### \*\* PUBLIC DISCLOSURE COPY \*\*

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

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

Department of the Treasury Internal Revenue Service

A F	or the	2021 calendar year, or tax year beginning	JL 1, 2021 and	ending J	UN 30, 2022	2	
<b>B</b> c	heck if	C Name of organization			D Employer	identificat	ion number
а	pplicable:						
	Address change	LAFAYETTE COLLEGE					
	Name change	Doing business as			24-0	795686	
	Initial return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/suite	E Telephone	number	
	Final	730 SULLIVAN ROAD, 030 MARQUIS HA	· ·	Troom, care		330-5136	
	⊣return/ termin- ated	City or town, state or province, country, and		l	<b>G</b> Gross receipt		691,566,100.
	∏Amende		Zii oi loreigii postai code		H(a) Is this a		
	_return	F Name and address of principal officer: NICO	LE FARMER HURD		1	ordinates?	
L	⊥tiòn pending	SAME AS C ABOVE			H(b) Are all sub		
	-0v ovor			or 527	1 `´		t. See instructions
	Mahaita	: ► WWW.LAFAYETTE.EDU	(IIISEIT IIO.) 4947(a)(1)	01 321	1		
			sociation Other	I Voor	H(c) Group e of formation: 1		
		Summary	Sociation United	L Year	oi iorination. 1	020   IVI S	tate of legal domicile: PA
1 0			· · · · · · · · · · · · · · · · · · ·	TON OF FI	NICA MICANA I		
ø		riefly describe the organization's mission or most		TON OF EL	DUCATIONAL		
au	-	ERVICES AS AN ACCREDITED FOUR-YEAR U	· · · · · · · · · · · · · · · · · · ·				
Governance	l		ntinued its operations or dispos	sed of more	than 25% of it	1 1	
Š	ı	umber of voting members of the governing body					35
		umber of independent voting members of the gov					34
es		otal number of individuals employed in calendar y					2207
ξ		otal number of volunteers (estimate if necessary)					3413
Activities &	7a ⊺	otal unrelated business revenue from Part VIII, co	lumn (C), line 12			7a	-1,246,367.
_	b N	et unrelated business taxable income from Form	990-T, Part I, line 11			7b	0.
					Prior Yea	r	Current Year
Φ	<b>8</b> C	ontributions and grants (Part VIII, line 1h)			20,69	3,664.	31,962,079.
ž	<b>9</b> P	rogram service revenue (Part VIII, line 2g)		148,58	5,050.	191,649,866.	
Revenue	<b>10</b> Ir	vestment income (Part VIII, column (A), lines 3, 4	and 7d)		64,06	9,048.	39,339,968.
Œ	<b>11</b> 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)		89	7,580.	3,429,516.
	l	otal revenue - add lines 8 through 11 (must equal			234,24	5,342.	266,381,429.
	<b>13</b> G	rants and similar amounts paid (Part IX, column (	A), lines 1-3)		47,64	3,620.	62,919,311.
	l	enefits paid to or for members (Part IX, column (A				0.	0.
w	l	alaries, other compensation, employee benefits (I			90,14	1,630.	95,926,766.
Expenses	ı	rofessional fundraising fees (Part IX, column (A), I			2	9,000.	19,400.
ber	ı	otal fundraising expenses (Part IX, column (D), line					· ·
Ä	ı	ther expenses (Part IX, column (A), lines 11a-11d	, , <u> </u>		67,83	0,874.	82,315,960.
		otal expenses. Add lines 13-17 (must equal Part I			205,64		241,181,437.
	l	evenue less expenses. Subtract line 18 from line				0,218.	25,199,992.
		evenue loos expenses. Cabildot into 10 from line		R <sub>0</sub>	ginning of Curre		End of Year
Net Assets or Fund Balances	<b>20</b> T	otal assets (Part X, line 16)			1,615,00		1,574,043,978.
Asse Bala	21 T	otal liabilities (Part X, line 10)			384,41		372,866,888.
let /	20 1	, , , , , , , , , , , , , , , , , , , ,	line 20		1,230,58		1,201,177,090.
	22 N	et assets or fund balances. Subtract line 21 from Signature Block	iine 20		1,230,30	2,070.	1,201,177,030.
		es of perjury, I declare that I have examined this return,	including accompanying achadula	a and atatama	anta and to the h	and of mulkn	owledge and halief it is
	•				•	-	owieuge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than office	i) is based on an imormation of w	nich preparer			
		Signature of officer			Date	1/2023	
Sig	י ו				Date		
Her	e	ANDREA BOHN, ASSISTANT VP & CONTR	OLLER				
		Type or print name and title		1 -	)oto	Ta. : ==	I DTIN
_		Print/Type preparer's name	Preparer's signature		Date	Check If	PTIN
Paid	· -	ANIEL ROMANO	Electronically Filed	l	ı	self-employed	P00504182
Prep	-	irm's name GRANT THORNTON LLP			Firm'	s EIN ▶ 3	86-6055558
Use	Only	Firm's address > 757 THIRD AVENUE, 3RD FI	OOR				
		NEW YORK, NY 10017-2013			Phon	e no.(212)	599-0100
Max	tha IDS	discuss this return with the preparer shown abo	vo? Coo instructions				X Ves No

Form 990 (2021) LAFAYETTE COLLEGE 24-0795686 Page **2** 

Pa	rt 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.	100110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Voc X No
3	If "Yes," describe these changes on Schedule O.	res NO
4	,	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	•
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total organization are required to report the amount of grants and allocations to others, the total organization are required to report the amount of grants and allocations to other the property of the p	expenses, and
	revenue, if any, for each program service reported.  (Code:) (Expenses \$173,649,842. including grants of \$62,919,311. ) (Revenue \$	152 896 663 \
4a	(Code:) (Expenses \$	132,030,003.
	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.	20 752 002
4b		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.	000
		Form <b>990</b> (2021)

