,968.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	897,580.	3,429,516.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	234,245,342.	266,381,429.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	47,643,620.	62,919,311.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	90,141,630.	95,926,766.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	29,000.	19,400.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,108,569.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	67,830,874.	82,315,960.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	205,645,124.	241,181,437.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	28,600,218.	25,199,992.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 1,615,001,306.	<b>End of Year</b> 1,574,043,978.
	<b>21</b> Total liabilities (Part X, line 26)	384,418,436.	372,866,888.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,230,582,870.	1,201,177,090.

**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	5/11/2023			
	ANDREA BOHN, ASSISTANT VP & CONTROLLER	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name DANIEL ROMANO	Preparer's signature <i>Electronically Filed</i>	Date	Check if self-employed <input type="checkbox"/>	PTIN P00504182
	Firm's name ▶ GRANT THORNTON LLP	Firm's EIN ▶ 36-6055558	Phone no. (212) 599-0100		
Firm's address ▶ 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013					

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: 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, (CONTINUED IN SCH 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 If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 173,649,842. including grants of \$ 62,919,311. ) (Revenue \$ 152,896,663. ) 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 2021, THE 2,725 FULL-TIME STUDENTS CAME FROM 43 STATES AND 52 COUNTRIES. THE STUDENT-TO FACULTY RATIO AT THE COLLEGE IS APPROXIMATELY 10 TO 1. OF THE 243 FULL-TIME FACULTY, 239 HOLD A DOCTORATE OR OTHER TERMINAL DEGREE. APPROXIMATELY 56% OF THE STUDENTS ATTENDING LAFAYETTE COLLEGE RECEIVE FINANCIAL ASSISTANCE. 694 STUDENTS WERE AWARDED AN UNDERGRADUATE DEGREE. LAFAYETTE COLLEGE HAS A FOUR-YEAR GRADUATION RATE OF 85% AND SIX-YEAR GRADUATION RATE OF 89%. APPROXIMATELY 91% OF THE COLLEGE'S GRADUATES WERE EMPLOYED, IN GRADUATE SCHOOL, OR SECURED INTERNSHIPS WITHIN 6 MONTHS AFTER GRADUATION.

4b (Code: ) (Expenses \$ 31,478,966. including grants of \$ ) (Revenue \$ 38,753,203. ) AS A RESIDENTIAL COLLEGE, LAFAYETTE STUDENTS COMPLEMENT THEIR ACADEMIC SCHOLARSHIP WITH A MYRIAD OF 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 150 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 on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 205,128,808.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and financial reporting.

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

	Yes	No
<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 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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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 the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <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 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 on 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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 35; 1b Enter the number of voting members included... 34; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... X; b Other officers or key employees of the organization... X; If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b 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? X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, FL, NH, NJ, NY, PA, WA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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.
[X] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on 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
ANDREA BOHN - 610-330-3308
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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ALISON R. BYERLY FORMER PRESIDENT	0.00 0.00						X	1,723,521.	0.	62,649.
(2) KRISHNA MEMANI CHIEF INVESTMENT OFFICER	50.00 0.00			X				714,170.	0.	52,669.
(3) MERVIN A. BURTON DIR OF INVESTMENTS (THRU 07/2021)	50.00 0.00					X		517,739.	0.	12,115.
(4) ROGER A. DEMARESKI VP FIN & ADMIN/TREAS (THRU 11/2021)	50.00 0.00			X				418,890.	0.	104,288.
(5) LESLIE F. MUHLFELDER VP HUMAN RESOURCES, GENERAL COUNSEL	50.00 0.00			X				353,684.	0.	62,992.
(6) KIMBERLY A. SPANG VP DEVELOPMENT & COLLEGE RELATIONS	50.00 0.00			X				332,850.	0.	45,689.
(7) JOHN E. MEIER PROVOST	50.00 0.00			X				316,090.	0.	56,357.
(8) LI ZHAO INVESTMENT ASSOCIATE	50.00 0.00					X		350,127.	0.	13,851.
(9) NICOLE HURD PRESIDENT (AS OF 07/2021)	50.00 0.00	X		X				291,578.	0.	67,890.
(10) GREGORY V. MACDONALD VP ENROLLMENT MGMT (THRU 04/2022)	50.00 0.00			X				257,495.	0.	99,415.
(11) SAIYID A. RIZVI PROFESSOR OF ECONOMICS	50.00 0.00					X		320,490.	0.	34,574.
(12) JOHN M. GARRETT HEAD COACH - FOOTBALL (THRU 12/2021)	45.00 0.00					X		278,157.	0.	42,369.
(13) CRAIG BECKER ASSOC VP FINANCE	50.00 0.00				X			269,536.	0.	43,357.
(14) BRUCE A. MURPHY KIRBY PROFESSOR OF GOVERNMENT & LAW	50.00 0.00					X		270,023.	0.	40,279.
(15) JOHN L. O'KEEFE VP & CHIEF INFORMATION OFFICER	50.00 0.00			X				243,581.	0.	36,845.
(16) ANNETTE DIORIO VP CAMPUS LIFE	50.00 0.00			X				242,731.	0.	27,084.
(17) MARK EYERLY VP MARKETING & COMM (THRU 06/2022)	50.00 0.00			X				230,719.	0.	35,724.