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# Form 990 (2021) LAFAYETTE COLLEGE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
_	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	۰		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	···		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1114		
b		11b	х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
С		446		x
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11c		<del></del>
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	Х	<del></del>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	1 ie		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444	х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
	Schedule D, Parts XI and XII	12a	Λ	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	105		x
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	х	<del>  ^</del>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		Λ	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>  ^</del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	114	х	
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		$\vdash$
15		4-		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47	х	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	А	$\vdash$
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.	v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	$\vdash$
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			•
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			,,
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	L	Х

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# Form 990 (2021) Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			х
لم	any tax-exempt bonds?	24c 24d		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	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? If "Yes," complete Schedule L, Part II	26		Х
27	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? If "Yes," complete Schedule L, Part III	27		Х
28	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?  f	28c		х
29	"Yes," complete Schedule L, Part IV	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		
00	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
	1 1		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  1a 3826  Enter the number of Forms W-2G included on line 13. Enter -0- if not applicable	4		
b	Litter the number of Forms w-2d included of fine 1a. Litter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	(gambling) winnings to prize winners?	1 10		İ

Form	990 (2021) LAFAYETTE COLLEGE 24-079568	6	F	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Щ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		$\perp$
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		oxdot
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		$\perp$
	Note: See the instructions for additional information the organization must report on Schedule O.			

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

If "Yes," complete Form 4720, Schedule O.

Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

17

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans
 c Enter the amount of reserves on hand

excess parachute payment(s) during the year?

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

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

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

If "Yes," see the instructions and file Form 4720, Schedule N.

01734401

14a

14b

<u>15</u>

If "Yes," complete Form 6069

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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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	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	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		77	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?		v	
_	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
40	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	40-	Х	
	taxable entity during the year?	16a	Λ	
D	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	401	Х	
Sac	exempt status with respect to such arrangements? tion C. Disclosure	16b	Λ	
17	List the states with which a copy of this Form 990 is required to be filed CA, FL, NH, NJ, NY, PA, WA  Section 6104 requires on expenientian to make its Forms 1003 (1004 or 1004 A if applicable) 000, and 000 T (certion F01(a)(2))	anlı ıl	ove ilek	
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	oniy)	avallal	JIE
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain on Schedule O)	fic.	sia!	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nnand	iai	
00	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 MAROUIS HALL EASTON PA 18042-1798			

Form 990 (2021) LAFAYETTE COLLEGE 24-0795686 Page **7** 

# 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.

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

• List all of the organization's **former 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.

(A) Name and title	(B) Average hours per	box	not c , unle:	Pos heck ss per	rson i	than o	n an	( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	er e	Officer B P		Highest compensated snly.		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) ALISON R. BYERLY	0.00									
FORMER PRESIDENT	0.00						Х	1,723,521.	0.	62,649.
(2) KRISHNA MEMANI	50.00									
CHIEF INVESTMENT OFFICER	0.00			Х				714,170.	0.	52,669.
(3) MERVIN A. BURTON	50.00									
DIR OF INVESTMENTS (THRU 07/2021)	0.00					Х		517,739.	0.	12,115.
(4) ROGER A. DEMARESKI	50.00									
VP FIN & ADMIN/TREAS (THRU 11/2021)	0.00			Х				418,890.	0.	104,288.
(5) LESLIE F. MUHLFELDER	50.00									
VP HUMAN RESOURCES, GENERAL COUNSEL	0.00			Х				353,684.	0.	62,992.
(6) KIMBERLY A. SPANG	50.00									
VP DEVELOPMENT & COLLEGE RELATIONS	0.00			Х				332,850.	0.	45,689.
(7) JOHN E. MEIER	50.00									
PROVOST	0.00			Х				316,090.	0.	56,357.
(8) LI ZHAO	50.00									
INVESTMENT ASSOCIATE	0.00					Х		350,127.	0.	13,851.
(9) NICOLE HURD	50.00									
PRESIDENT (AS OF 07/2021)	0.00	Х		Х				291,578.	0.	67,890.
(10) GREGORY V. MACDONALD	50.00									
VP ENROLLMENT MGMT (THRU 04/2022)	0.00			Х				257,495.	0.	99,415.
(11) SAIYID A. RIZVI	50.00									
PROFESSOR OF ECONOMICS	0.00					Х		320,490.	0.	34,574.
(12) JOHN M. GARRETT	45.00									
HEAD COACH - FOOTBALL (THRU 12/2021)	0.00					Х		278,157.	0.	42,369.
(13) CRAIG BECKER	50.00									
ASSOC VP FINANCE	0.00				Х			269,536.	0.	43,357.
(14) BRUCE A. MURPHY	50.00									
KIRBY PROFESSOR OF GOVERNMMENT & LAW	0.00					Х		270,023.	0.	40,279.
(15) JOHN L. O'KEEFE	50.00									
VP & CHIEF INFORMATION OFFICER	0.00		_	Х				243,581.	0.	36,845.
(16) ANNETTE DIORIO	50.00									
VP CAMPUS LIFE	0.00		_	Х				242,731.	0.	27,084.
(17) MARK EYERLY	50.00									
VP MARKETING & COMM (THRU 06/2022)	0.00			Х				230,719.	0.	35,724. Form <b>990</b> (2021)

LAFAVETTE COLLEGE 24-0795686

Form 990 (2021) LAFAYETTE CO	LLEGE								24-079568	6 Page <b>8</b>
Part VII   Section A. Officers, Directors, Trus	tees, Key Emp	loy	ees,	anc	l Hig	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do		Pos		l than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week (list any		l an	uau	recto	i / ii us	(66)	from	from related	other
	hours for	lirecto				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or (	stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	Institutional trustee		yee	эш ш		1099-NEC)	1000 1120)	and related
	below	idual	tution	er	Key employee	est co	ıer			organizations
	line)	Indiv	Insti	Officer	Key 6	Highest compensated employee	Former			
(18) ALMA SCOTT-BUCZAK	50.00									
ASSOC VP HUMAN RESOURCES	0.00				Х			209,305.	0.	37,714.
(19) ROBERT E. SELL	5.00									
CHAIR	0.00	Х		Х				0.	0.	0.
(20) LINDA ASSANTE CARRASCO	5.00									
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(21) ANGEL L. MENDEZ	5.00									
SECRETARY	0.00	Х		Х				0.	0.	0.
(22) EDWARD W. AHART	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0.
(23) SAMUEL R. CHAPIN	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0.
(24) ANTONIO F. FERNANDEZ	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0.
(25) SUSAN L. FOX	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0.
(26) JEFFERSON W. KIRBY	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0.
1b Subtotal								7,340,686.	0.	875,861.
c Total from continuation sheets to Part VI	I, Section A						▶	0.	0.	0.
d Total (add lines 1b and 1c)								7,340,686.	0.	875,861.
• T									000 ( ) )	

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on

Yes No line 1a? If "Yes," complete Schedule J for such individual 3 Х For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х

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#### rendered to the organization? If "Yes." complete Schedule J for such person **Section B. Independent Contractors**

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)	(B)	(C)
Name and business address	Description of services	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 the	nose listed above) who received more than	
\$100,000 of compensation from the organization	40	
	•	200

SEE PART VII, SECTION A CONTINUATION SHEETS

24-0795686 LAFAYETTE COLLEGE

Form 990 LAFAYETTE	COLLEGE								24-07956	386
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (	Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) I DO 3 HDIMDDG	line)	드	드	5	포	王	윤			
(27) LEO A. HELMERS	3.00	,							0	,
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0
(28) JUDSON C. LINVILLE	3.00								_	_
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0
(29) PAMELA S. PASSMAN	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0
(30) J.B. REILLY	3.00									
EXECUTIVE COMMITTEE	0.00	Х						0.	0.	0
(31) JAMES L. BENJAMIN	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(32) KIMBERLY W. BENSTON	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(33) JAMES R. BIRLE, JR.	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(34) HARRY S. CHERKEN	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(35) SEBASTIAN J. CRAPANZANO	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(36) TANUJA MAJUMDAR DEHNE	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(37) LANETA J. DORFLINGER	2.00									
TRUSTEE	0.00	х						0.	0.	0
(38) JOHN A. FRY	2.00									
TRUSTEE	0.00	Х						0.	0.	0
(39) MICHAEL C. HEANEY	2.00									
TRUSTEE	0.00	х						0.	0.	0
(40) HAROLD N. KAMINE	2.00									
TRUSTEE	0.00	х						0.	0.	0
(41) LISA J. KASSEL	2.00									
TRUSTEE	0.00	х						0.	0.	0
(42) BARBARA LEVY	2.00								•	
TRUSTEE	0.00	х						0.	0.	0
(43) CLAUDINE D. LILIEN	2.00					$\vdash$		· ·	<u> </u>	<u> </u>
TRUSTEE	0.00	х						0.	0.	0
(44) D. CHRISTIAN MCCUMBER	2.00					$\vdash$		· ·	<u> </u>	<u> </u>
TRUSTEE	0.00	х						0.	0.	0
(45) CYNTHIA Y. PAIGE	2.00	<u> </u>				$\vdash$		· ·	· · ·	
TRUSTEE	0.00	Х						0.	0.	0
(46) JOSE A. RODRIGUEZ	2.00	Λ				$\vdash$		1	0.	<u> </u>
		v							^	,
TRUSTEE	0.00	Х	1	I	I	I	İ	0.	0.	0

Form 990 LAFAYETTE COLLEGE 24-0795686

Part VII Section A. Officers, Directors, T										
	rustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (	Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c			that		ly)	compensation from the organization	compensation	amount of
	per week (list any								from related organizations (W-2/1099-MISC)	other compensation from the
	hours for related organizations below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ler	(W-2/1099-MISC)		organization and related organizations
	line)	Indiv	Instit	Officer	Key 6	High	Former			
47) DAVID M. ROTH	2.00									
RUSTEE	0.00	х						0.	0.	0.
48) PETER S. RUGGIERO	2.00									
RUSTEE	0.00	х						0.	0.	0.
49) WILLIAM H. SPENCE	2.00									
RUSTEE	0.00	х						0.	0.	0.
50) LAUREN A. STEINITZ	2.00									
RUSTEE	0.00	х						0.	0.	0.
51) WYNNE A. WHITMAN	2.00									
RUSTEE	0.00	х						0.	0.	0.
52) ALVIN M. YEARWOOD	2.00									
RUSTEE	0.00	х						0.	0.	0.
		<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>			

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 1a Contributions, Gifts, Grants and Other Similar Amounts **1 a** Federated campaigns 1b **b** Membership dues c Fundraising events ..... 29,139. 1c d Related organizations 1d 7,545,585 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 24,387,355 similar amounts not included above 1f 2,642,866 g Noncash contributions included in lines 1a-1f 31,962,079 h Total. Add lines 1a-1f **Business Code** 152,896,663. 2 a TUITION AND FEES 611710 152,896,663 Program Service Revenue b AUXILIARY SERVICES 37,014,659 611710 37,014,659 ATHLETIC/SPORT NETWORK 611710 1,738,544. 1,708,694. 29,850. f All other program service revenue 191,649,866. g Total. Add lines 2a-2f Investment income (including dividends, interest, and -1,296,195 7,648,654 8,944,849 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 811,337. 6 a Gross rents 531,156. **b** Less: rental expenses 280,181. c Rental income or (loss) 280,181 280,181. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7a 454,830,495. assets other than inventory **b** Less: cost or other basis **76** 423,139,181 and sales expenses Other Revenue 7c 31,691,314. c Gain or (loss) 31,691,314. 31,691,314. d Net gain or (loss) ..... 8 a Gross income from fundraising events (not including \$ 29,139. of contributions reported on line 1c). See Part IV, line 18 30,025. 21,853. **b** Less: direct expenses \_\_\_\_\_ 8,172 8,172. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities  $\triangleright$ 10 a Gross sales of inventory, less returns 1,602,008 and allowances 1,492,481 **b** Less: cost of goods sold 109,527. 19,978. 89,549. c Net income or (loss) from sales of inventory **Business Code** 11 a OTHER INCOME 900099 2,148,433 2,148,433, b FEES/FINES/COST RCVY. 900099 883,203 883,203. d All other revenue ..... 3,031,636 Total. Add lines 11a-11d 266,381,429. 191,620,016. -1,246,367. 44,045,701. Total revenue. See instructions 12