**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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ALMA SCOTT-BUCZAK ASSOC VP HUMAN RESOURCES	50.00 0.00				X			209,305.	0.	37,714.
(19) ROBERT E. SELL CHAIR	5.00 0.00	X		X				0.	0.	0.
(20) LINDA ASSANTE CARRASCO VICE CHAIR	5.00 0.00	X		X				0.	0.	0.
(21) ANGEL L. MENDEZ SECRETARY	5.00 0.00	X		X				0.	0.	0.
(22) EDWARD W. AHART EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(23) SAMUEL R. CHAPIN EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(24) ANTONIO F. FERNANDEZ EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(25) SUSAN L. FOX EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(26) JEFFERSON W. KIRBY EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
<b>1b Subtotal</b>								7,340,686.	0.	875,861.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								7,340,686.	0.	875,861.

**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 195

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
BON APPETIT MANAGEMENT COMPANY 2400 YORKMONT ROAD, CHARLOTTE, NC 28217	DINING SERVICES	12,175,614.
DEL VALLEY PROPERTIES INC 11 CHASE HOLLOW ROAD, HOPEWELL, NJ 08525	CONSTRUCTION	11,434,578.
ALLIED BUILDING CORP 74 W. BROAD STREET, BETHLEHEM, PA 18018	CONSTRUCTION	3,414,313.
CSI INTERNATIONAL INC., 6700 NORTH ANDREWS AVENUE, FORT LAUDERDALE, FL 33309	CUSTODIAL SERVICES	1,247,099.
EASTON COACH COMPANY 1200 CONROY PLACE, EASTON, PA 18040	TRANSPORTATION SERVICES	790,605.

**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 40

SEE PART VII, SECTION A CONTINUATION SHEETS

<b>Part VII</b> Section A. <b>Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> (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) LEO A. HELMERS EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(28) JUDSON C. LINVILLE EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(29) PAMELA S. PASSMAN EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(30) J.B. REILLY EXECUTIVE COMMITTEE	3.00 0.00	X						0.	0.	0.
(31) JAMES L. BENJAMIN TRUSTEE	2.00 0.00	X						0.	0.	0.
(32) KIMBERLY W. BENSTON TRUSTEE	2.00 0.00	X						0.	0.	0.
(33) JAMES R. BIRLE, JR. TRUSTEE	2.00 0.00	X						0.	0.	0.
(34) HARRY S. CHERKEN TRUSTEE	2.00 0.00	X						0.	0.	0.
(35) SEBASTIAN J. CRAPANZANO TRUSTEE	2.00 0.00	X						0.	0.	0.
(36) TANUJA MAJUMDAR DEHNE TRUSTEE	2.00 0.00	X						0.	0.	0.
(37) LANETA J. DORFLINGER TRUSTEE	2.00 0.00	X						0.	0.	0.
(38) JOHN A. FRY TRUSTEE	2.00 0.00	X						0.	0.	0.
(39) MICHAEL C. HEANEY TRUSTEE	2.00 0.00	X						0.	0.	0.
(40) HAROLD N. KAMINE TRUSTEE	2.00 0.00	X						0.	0.	0.
(41) LISA J. KASSEL TRUSTEE	2.00 0.00	X						0.	0.	0.
(42) BARBARA LEVY TRUSTEE	2.00 0.00	X						0.	0.	0.
(43) CLAUDINE D. LILIE TRUSTEE	2.00 0.00	X						0.	0.	0.
(44) D. CHRISTIAN MCCUMBER TRUSTEE	2.00 0.00	X						0.	0.	0.
(45) CYNTHIA Y. PAIGE TRUSTEE	2.00 0.00	X						0.	0.	0.
(46) JOSE A. RODRIGUEZ TRUSTEE	2.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

**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			
(47) DAVID M. ROTH TRUSTEE	2.00 0.00	X						0.	0.	0.
(48) PETER S. RUGGIERO TRUSTEE	2.00 0.00	X						0.	0.	0.
(49) WILLIAM H. SPENCE TRUSTEE	2.00 0.00	X						0.	0.	0.
(50) LAUREN A. STEINITZ TRUSTEE	2.00 0.00	X						0.	0.	0.
(51) WYNNE A. WHITMAN TRUSTEE	2.00 0.00	X						0.	0.	0.
(52) ALVIN M. YEARWOOD TRUSTEE	2.00 0.00	X						0.	0.	0.
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	
Contributions, Gifts, Grants and Other Similar Amounts	<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>	29,139.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	7,545,585.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	24,387,355.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 2,642,866.				
	<b>h Total.</b> Add lines 1a-1f .....		31,962,079.				
Program Service Revenue	<b>2 a</b> TUITION AND FEES	Business Code					
		611710	152,896,663.	152,896,663.			
	<b>b</b> AUXILIARY SERVICES	611710	37,014,659.	37,014,659.			
	<b>c</b> ATHLETIC/SPORT NETWORK	611710	1,738,544.	1,708,694.	29,850.		
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....		191,649,866.					
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		7,648,654.		-1,296,195.	8,944,849.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
			811,337.				
	<b>b</b> Less: rental expenses ...	<b>6b</b>	531,156.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	280,181.				
	<b>d</b> Net rental income or (loss) .....		280,181.			280,181.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
			454,830,495.				
			<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	423,139,181.		
	<b>c</b> Gain or (loss) .....	<b>7c</b>	31,691,314.				
<b>d</b> Net gain or (loss) .....		31,691,314.			31,691,314.		
<b>8 a</b> Gross income from fundraising events (not including \$ 29,139. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>	30,025.					
		<b>b</b> Less: direct expenses .....	<b>8b</b>	21,853.			
<b>c</b> Net income or (loss) from fundraising events .....		8,172.			8,172.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
		<b>b</b> Less: direct expenses .....	<b>9b</b>				
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>	1,602,008.					
		<b>b</b> Less: cost of goods sold .....	<b>10b</b>	1,492,481.			
		<b>c</b> Net income or (loss) from sales of inventory .....		109,527.		19,978.	89,549.
Miscellaneous Revenue	<b>11 a</b> OTHER INCOME	Business Code					
		900099	2,148,433.			2,148,433.	
	<b>b</b> FEES/FINES/COST RCYV.	900099	883,203.			883,203.	
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....		3,031,636.					
<b>12 Total revenue.</b> See instructions .....		266,381,429.	191,620,016.	-1,246,367.	44,045,701.		