132009 12-09-21

24-0795686

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 respons	se or note to any line in t (A)	his Part IX(B)	(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	62,919,311.	62,919,311.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	6,430,379.	1,612,617.	4,439,224.	378,53
6	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.	
7	Other salaries and wages	66,295,539.	55,742,543.	7,765,417.	2,787,57
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	5,893,859.	5,150,668.	503,701.	239,49
9	Other employee benefits	10,354,350.	7,695,116.	2,091,699.	567,53
10	Payroll taxes	5,166,469.	4,344,065.	605,166.	217,23
11	Fees for services (nonemployees):				
а	Management				
b	Legal	497,128.	49,923.	427,877.	19,32
С	Accounting	265,187.		265,187.	
d	Lobbying	4,048.		4,048.	
е	Professional fundraising services. See Part IV, line 17	19,400.			19,40
f	Investment management fees	578,154.		578,154.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	8,502,892.	6,843,164.	1,537,628.	122,10
12	Advertising and promotion	138,881.	126,241.	12,441.	19:
13	Office expenses	3,324,258.	2,475,238.	621,463.	227,55
14	Information technology	2,561,034.	281,820.	2,245,063.	34,15
15	Royalties				
16	Occupancy	8,331,663.	7,392,666.	938,997.	
17	Travel	6,495,178.	6,016,058.	371,456.	107,66
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 005 106	607.244	0.45 4.05	222 55
19	Conferences, conventions, and meetings	1,885,196.	607,314.	945,106.	332,77
20	Interest	9,849,244.	9,556,048.	293,196.	
21	Payments to affiliates	15 506 100	14 106 004	1 200 000	
22	Depreciation, depletion, and amortization	15,596,102.	14,196,894.	1,399,208.	
23	Insurance	2,692,582.	383,228.	2,309,354.	
24	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 0.)				
а	AUVILIANU CENUTCHO	12,493,440.	12,455,263.	38,177.	
b	NON-OFFICE SUPPLIES	4,584,265.	4,559,504.	24,599.	16
С	OTHER EXPENSES	4,516,708.	3,323,007.	1,138,849.	54,85
d	ALLOCATION OF INDIRECT	0.	-601,880.	601,880.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	241,181,437.	205,128,808.	30,944,060.	5,108,56
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (2021)
Part X Balance Sheet

. u	ιλ	Check if Schedule O contains a response or i	note to any	line in this Part X			
		orieck ii ochequie o contains a response ori	iote to arry	Time in this Fatt X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			11,608.	1	17,979.
	2	Savings and temporary cash investments			76,815,011.	2	84,711,315.
	3	Pledges and grants receivable, net			9,679,669.	3	13,203,290.
	4	Accounts receivable, net			842,745.	4	2,204,240.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial c	ontributor, or 35%			
		controlled entity or family member of any of t	nese perso	ons		5	
	6	Loans and other receivables from other disqu	alified pers	sons (as defined			
		under section 4958(f)(1)), and persons describ	oed in sect	ion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		ı	968,276.	8	245,301
As	9	Donate Salar and a second of a factor and all and a second			2,119,958.	9	3,874,236.
	10a	Land, buildings, and equipment: cost or othe	1 1				
		basis. Complete Part VI of Schedule D		709,024,356.			
	b	Less: accumulated depreciation		297,785,555.	396,686,401.	10c	411,238,801
	11	Investments - publicly traded securities			285,315,884.	11	211,665,656
	12	Investments - other securities. See Part IV, Iir			839,610,153.	12	843,670,466
	13	Investments - program-related. See Part IV, lin			1,878,162.	13	1,719,293
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	1,073,439.	15	1,493,401		
	16	<b>Total assets.</b> Add lines 1 through 15 (must e			1,615,001,306.	16	1,574,043,978
	17	Accounts payable and accrued expenses	18,177,642.	17	19,906,395		
	18	Grants payable			395,249.	18	207,540.
	19	Deferred revenue			2,183,269.	19	1,899,869
	20	Tax-exempt bond liabilities			214,861,169.	20	213,185,787
	21	Escrow or custodial account liability. Comple			4,940,413.	21	4,120,227
"	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, su					
Ē		controlled entity or family member of any of t				22	
Ë	23	Secured mortgages and notes payable to uni		70,084,607.	23	81,464,404.	
	24	Unsecured notes and loans payable to unrela			, ,	24	, ,
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li					
		of Schedule D		Complete Calify	73,776,087.	25	52,082,666,
	26				384,418,436.	26	372,866,888.
		Organizations that follow FASB ASC 958, o					, ,
es		and complete lines 27, 28, 32, and 33.					
auc S	27				373,165,842.	27	397,255,233
3ale	28	Net assets with donor restrictions			857,417,028.	28	803,921,857.
둳		Organizations that do not follow FASB ASC			· ·		, ,
Ξ		and complete lines 29 through 33.	, , , , , , , , , ,				
ō	29	Capital stock or trust principal, or current fun	ds			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,230,582,870.	32	1,201,177,090.
Z	33	Total liabilities and net assets/fund balances			1,615,001,306.	33	1,574,043,978.

Form 990 (2021) LAFAYETTE COLLEGE 24-0795686 Page **12** 

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	266,	381,	429.
2	Total expenses (must equal Part IX, column (A), line 25)	2		181,	
3	Revenue less expenses. Subtract line 2 from line 1	3	25,	199,	992.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,230,	582,	870.
5	Net unrealized gains (losses) on investments	5	-72,	594,	635.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	17,	988,	863.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,201,	177,	090.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
	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?		. 2b	Х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			l
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b	Х	
			Form	990	(2021)

#### **SCHEDULE A**

(Form 990)

Total

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 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** LAFAYETTE COLLEGE 24-0795686 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). Х 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). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686 Page 2

#### 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.)

Sec	tion A. Public Support	,, p	oo oompioto i airi ii	,					
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
	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.	137,591,2	26.	
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	33,519,231.	31,281,134.	20,135,118.	20,693,664.	31,962,079.	137,591,2	26.	
5	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)						5,662,6	45.	
	Public support. Subtract line 5 from line 4.						131,928,5	81.	
Sec	tion B. Total Support								
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
7	Amounts from line 4	33,519,231.	31,281,134.	20,135,118.	20,693,664.	31,962,079.	137,591,2	26.	
8	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.	43,581,8	32.	
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on				0.	0.			
	Other income. Do not include gain								
	or loss from the sale of capital	2 002 603	2 026 470	2 026 127	1 272 775	2 021 626	14 140 7	1.0	
	assets (Explain in Part VI.)	2,982,683.	3,826,479.	2,926,137.	1,373,775.	3,031,636.	14,140,7		
	<b>Total support.</b> Add lines 7 through 10		,				195,313,7		
	Gross receipts from related activities,	•	,			12	862,942,1	73.	
	First 5 years. If the Form 990 is for the	•	st, second, third, f	ourth, or fifth tax y	ear as a section 5	J1(c)(3)	⊾ [	_	
	organization, check this box and stop tion C. Computation of Publi		centage		<u></u>				
	Public support percentage for 2021 (I			olumn (fl)		14	67.55	— %	
	Public support percentage from 2020					15	67.75	<del>/</del> 0	
	<b>33 1/3% support test - 2021.</b> If the o								
	stop here. The organization qualifies							Х	
	33 1/3% support test - 2020. If the o		-						
	and <b>stop here.</b> The organization qual						_		
	10% -facts-and-circumstances test								
11 a	and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization								
	and if the organization meets the fact	s-and-circumstance	es test, check this	DOX AND SLUP HE	mosts the facts and six unatanged test. The experimentary qualifies as a publish guaranteed experimentary				
	·					vi now the organiz			
	·	st. The organizatio	n qualifies as a pul	olicly supported or	ganization		<b>&gt;</b> [		
b	meets the facts-and-circumstances te	est. The organization are constant organizations.	n qualifies as a pul anization did not c	blicly supported or heck a box on line	ganization 13, 16a, 16b, or 1	7a, and line 15 is	<b>&gt;</b> [		
b	meets the facts-and-circumstances te 10% -facts-and-circumstances test	est. The organizations <b>2020.</b> If the organic facts-and-circum	n qualifies as a pul anization did not c astances test, chec	olicly supported or heck a box on line ok this box and st	ganization 13, 16a, 16b, or 1 <b>op here.</b> Explain ir	7a, and line 15 is	<b>&gt;</b> [		

Schedule A (Form 990) 2021

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#### 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) 🕨 📗	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6					'	
10a 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
check this box and <b>stop here</b>	•		•	•		<b></b>
Section C. Computation of Public						
15 Public support percentage for 2021 (lin	e 8, column (f), d	livided by line 13, o	column (f))		15	
16 Public support percentage from 2020 S					16	
Section D. Computation of Invest	ment Income	e Percentage				
17 Investment income percentage for 202	:1 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	
18 Investment income percentage from 20					18	
<b>19a 33 1/3% support tests - 2021.</b> If the o	rganization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	I <b>stop here.</b> The	organization quali	fies as a publicly s	upported organiza	ation	▶□
<b>b 33 1/3% support tests - 2020.</b> If the o	rganization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, check	this box and st	t <b>op here.</b> The orga	nization qualifies a	as a publicly supp	orted organization	▶□
20 Private foundation. If the organization	did not check a	box on line 14, 19	a. or 19b. check th	nis box and see in:	structions	▶□

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Schedule A (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686 Page 4

#### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **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? If "Yes." provide detail in **Part VI.**
- c 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? If "Yes," provide detail in Part VI.
- 10a 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)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
4b		
4c		
2		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

	cupper and creations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
<u> </u>	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		I I	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations			
	1011 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The second second			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	20		
h	that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2a		
b	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		2b		
3	these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
a				
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b		- 55		
_	of its supported organizations? If "Ves." describe in <b>Part VI</b> the role played by the organization in this regard	3b		

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Schedule A (Form 990) 2021

2021.05080 LAFAYETTE COLLEGE

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Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	ll other Type III non-functionally integrated supporting organizations mu		·	_
Section A - A	djusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	rt-term capital gain	1		
2 Recover	ries of prior-year distributions	2		
3 Other gr	ross income (see instructions)	3		
4 Add line	es 1 through 3.	4		
<b>5</b> Depreci	ation and depletion	5		
6 Portion	of operating expenses paid or incurred for production or			
collection	on of gross income or for management, conservation, or			
mainten	nance of property held for production of income (see instructions)	6		
7 Other ex	xpenses (see instructions)	7		
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - M	linimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggrega	ate fair market value of all non-exempt-use assets (see			
instructi	ions for short tax year or assets held for part of year):			
<b>a</b> Average	e monthly value of securities	1a		
<b>b</b> Average	e monthly cash balances	1b		
<b>c</b> Fair mar	rket value of other non-exempt-use assets	1c		
d Total (a	dd lines 1a, 1b, and 1c)	1d		
e Discou	nt claimed for blockage or other factors			
(explain	in detail in Part VI):			
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2		
3 Subtrac	t line 2 from line 1d.	3		
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see inst	ructions).	4		
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply	line 5 by 0.035.	6		
<b>7</b> Recover	ries of prior-year distributions	7		
8 Minimu	m Asset Amount (add line 7 to line 6)	8		
Section C - D	Distributable Amount			Current Year
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.	85 of line 1.	2		
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter gr	reater of line 2 or line 3.	4		
5 Income	tax imposed in prior year	5		
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to			
	ncy temporary reduction (see instructions).	6		
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990) 2021

instructions).

Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations <sub>(continued)</sub>			
Sect	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported				
	organizations, in excess of income from activity	2				
_3_	Administrative expenses paid to accomplish exempt purpose	Administrative expenses paid to accomplish exempt purposes of supported organizations				
_4	Amounts paid to acquire exempt-use assets	4				
_5_	Qualified set-aside amounts (prior IRS approval required - pr	5				
_6	Other distributions (describe in Part VI). See instructions.		6			
_7_	Total annual distributions. Add lines 1 through 6.		7			
8	Distributions to attentive supported organizations to which the	he organization is responsive				
	(provide details in Part VI). See instructions.		8			
_9_	Distributable amount for 2021 from Section C, line 6		9			
10	Line 8 amount divided by line 9 amount		10			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021		
_1_	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
_3_	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
c	From 2018					
d	From 2019					
e	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2021 distributable amount					
<u>i</u>	Carryover from 2016 not applied (see instructions)					
<u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
_8_	Breakdown of line 7:					
a	Excess from 2017					
h	Eyeass from 2018					

Schedule A (Form 990) 2021

c Excess from 2019d Excess from 2020e Excess from 2021

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021 LAFAYETTE COLLEGE	24-0795686	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addit (See instructions.)	s 1 and 2; Part IV, Section t V, Section B, line 1e; Pa	n C,
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

Name of the organization

### **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2021

Schedule B (Form 990) (2021)

LAFAYETTE COLLEGE 24-0795686			
<b>Organization type</b> (check o	ne):		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> 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		
• •	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le. See instructions.	
General Rule			
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's		
Special Rules			
sections 509(a)(1) a contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) I line 1. Complete Parts I and II.	d that received from any one	
contributor, during literary, or education	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, so onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e) instead of the contributor name and address), II, and III.	ientific,	
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious applete any of the parts unless the <b>General Rule</b> applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>	
Caution: An organization th answer "No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F. 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	orm 990), but it <b>must</b>	

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

Schedule B (Form 990) (2021) Page **2** 

Name of organization

Employer identification number

LAFAYETTE COLLEGE

24-0795686

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$ \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. <u>4</u>	Name, address, and ZIP + 4	# *	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.

Schedule B (Form 990) (2021) Page **3** 

Name of organization

Employer identification number

LAFAYETTE COLLEGE

24-0795686

art II Noi	ncash Property (see instructions). Use duplicate copies of P	art 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
		\$	
a) lo. om art l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om ort I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om rt I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	
a) lo. om irt l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
		<b>S</b>	1

Schedule B (Form 990) (2021) Page **4** 

Name of organization **Employer identification number** LAFAYETTE COLLEGE 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift 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

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 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.

	ne of orga	nization			Empl	oyer identification number
		LAFAYETTE (				24-0795686
Pa	rt I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
2	Political	campaign activity expendit	ation's direct and indirect politiures gn activities		<b>▶</b> \$	
Pa	rt I-B	Complete if the org	anization is exempt und	ler section 501(c)(	3).	
1	Enter the	amount of any excise tax	incurred by the organization un	der section 4955	<b>▶</b> \$	
2	Enter the	e amount of any excise tax	incurred by organization manag			
3	If the org	anization incurred a section	n 4955 tax, did it file Form 4720	) for this year?		Yes No
4a	Was a co	orrection made?				Yes No
		describe in Part IV.				1/6)
	rt I-C		anization is exempt und			· · · · · · · · · · · · · · · · · · ·
			by the filing organization for se	·		
2			ization's funds contributed to o	· ·		
_	•					
3			. Add lines 1 and 2. Enter here			
			4400 DOL 6 H11			
			1120-POL for this year?			
5		,	nployer identification number (E tion listed, enter the amount pa	, ,	· ·	0 0
	-	•	omptly and directly delivered to			<u>-</u>
		•	additional space is needed, pro		•	o oog, ogatoa tama or a
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		(a) Hamo	(b) / ladi 000	(0) = 111	filing organization's	contributions received and
					funds. If none, enter -0	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

LHA

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		_				
Schedule C (Form 990) 2021  Part II-A   Complete if the org section 501(h)).	LAFAYETTE COLLEG		n 501(c)(3) and file			Page <u>2</u> r
A Check if the filing organiza expenses, and sha	re of excess lobbying	expenditures).	n Part IV each affiliated o	group member's nam	ne, address, EIN	,
Limi	ts on Lobbying Expe	nd "limited control" pr nditures unts paid or incurred		(a) Filing organization's totals	(b) Affiliated (totals	group
<ul> <li>1a Total lobbying expenditures to infle</li> <li>b Total lobbying expenditures to infle</li> <li>c Total lobbying expenditures (add lie</li> <li>d Other exempt purpose expenditure</li> <li>e Total exempt purpose expenditure</li> </ul>	uence a legislative boonnes 1a and 1b)	dy (direct lobbying)				
f Lobbying nontaxable amount. Enter	er the amount from the		th columns.			
Not over \$500,000  Over \$500,000 but not over \$1,000  Over \$1,000,000 but not over \$1,500,000 but not over \$17,000,000  Over \$17,000,000	20% of 0,000 \$100,00 00,000 \$175,00	the amount on line 16 00 plus 15% of the ex 00 plus 10% of the ex 00 plus 5% of the exc	cess over \$500,000.			
g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zer j If there is an amount other than ze reporting section 4911 tax for this	o or less, enter -0- o or less, enter -0- ro on either line 1h or	line 1i, did the organiz			Yes	□ No
(Some organizations t	nat made a section 5	eraging Period Unde 01(h) election do not ate instructions for l	have to complete all of	f the five columns b	elow.	
	Lobbying Expe	nditures During 4-Ye	ear Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	( <b>d)</b> 2021	(e) Tota	ıl
<ul><li>2a Lobbying nontaxable amount</li><li>b Lobbying ceiling amount (150% of line 2a, column(e))</li></ul>						

Schedule C (Form 990) 2021

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount (150% of line 2d, column (e))

f 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	(a)		(b)	
of the lobbying activity.	Yes	No	Amo	unt
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:				
a Volunteers?		х		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х		
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?	Х			4,048
j Total. Add lines 1c through 1i				4,048
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		<u> </u>
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or sec	tion	
501(c)(6).				
			Yes	No
4 Ware substantially all (000/ or many) dues received and distillative received		1		
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?				
, , , , , , , , , , , , , , , , , , , ,				
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the</li> </ul>	e prior year	<b>2</b>		
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B   Complete if the organization is exempt under section 501(c)(4), section</li> </ul>	e prior year n 501(c)(	2 ? 3 5), or sec		
<ul> <li>2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered</li> </ul>	e prior year n 501(c)(	2 ? 3 5), or sec		3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year n 501(c)(t "No" OR	2 ? 3 5), or sec (b) Part l		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered</li> </ul>	e prior year n 501(c)(t "No" OR	2 ? 3 5), or sec (b) Part l		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>	e prior year n 501(c)(l "No" OR	2 ? 3 5), or sec (b) Part l		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> </ul>	e prior year n 501(c)(l "No" OR	2 ? 3 5), or sec (b) Part l		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>	e prior year n 501(c)(l "No" OR	2 7 3 5), or sec (b) Part I		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ul>	e prior year n 501(c)(l "No" OR	2 3 5), or sec (b) Part I		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>Current year</li> </ul>	e prior year n 501(c)(l "No" OR	2 3 5), or sec (b) Part I		3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ul>	e prior year n 501(c)(l "No" OR	2 3 5), or sec (b) Part I		3, is
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#### **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