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....	62,919,311.	62,919,311.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	6,430,379.	1,612,617.	4,439,224.	378,538.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....	1,786,170.		1,786,170.	
<b>7</b> Other salaries and wages .....	66,295,539.	55,742,543.	7,765,417.	2,787,579.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,893,859.	5,150,668.	503,701.	239,490.
<b>9</b> Other employee benefits .....	10,354,350.	7,695,116.	2,091,699.	567,535.
<b>10</b> Payroll taxes .....	5,166,469.	4,344,065.	605,166.	217,238.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	497,128.	49,923.	427,877.	19,328.
<b>c</b> Accounting .....	265,187.		265,187.	
<b>d</b> Lobbying .....	4,048.		4,048.	
<b>e</b> Professional fundraising services. See Part IV, line 17	19,400.			19,400.
<b>f</b> Investment management fees .....	578,154.		578,154.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	8,502,892.	6,843,164.	1,537,628.	122,100.
<b>12</b> Advertising and promotion .....	138,881.	126,241.	12,441.	199.
<b>13</b> Office expenses .....	3,324,258.	2,475,238.	621,463.	227,557.
<b>14</b> Information technology .....	2,561,034.	281,820.	2,245,063.	34,151.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	8,331,663.	7,392,666.	938,997.	
<b>17</b> Travel .....	6,495,178.	6,016,058.	371,456.	107,664.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	1,885,196.	607,314.	945,106.	332,776.
<b>20</b> Interest .....	9,849,244.	9,556,048.	293,196.	
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	15,596,102.	14,196,894.	1,399,208.	
<b>23</b> Insurance .....	2,692,582.	383,228.	2,309,354.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> AUXILIARY SERVICES	12,493,440.	12,455,263.	38,177.	
<b>b</b> NON-OFFICE SUPPLIES	4,584,265.	4,559,504.	24,599.	162.
<b>c</b> OTHER EXPENSES	4,516,708.	3,323,007.	1,138,849.	54,852.
<b>d</b> ALLOCATION OF INDIRECT	0.	-601,880.	601,880.	
<b>e</b> All other expenses .....				
<b>25</b> Total functional expenses. Add lines 1 through 24e	241,181,437.	205,128,808.	30,944,060.	5,108,569.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	11,608.	<b>1</b>	17,979.
	<b>2</b> Savings and temporary cash investments .....	76,815,011.	<b>2</b>	84,711,315.
	<b>3</b> Pledges and grants receivable, net .....	9,679,669.	<b>3</b>	13,203,290.
	<b>4</b> Accounts receivable, net .....	842,745.	<b>4</b>	2,204,240.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	968,276.	<b>8</b>	245,301.
	<b>9</b> Prepaid expenses and deferred charges .....	2,119,958.	<b>9</b>	3,874,236.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 709,024,356.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 297,785,555.		
	<b>11</b> Investments - publicly traded securities .....	396,686,401.	<b>10c</b>	411,238,801.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	285,315,884.	<b>11</b>	211,665,656.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	839,610,153.	<b>12</b>	843,670,466.
	<b>14</b> Intangible assets .....	1,878,162.	<b>13</b>	1,719,293.
	<b>15</b> Other assets. See Part IV, line 11 .....	1,073,439.	<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,615,001,306.	<b>15</b>	1,493,401.	
		<b>16</b>	1,574,043,978.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	18,177,642.	<b>17</b>	19,906,395.
	<b>18</b> Grants payable .....	395,249.	<b>18</b>	207,540.
	<b>19</b> Deferred revenue .....	2,183,269.	<b>19</b>	1,899,869.
	<b>20</b> Tax-exempt bond liabilities .....	214,861,169.	<b>20</b>	213,185,787.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	4,940,413.	<b>21</b>	4,120,227.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	70,084,607.	<b>23</b>	81,464,404.
	<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 .....	73,776,087.	<b>25</b>	52,082,666.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	384,418,436.	<b>26</b>	372,866,888.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	373,165,842.	<b>27</b>	397,255,233.
	<b>28</b> Net assets with donor restrictions .....	857,417,028.	<b>28</b>	803,921,857.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	1,230,582,870.	<b>32</b>	1,201,177,090.
<b>33</b> Total liabilities and net assets/fund balances .....	1,615,001,306.	<b>33</b>	1,574,043,978.	

**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>	266,381,429.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	241,181,437.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	25,199,992.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	1,230,582,870.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-72,594,635.
<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 on Schedule O)	<b>9</b>	17,988,863.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	1,201,177,090.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** 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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- 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 on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

Form 990 (2021)

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

<b>Name of the organization</b> LAFAYETTE COLLEGE	<b>Employer identification number</b> 24-0795686
------------------------------------------------------	-----------------------------------------------------

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .....