Inspection

Name of the organization

LAFAYETTE COLLEGE

**Employer identification number** 24-0795686

Par			r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Donor advised funds	(b) I unus and other accounts
1 2	Total number at end of 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		d funds
Ū	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
_	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a	historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		2a
	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		1 I
	listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	rganization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		□ vaa □ Na
6	violations, and enforcement of the conservation easements i Staff and volunteer hours devoted to monitoring, inspecting,		
6	Starr and volunteer riours devoted to monitoring, inspecting,	Than dilling of violations, and emorcing conse	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year
•	\$ \$ \$	ding of violations, and emoreing conservation	or easements during the year
8	Does each conservation easement reported on line 2(d) above	ve 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		
	balance sheet, and include, if applicable, the text of the footi	•	
	organization's accounting for conservation easements.	·	
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	d balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furt	herance of public
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and ba	lance sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furthe	rance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial g	gain, provide
	the following amounts required to be reported under FASB A	_	
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2021

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

LAFAYETTE COLLEGE 24-0795686 <u> Page</u> **2** Schedule D (Form 990) 2021 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): X Public exhibition Loan or exchange program X Scholarly research h Other X Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? 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 X No on Form 990, Part X? Yes If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c 1d Additions during the year 1e Distributions during the year 1f X Yes 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Х Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (c) Two years back (d) Three years back (a) Current year (b) Prior year (e) Four years back 1,085,030,761. 862,906,493. 861,783,526 870,744,623 833,069,757. **1a** Beginning of year balance 14,744,584. 18,379,803. 18,402,651. 12,461,042. 21,306,093. Contributions 26,736,866. -31,004,600. 248,378,756. 16,998,749. 59,205,615. Net investment earnings, gains, and losses 9,799,641. 9,542,677. 8,842,283, 8,817,916. 8,175,815. Grants or scholarships Other expenditures for facilities 32,221,359. 31,456,395. 32,165,568. 32,433,775. 31,783,314. and programs 2,877,713. 2,663,837. 2,985,851. 3,110,806. Administrative expenses 1,021,802,366, 1,085,030,761. 862,906,493. 861,783,526. 870,744,623. End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 25.2800 a Board designated or quasi-endowment Permanent endowment 34.0700 % Term endowment 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 Yes No (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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>b</b> Buildings		505,745,749.	197,327,633.	308,418,116.		
c Leasehold improvements		67,871,695.	36,506,487.	31,365,208.		
<b>d</b> Equipment		83,300,624.	63,951,435.	19,349,189.		
e Other		42,104,549.		42,104,549.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2021

Part VIII   Investments - Other Securities.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.	Schedule D (Form 990) 2021 LAFAYETTE COLLEGE	E		24-0795686 Page <b>3</b>
(a) Description of security or category exclusing rane of security (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (2) Closely held cupity interests (3) Other (4) EMD-OF-YEAR MARKET VALUE (3) DLONG/SIDRE RQUITY (39, 92, 464, EMD-OF-YEAR MARKET VALUE (5) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (6) PRIVATE EQUITY (284, 749, 313, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, EMD-OF-YEAR MARKET VALUE (7) CMUTI STRATEGY/ABSOLOTE RETURN (157, 203, 717, 203, 717, 203, 207, 203, 203, 203, 203, 203, 203, 203, 203				. 490
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D REAL ESTATE   5,399,327.   END-OF-YEAR MARKET VALUE	(B) LONG/SHORT EQUITY	390,802,464.	END-OF-YEAR MARKET VALUE	
(E) PRIVATE EQUITY	(C) MULTI STRATEGY/ABSOLUTE RETURN	157,203,777.	END-OF-YEAR MARKET VALUE	
(F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ 843, 670, 466.  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)  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 (c) Method of valuation: Cost or end of year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ (b) Book value (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	(D) REAL ESTATE	5,399,327.	END-OF-YEAR MARKET VALUE	
(6) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   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)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)   Part XI 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) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)   (b) Book value (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	(E) PRIVATE EQUITY	284,749,313.	END-OF-YEAR MARKET VALUE	
(6) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   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)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)   Part XI 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) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)   (b) Book value (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	(F)			
Total. (Col. (b) must equal Form 990, Part X, col. (8) line 12.) ▶         843, 670, 466.           Part VIIII 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)           (3)         (4)         (5)           (6)         (7)         (8)           (9)         (9)         (9)           Total. (Col. (b) must equal Form 990, Part X, col. (8) 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.         (b) Book value           (1)         (2)         (3)           (4)         (5)         (6)           (6)         (7)         (8)           (9)         (9)         (9)           (17)         (8)         (9)           (9)         (9)         (9)           (17)         (8)         (9)           (18)         (9)         (9)           (19)         (9)         (9)           (17)         (8)         (9)           (18)         (9)				
Investments - Program Related.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(H)			
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) Total. (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) (9) (9) (9) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		843,670,466.		
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	Part VIII Investments - Program Related.			
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (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) Total. (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.  (a) Description of liability (b) Book value  (1) Federal income taxes (2) ANNUITIES PAYABLE 15, 586, 00	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (β) 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)  Total. (Column (b) must equal Form 990, Part X, col. (β) 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.  (a) Description of liability (b) Book value  (1) Federal income taxes (2) ANNUITIES PAYABLE	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(3)	(1)			
(4) (5) (6) (7) (8) (9) Total. (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)  Total. (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, 586,00	(2)			
(5) (6) (7) (8) (9) Total. (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)   Total. (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   15,586,00	(3)			
(6) (7) (8) (9) Total. (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)  Total. (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 (b) Book value  (b) Book value  (c) ANNUTTES PAYABLE (b) Book value	(4)			
(7) (8) (9)  Total. (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)  Total. (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) ANNUTTIES PAYABLE 15, 586, 00	(5)			
(8) (9)  Total. (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)  Total. (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) ANNUTTES PAYABLE 15, 586,00	(6)			
Total. (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)  Total. (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 15,586,00	(7)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶    Part IX   Other Assets.	(8)			
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)  Total. (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) ANNULTIES PAYABLE	(9)			
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)  Total. (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) ANNUTTIES PAYABLE 15,586,00				
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(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization 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 15,586,00	(a)	Description		(b) Book value
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization 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) ANNUTTIES PAYABLE 15,586,00	<u>(1)</u>			
(4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization 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 15,586,00	(2)			
(5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization 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) ANNUTTIES PAYABLE 15,586,00	(3)			
(6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization 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) ANNUTTIES PAYABLE 15,586,00	(4)			
(7) (8) (9)  Total. (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) ANNUTTIES PAYABLE 15,586,00	(5)			
(8) (9)  Total. (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) ANNUTTIES PAYABLE 15,586,00				
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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 15,586,00				
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 15,586,00	Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<u> </u>
1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2) ANNUITIES PAYABLE 15,586,00		on Form 990 Part IV line	11e or 11f See Form 990 Part V line	25
(1) Federal income taxes (2) ANNUITIES PAYABLE 15,586,00	(a) Description of liability	OITT OITH 930, T AITTV, IIIIe	The or Thi. See Form 990, Fart X, line A	
(2) ANNUITIES PAYABLE 15,586,00				(b) Book value
				15 586 007
				27,466,165.
(9)		ON		1,841,841.
				7,188,653.
(5) INTEREST RATE SWAP AGREEMENTS 7,188,65				7,100,033.
(6)				
(8)				