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						



**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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	33,519,231.	31,281,134.	20,135,118.	20,693,664.	31,962,079.	137,591,226.
<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 .....	33,519,231.	31,281,134.	20,135,118.	20,693,664.	31,962,079.	137,591,226.
<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) .....						5,662,645.
<b>6 Public support.</b> Subtract line 5 from line 4.						131,928,581.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	33,519,231.	31,281,134.	20,135,118.	20,693,664.	31,962,079.	137,591,226.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	23,653,817.	1,993,336.		8,178,493.	9,756,186.	43,581,832.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....				0.	0.	
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	2,982,683.	3,826,479.	2,926,137.	1,373,775.	3,031,636.	14,140,710.
<b>11 Total support.</b> Add lines 7 through 10						195,313,768.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	862,942,173.
<b>13 First 5 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 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	67.55 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	67.75 %
<b>16a 33 1/3% support test - 2021.</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 - 2020.</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 - 2021.</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 - 2020.</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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on 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 5 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 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</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 (as 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls... b A family member... c A 35% controlled entity...

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity... Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s)...

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year... Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected... Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice...

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test... b The organization is the parent of each of its supported organizations... c The organization supported a governmental entity... Row 2: Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes... b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement... Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees... b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?

**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.

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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 ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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).		

Schedule A (Form 990) 2021

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2021 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2021</b>	<b>(iii) Distributable Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

Schedule A (Form 990) 2021

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

2017 AMOUNT: \$ 2,368,721.

2018 AMOUNT: \$ 3,226,945.

2019 AMOUNT: \$ 2,308,327.

2020 AMOUNT: \$ 900,289.

2021 AMOUNT: \$ 2,148,433.

FEES, FINES, COST RECOVERY

2017 AMOUNT: \$ 613,962.

2018 AMOUNT: \$ 599,534.

2019 AMOUNT: \$ 617,810.

2020 AMOUNT: \$ 473,486.

2021 AMOUNT: \$ 883,203.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2021**

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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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).



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

**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/>	\$ 1,035,603.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 877,701.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 733,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

**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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

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

**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	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

- 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 <p style="text-align: center;">LAFAYETTE COLLEGE</p>	Employer identification number <p style="text-align: center;">24-0795686</p>
------------------------------------------------------------------------------	---------------------------------------------------------------------------------

**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 ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**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 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  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) 2021

**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 (grassroots 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? .....														

Yes  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) 2018	(b) 2019	(c) 2020	(d) 2021	(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	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....	X		4,048.
<b>j</b> Total. Add lines 1c through 1i .....			4,048.
<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 for instructions and the latest information.

OMB No. 1545-0047

2021

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 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?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 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)?, 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.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 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 FASB 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) 2021



**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 make 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 program
  - 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	1,085,030,761.	862,906,493.	861,783,526.	870,744,623.	833,069,757.
b Contributions	12,461,042.	14,744,584.	18,379,803.	18,402,651.	21,306,093.
c Net investment earnings, gains, and losses	-31,004,600.	248,378,756.	26,736,866.	16,998,749.	59,205,615.
d Grants or scholarships	9,799,641.	9,542,677.	8,842,283.	8,817,916.	8,175,815.
e Other expenditures for facilities and programs	32,221,359.	31,456,395.	32,165,568.	32,433,775.	31,783,314.
f Administrative expenses	2,663,837.		2,985,851.	3,110,806.	2,877,713.
g End of year balance	1,021,802,366.	1,085,030,761.	862,906,493.	861,783,526.	870,744,623.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  25.2800 %
  - b Permanent endowment  40.6500 %
  - c Term endowment  34.0700 %
- 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:
- |                                                                                                                     | Yes | No |
|---------------------------------------------------------------------------------------------------------------------|-----|----|
| (i) Unrelated organizations                                                                                         | X   |    |
| (ii) Related organizations                                                                                          |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> |     |    |

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		10,001,739.		10,001,739.
b Buildings		505,745,749.	197,327,633.	308,418,116.
c Leasehold improvements		67,871,695.	36,506,487.	31,365,208.
d Equipment		83,300,624.	63,951,435.	19,349,189.
e Other		42,104,549.		42,104,549.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				411,238,801.

**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) EVENT DRIVEN/DISTRESSED	5,515,585.	END-OF-YEAR MARKET VALUE
(B) LONG/SHORT EQUITY	390,802,464.	END-OF-YEAR MARKET VALUE
(C) MULTI STRATEGY/ABSOLUTE RETURN	157,203,777.	END-OF-YEAR MARKET VALUE
(D) REAL ESTATE	5,399,327.	END-OF-YEAR MARKET VALUE
(E) PRIVATE EQUITY	284,749,313.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	843,670,466.	

**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) ANNUITIES PAYABLE	15,586,007.
(3) POST RETIREMENT BENEFITS	27,466,165.
(4) CONDITIONAL ASSET RETIREMENT OBLIGATION	1,841,841.
(5) INTEREST RATE SWAP AGREEMENTS	7,188,653.
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	52,082,666.

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 FASB 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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	149,852,860.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-72,594,635.	
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-45,401,270.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	-117,995,905.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	267,848,765.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	578,154.	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	-2,045,490.	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	-1,467,336.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	266,381,429.

**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.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	179,258,640.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	2,045,490.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	2,045,490.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	177,213,150.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	578,154.	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	63,390,133.	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	63,968,287.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	241,181,437.

**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 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

**Part XIII** Supplemental Information (continued)

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'  
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

**Part XIII** Supplemental Information (continued)

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 ORBUCULAR  
 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  
 THE COMMUNITY AT LARGE.

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 1,560 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,  
 PROFESSORSHIPS, CHAIRS, STUDENT LOANS, INSTRUCTIONAL PROGRAMS, LIBRARY  
 PURCHASES, GENERAL OPERATIONS, AND OTHER DESIGNATED PURPOSES.

PART X, LINE 2:

**Part XIII** Supplemental Information (continued)

## UNCERTAIN TAX POSITIONS UNDER FIN 48

U.S. GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE COLLEGE AND RECOGNIZE A TAX LIABILITY IF THE COLLEGE HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE IRS. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE COLLEGE, AND HAS CONCLUDED THAT AS OF JUNE 30, 2022, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

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

SCHOLARSHIPS AND FELLOWSHIPS	-60,726,297.
CHANGE IN ESTIMATED ANNUITIES PAYABLE	385,981.
CHANGE IN FAIR VALUE OF INTEREST RATE SWAP AGREEMENTS	6,333,937.
CHANGE IN POSTRETIREMENT BENEFITS COST	11,268,945.
INVESTMENT OFFICE EXPENSES	-2,663,836.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-45,401,270.

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

RENTAL REVENUES TO EXTENT EXPENDED	-531,156.
SPECIAL FUNDRAISING EVENT DIRECT EXPENSES	-21,853.
COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED	-1,492,481.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-2,045,490.

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

RENTAL REVENUES TO EXTENT EXPENDED	531,156.
SPECIAL FUNDRAISING EVENT DIRECT EXPENSES	21,853.
COLLEGE STORE (COGS) REVENUES TO EXTENT EXPENDED	1,492,481.

Schedule D (Form 990) 2021

**Part XIII** Supplemental Information (continued)

TOTAL TO SCHEDULE D, PART XII, LINE 2D 2,045,490.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS AND FELLOWSHIPS 60,726,297.

INVESTMENT OFFICE EXPENSES 2,663,836.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 63,390,133.

**SCHEDULE E**  
**(Form 990)**

**Schools**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **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.**

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

**Part I**

	YES	NO
<b>1</b> 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? .....	X	
<b>2</b> 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?	X	
<b>3</b> Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II .....	X	
<i>SEE PART II</i>		
<b>4</b> Does the organization maintain the following?		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? .....	X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ..	X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	X	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? .....	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
<b>5</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? .....		X
<b>b</b> Admissions policies? .....		X
<b>c</b> Employment of faculty or administrative staff? .....		X
<b>d</b> Scholarships or other financial assistance? .....		X
<b>e</b> Educational policies? .....		X
<b>f</b> Use of facilities? .....		X
<b>g</b> Athletic programs? .....		X
<b>h</b> Other extracurricular activities? .....		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
<b>6a</b> Does the organization receive any financial aid or assistance from a governmental agency? .....	X	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? .....		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
<b>7</b> 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 .....	X	

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

Schedule E (Form 990) 2021



**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 3 - EXPLANATION OF NONDISCRIMINATION POLICY:

THE COLLEGE'S RACIAL NONDISCRIMINATORY POLICY IS PUBLICIZED

WITHIN THE COLLEGE'S CATALOG WHICH CAN BE FOUND AT

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/.

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.

**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

**2021**

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		345,398,801.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		36,857,508.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	1,779.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	INSTRUCTION	136,333.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INSTRUCTION	59,851.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	17,872.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	INSTRUCTION	1,838,650.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT SERVICES	1,145.
<b>3 a Subtotal</b> .....	0	0			384,311,939.
<b>b Total from continuation sheets to Part I</b> .....	0	0			182,398.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			384,494,337.

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

Schedule F (Form 990) 2021

**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
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	1,300.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	896.
NORTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	3,650.
SOUTH AMERICA	0	0	PROGRAM SERVICES	INSTRUCTION	22,800.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	1,512.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	152,240.
<b>Totals</b> .....					182,398.

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities ..... ▶ \_\_\_\_\_

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

**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

**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 3:

THE ACCRUAL METHOD OF ACCOUNTING IS USED TO ACCOUNT FOR FOREIGN EXPENDITURES. INVESTMENTS ARE LISTED AT END OF YEAR FAIR MARKET VALUES.

PART IV, LINE 3:

LAFAYETTE REVIEWS THEIR INVESTMENTS AND ANY REQUIRED INTERNATIONAL FORMS ARE COMPLETED AND ATTACHED TO FORM 990-T FOR FILING AS NEEDED.

**SCHEDULE G  
(Form 990)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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.

**2021**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

**Open to Public  
Inspection**

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

Name of the organization <b>LAFAYETTE COLLEGE</b>	Employer identification number <b>24-0795686</b>
------------------------------------------------------	-----------------------------------------------------

**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			
WASHBURN & MCGOLDRICK - 950 NEW LOUDON ROAD, STE. 210,	CAMPAIGN CONSULTING		X	0.	19,400.	-19,400.
<b>Total</b>					19,400.	-19,400.

**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.

PA, CA, FL, NH, NJ, NY, WA

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**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))
		MAROON CLUB GOLF OUTING (event type)	(event type)	NONE (total number)	
Revenue	<b>1</b> Gross receipts .....	59,164.			59,164.
	<b>2</b> Less: Contributions .....	29,139.			29,139.
	<b>3</b> Gross income (line 1 minus line 2) .....	30,025.			30,025.
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....	9,500.			9,500.
	<b>7</b> Food and beverages .....	8,657.			8,657.
	<b>8</b> Entertainment .....	1,815.			1,815.
	<b>9</b> Other direct expenses .....	1,881.			1,881.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				21,853.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				8,172.	

**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: WASHBURN & MCGOLDRICK

(I) ADDRESS OF FUNDRAISER: 950 NEW LOUDON ROAD, STE. 210, LATHAM, NY 12110

SCHEDULE G, PART I, LINE 2B

DUE TO THE NATURE OF THE CONTRACT, IT IS DIFFICULT TO QUANTIFY AMOUNTS

DIRECTLY GENERATED FROM PROFESSIONAL FUNDRAISING ACTIVITIES. THEREFORE, ONLY AMOUNTS PAID TO PROFESSIONAL FUNDRAISER ARE REPORTED.



**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

**2021**

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

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

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

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

Schedule I (Form 990) 2021

**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	1470	60,726,297.	0.	N/A	N/A
ACADEMIC PRIZES, AWARDS, AND FELLOWSHIPS	208	406,225.	0.	N/A	N/A
CARES ACT GRANTS TO STUDENTS	2684	1,786,789.	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 (PRIMARYLY 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 POLICES AND OPERATIONAL GUIDLELINES. ACADEMIC PRIZES, AWARDS, FELLOWSHIPS 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.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

**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 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) 2021

**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 and/or 1099-NEC 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 FORMER PRESIDENT	(i)	0.	300,000.	1,423,521.	13,656.	48,993.	1,786,170.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KRISHNA MEMANI CHIEF INVESTMENT OFFICER	(i)	389,973.	321,406.	2,791.	27,550.	25,119.	766,839.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MERVIN A. BURTON DIR OF INVESTMENTS (THRU 07/2021)	(i)	134,089.	358,000.	25,650.	9,525.	2,590.	529,854.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ROGER A. DEMARESKI VP FIN & ADMIN/TREAS (THRU 11/2021)	(i)	378,951.	0.	39,939.	27,550.	76,738.	523,178.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) LESLIE F. MUHLFELDER VP HUMAN RESOURCES, GENERAL COUNSEL	(i)	340,047.	10,000.	3,637.	24,082.	38,910.	416,676.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KIMBERLY A. SPANG VP DEVELOPMENT & COLLEGE RELATIONS	(i)	321,456.	0.	11,394.	22,750.	22,939.	378,539.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JOHN E. MEIER PROVOST	(i)	314,016.	0.	2,074.	21,494.	34,863.	372,447.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LI ZHAO INVESTMENT ASSOCIATE	(i)	186,874.	163,000.	253.	13,393.	458.	363,978.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) NICOLE HURD PRESIDENT (AS OF 07/2021)	(i)	262,500.	0.	29,078.	24,938.	42,952.	359,468.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) GREGORY V. MACDONALD VP ENROLLMENT MGMT (THRU 04/2022)	(i)	253,173.	0.	4,322.	18,200.	81,215.	356,910.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SAIYID A. RIZVI PROFESSOR OF ECONOMICS	(i)	317,302.	0.	3,188.	20,341.	14,233.	355,064.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) JOHN M. GARRETT HEAD COACH - FOOTBALL (THRU 12/2021)	(i)	235,533.	0.	42,624.	19,630.	22,739.	320,526.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) CRAIG BECKER ASSOC VP FINANCE	(i)	264,908.	1,500.	3,128.	18,043.	25,314.	312,893.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) BRUCE A. MURPHY KIRBY PROFESSOR OF GOVERNMENT & LAW	(i)	265,305.	0.	4,718.	18,872.	21,407.	310,302.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JOHN L. O'KEEFE VP & CHIEF INFORMATION OFFICER	(i)	243,005.	0.	576.	17,100.	19,745.	280,426.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) ANNETTE DIORIO VP CAMPUS LIFE	(i)	231,173.	10,000.	1,558.	16,245.	10,839.	269,815.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2021



**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 and/or 1099-NEC 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) MARK EYERLY VP MARKETING & COMM (THRU 06/2022)	(i)	228,335.	0.	2,384.	16,174.	19,550.	266,443.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) ALMA SCOTT-BUCZAK ASSOC VP HUMAN RESOURCES	(i)	182,850.	0.	26,455.	13,322.	24,392.	247,019.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(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 2021, A \$1,524 TAX EQUALIZATION PAYMENT WAS MADE TO ALISON BYERLY (PRESIDENT, FORMER). THE PAYMENT IS IN ACCORDANCE WITH THE EMPLOYMENT CONTRACT AND/OR AUTHORIZATIONS FROM THE BOARD OF TRUSTEES AND ARE SPECIFIC TO THE PRESIDENT. DURING CALENDAR YEAR 2021, A \$870 TAX EQUALIZATION PAYMENT WAS MADE TO NICOLE FARMER HURD (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 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.

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 \$36,801 FOR FORMER PRESIDENT BYERLY AND \$35,474 FOR PRESIDENT  
NICOLE FARMER HURD. IT IS 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.

JOHN MEIER IS THE PROVOST FOR THE COLLEGE. AS PART OF HIS EMPLOYMENT  
CONTRACT HE IS REQUIRED TO RESIDE ON CAMPUS. HIS RESPONSIBILITIES AS  
PROVOST INCLUDE BEING AVAILABLE, IN THE ABSENCE AT ANY TIME OF THE  
COLLEGE'S PRESIDENT, TO STEP IN AND ASSUME THE PRESIDENT'S RESPONSIBILITIES  
TO HANDLE CAMPUS EMERGENCIES AND THE LIKE AS WELL AS TO FUNCTION AS THE  
COLLEGE'S CHIEF ACADEMIC OFFICER OVERSEEING ALL ACADEMIC DEPARTMENTS,  
PROGRAMS AND OPERATIONS AT THE COLLEGE.

PERSONAL SERVICES - IN ACCORDANCE WITH THE POLICY OF THE COLLEGE'S BOARD OF  
TRUSTEES AND THE PRESIDENT'S EMPLOYMENT CONTRACT, THE PRESIDENT OF COLLEGE  
IS REQUIRED TO RESIDE ON COLLEGE PROPERTY. THE PRESIDENT'S HOUSE SERVES NOT

**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.

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

2021, \$5,742 WAS THE PORTION OF THE HOUSEKEEPER'S SALARY 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

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 4A:

ALISON BYERLY CEASED TO BE PRESIDENT AS OF JUNE 30, 2021, AND PAYMENTS WERE

MADE TO HER IN CONNECTION WITH THE CONCLUSION OF HER EMPLOYMENT WITH 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.

COLLEGE AND IN CONNECTION WITH HER ASSISTANCE WITH TRANSITION MATTERS

THROUGH 2021. SHE RECEIVED PAYMENT OF ONE YEAR SALARY IN LIEU OF

SABBATICAL THAT WOULD HAVE BEEN PROVIDED UNDER HER EMPLOYMENT AGREEMENT HAD

SHE REMAINED EMPLOYED. SHE ALSO RECEIVED A PAYMENT TO FACILITATE THE

COLLEGE'S TRANSITION TO A NEW PRESIDENT THROUGHOUT THE 2021 YEAR. THE

PAYMENT IN LIEU OF SABBATICAL \$575,000 AND TRANSITION PAYMENT \$575,000 WERE

PAID IN CALENDAR 2021.

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 WORTHY OF THE

AWARD. THESE BONUSES ARE COMPLETELY DISCRETIONAL.

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

**2021**  
**Open to Public Inspection**

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

<b>Part I Bond Issues</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 2010 A AND B)	23-3007498	66353LAY3	04/30/10	26,689,800.	REFUND SERIES 10A, VAR. CAP. PROJECTS		X		X		X
<b>B</b> NORTHAMPTON CITY GPA (SERIES 2018)	23-3007498	66353LDL8	10/02/18	21,520,883.	COLLEGE REFUNDING REVENUE BONDS		X		X		X
<b>C</b> NORTHAMPTON CITY GPA (SERIES 2006)	23-3007498	66353LAG2	09/14/06	15,100,000.	CONSTRUCT./RENOV. ATHLETIC FACILITIES		X		X		X
<b>D</b> NORTHAMPTON CITY GPA (SERIES 2003)	23-3007498	66353LAA5	04/02/03	10,190,000.	REFUND SERIES 93		X		X		X

<b>Part II Proceeds</b>										
	A		B		C		D			
<b>1</b> Amount of bonds retired	4,485,173.		326,873.		4,189,573.					15,383.
<b>2</b> Amount of bonds legally defeased										
<b>3</b> Total proceeds of issue	26,690,421.		21,520,883.		15,100,000.					10,190,000.
<b>4</b> Gross proceeds in reserve funds										
<b>5</b> Capitalized interest from proceeds					108,121.					
<b>6</b> Proceeds in refunding escrows										
<b>7</b> Issuance costs from proceeds			370,883.							
<b>8</b> Credit enhancement from proceeds										
<b>9</b> Working capital expenditures from proceeds					10,709.					
<b>10</b> Capital expenditures from proceeds	4,400,421.				14,981,170.					
<b>11</b> Other spent proceeds	22,290,000.		21,150,000.							10,190,000.
<b>12</b> Other unspent proceeds										
<b>13</b> Year of substantial completion	2013		2018		2007		2003			
	Yes	No	Yes	No	Yes	No	Yes	No		
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X	X			X				X
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	X			X		X	X			
<b>16</b> Has the final allocation of proceeds been made?	X		X		X		X			
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X			

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

Schedule K (Form 990) 2021

**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.**

**2021**  
**Open to Public Inspection**

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

<b>Part I Bond Issues</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 2017)	23-3007498	66353LDE4	06/14/17	158,271,482.	CONSTRUCTION/PARTIAL ADVANCE REFUNDING PRIOR B		X		X		X
<b>B</b>											
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>			
<b>1</b> Amount of bonds retired .....	7,893,994.									
<b>2</b> Amount of bonds legally defeased .....										
<b>3</b> Total proceeds of issue .....	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 .....	80,000,000.									
<b>11</b> Other spent proceeds .....	77,259,495.									
<b>12</b> Other unspent proceeds .....										
<b>13</b> Year of substantial completion .....	2020									
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>		
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)? .....		X								
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)? .....	X									
<b>16</b> Has the final allocation of proceeds been made? .....	X									
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? .....	X									

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

Schedule K (Form 990) 2021

**Part III Private Business Use**

	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		X		X
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X		X		X		X
<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?								
<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 .....		%		%		%		%
<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 .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<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	



**Part III Private Business Use**

	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						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		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						
<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 .....		%		%		%		%
<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 .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		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						
<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							

**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						
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....		X						
<b>b</b> Exception to rebate? .....		X						
<b>c</b> No rebate due? .....	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						

**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<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? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X		X		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		X		X
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	X		X		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		X		X	

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

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**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		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? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		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						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	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							

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

PART I, BOND ISSUES:

(F) DESCRIPTION OF PURPOSE:

CONSTRUCTION/PARTIAL ADVANCE REFUNDING PRIOR BOND

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

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

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

(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

ISSUER NAME: NORTHAMPTON CITY GPA (SERIES 2017)

DATE THE REBATE COMPUTATION WAS PERFORMED: 06/15/2022

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

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

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.

PART II, LINE 3:

THE DIFFERENCE FROM PART I(E) IS DUE TO INVESTMENT EARNINGS.

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.

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 LAFAYETTE COLLEGE DATE THE REBATE COMPUTATION WAS PERFORMED: 07/15/2020 24-0795686 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 INTEREST RATE HEDGES ARE INTEGRATED FOR TAX PURPOSES WITH A PARTICULAR DEBT ISSUANCE OF THE COLLEGE.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

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 instructions and 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	1	224,600.	EXPERT OPINION
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		11,050.	FMV
5 Clothing and household goods	X		3,000.	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	71	2,313,040.	FMV
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	X	1	85,000.	
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( AUCTION/EVENT )	X	6	3,154.	COST
26 Other ( GOODS/SVCS )	X	1	1,622.	FMV
27 Other ( GOODS/SVCS )	X	1	1,400.	EXPERT OPINION
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 V, Donee Acknowledgement **29**

	2	
	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) 2021

**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):

THE NUMBER REPORTED IS THE NUMBER OF CONTRIBUTORS.

Multiple horizontal lines for supplemental information.

**SCHEDULE O  
(Form 990)**

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 Form 990-EZ.

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

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

LAFAYETTE COLLEGE

Employer identification number

24-0795686

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

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 1A:

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

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

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

Schedule O (Form 990) 2021

132211 11-11-21

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

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 - BUSINESS RELATIONSHIPS  
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.

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 CHANGES BEFORE  
FILING OF THE FINAL RETURN.

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



Name of the organization LAFAYETTE COLLEGE	Employer identification number 24-0795686
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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 REQUIRES THE SAME INDIVIDUALS TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE 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 COLLEGE IS SERVED BY DISCLOSING THE INFORMATION TO THE BOARD IN EXECUTIVE SESSION.

TRUSTEES, ASSOCIATES OR OFFICERS WHO HAVE DECLARED OR BEEN FOUND TO HAVE A CONFLICT OF INTEREST IN ANY MATTER BEFORE THE ADMINISTRATION OR THE BOARD SHALL REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE PROPOSED TRANSACTION, UNLESS FOR SPECIAL REASONS, THE BOARD OR ADMINISTRATION REQUESTS INFORMATION OR INTERPRETATION FROM THE PERSON OR PERSONS INVOLVED. THE PERSON OR PERSONS INVOLVED SHOULD NOT VOTE ON SUCH MATTERS AND SHOULD NOT BE PRESENT AT THE TIME OF THE VOTE.

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

THE PROCESS FOR DETERMINING THE COMPENSATION OF THE OFFICERS AND KEY

Name of the organization LAFAYETTE COLLEGE	Employer identification number 24-0795686
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EMPLOYEES OF THE ADMINISTRATION:

THE PROCESS FOR REVIEWING THE PRESIDENT'S COMPENSATION IS DISCLOSED ON SCHEDULE J, PART I, LINE 3 AND THE CORRESPONDING NARRATIVE ON SCHEDULE J, PART III. THE PRESIDENT RECOMMENDS THE COMPENSATION FOR OTHER OFFICERS (VICE-PRESIDENTS) AND KEY EMPLOYEES. 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. THE DELIBERATION AND FINAL DETERMINATION OF THE PRESIDENT, OTHER OFFICER, AND KEY EMPLOYEE COMPENSATION IS TIMELY DOCUMENTED.

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

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST AND TO THE EXTENT THEY ARE REQUIRED BY LAW.

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

CHANGE IN ESTIMATED ANNUITIES PAYABLE	385,981.
CHANGE IN FAIR VALUE OF INTEREST RATE SWAP AGREEMENTS	6,333,937.
CHANGE IN POSTRETIREMENT BENEFITS COST	11,268,945.
TOTAL TO FORM 990, PART XI, LINE 9	17,988,863.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

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

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
JOHN T GALLAHER CHARITABLE TRUST - 23-6215376, PO BOX 185, PITTSBURGH, PA 15230	PERPETUAL TRUST	PENNSYLVANIA	501(C)(3)	PF	LAFAYETTE COLLEGE	X	
CHARLES W BLAIR TESTAMENTARY TRUST B - 72-6130983, 10 S DEARBORN, CHICAGO, IL 60603	PERPETUAL TRUST	ILLINOIS	501(C)(3)	PF			X
CHURCH, PRESBYTERIAN CHURCH USA FOUNDATION - SIGLER - 23-1440115, 200 EAST TWELFTH STREET, STE B, JEFFERSONVILLE, TN 47130	PERPETUAL TRUST	TENNESSEE	501(C)(3)	PF			X
CHURCH, PRESBYTERIAN CHURCH USA FOUNDATION - RAYMOND MUSIC - 23-1440115, 200 EAST TWELFTH STREET, STE B, JEFFERSONVILLE, TN 47130	PERPETUAL TRUST	TENNESSEE	501(C)(3)	PF			X

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

Schedule R (Form 990) 2021

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER UNITRUSTS (24)	INVESTMENTS	PA	LAFAYETTE COLLEGE	TRUST			100%	X	
PERPETUAL TRUST (1)	INVESTMENTS	NV		TRUST					X
PERPETUAL TRUST (2)	INVESTMENTS	NV		TRUST					X
PERPETUAL TRUST (3)	INVESTMENTS	PA		TRUST					X

**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	373,687. FMV	
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