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 LAFAYETTE COLLEGE			24-07956	86 Page <b>4</b>
Part XI Reconciliation of Revenue per Audited Financia	al Statements With F	Revenue per Ret	turn.	
Complete if the organization answered "Yes" on Form 990, Pa	art IV, line 12a.			
1 Total revenue, gains, and other support per audited financial stateme	nts		1	149,852,860.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a	-72,594,635.		
<b>b</b> Donated services and use of facilities	2b			
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)		-45,401,270.		
e Add lines 2a through 2d			2e	-117,995,905.
3 Subtract line 2e from line 1			3	267,848,765.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	578,154.		
<b>b</b> Other (Describe in Part XIII.)		-2,045,490.		
c Add lines 4a and 4b			4c	-1,467,336.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I.			5	266,381,429.
Part XII Reconciliation of Expenses per Audited Finance	ial Statements With	Expenses per R		
Complete if the organization answered "Yes" on Form 990, Pa		• •		
1 Total expenses and losses per audited financial statements			1	179,258,640.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				, , ,
a Donated services and use of facilities	2a			
b Prior year adjustments				
	_			
c Other losses		2,045,490.		
d Other (Describe in Part XIII.)			0-	2,045,490.
e Add lines 2a through 2d			2e	177,213,150.
3 Subtract line 2e from line 1			3	177,213,130.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	570 15 <i>1</i>		
	4a	578,154.		
b Other (Describe in Part XIII.)		63,390,133.		62 060 207
c Add lines 4a and 4b		F	4c	63,968,287.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part Part XIII Supplemental Information.	<u>l. line 18.)                                    </u>		5	241,181,437.
	La and A. Dark IV. Page 415	and Obs. Doubly Proc. 4.	Dest V. Pers	0. D + VI
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			Part X, line	2; Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro-	ovide any additional inform	ation.		
DADM III IIND 4.				
PART III, LINE 4:				
MONG MUE DIGU DEGOUDGES DROWINED EOD SMUDENMS IS A EIN	E CMAIL ADM			
AMONG THE RICH RESOURCES PROVIDED FOR STUDENTS IS A FIN	E, SMALL ARI			
COLLECTION THE COLLECTION INCLINES ELCUMPENTU TUDOLICU	EVDIA WMENWA-ELDGW			
COLLECTION. THE COLLECTION INCLUDES EIGHTEENTH-THROUGH	EARLI IWENII-FIRSI			
CENTILLY AMEDICAN AND EUDODEAN DAINMINGS DOINES AND SC	III DMIIDE VINMACE			
CENTURY AMERICAN AND EUROPEAN PAINTINGS, PRINTS, AND SC	olfiore; viniage			
DUOMOCDADUS AND COMMEMDODADY AMEDICAN SCHILDWIDE AND DA	TNMTNGG DECENM			
PHOTOGRAPHS; AND CONTEMPORARY AMERICAN SCULPTURE AND PA	INTINGS. RECENT			
ACQUITET MICHAEL PROPERTY OF THE EVICTIVE COLL	БОШТОМО			
ACQUISITIONS BUILD ON THE STRENGTH OF THE EXISTING COLL	ECTIONS.			
MUD NIGGION GENERATIVE FOR MUD ARM GOLLEGETONG IG TO DOG	THENE DESCRIPTION			
THE MISSION STATEMENT FOR THE ART COLLECTIONS IS TO DOC	UMENT, PRESERVE FOR			
FUTURE GENERATIONS, EXHIBIT, AND MAKE ACCESSIBLE THE CO.	IIECE'C ADM			
FUTURE GENERATIONS, EXHIBIT, AND MAKE ACCESSIBLE THE CO.	DIEGE 2 AKI			
COLLECTION TO THE CHINESIMG DIDLIC AND GOLOLARG TOPOLOG	u pyurbimione			
COLLECTION TO THE STUDENTS, PUBLIC, AND SCHOLARS THROUGH	n EARLDITIUNS,			
DIIRITCATTONG DEPRODUCTIONS AND DV CDAMMING ACCESS FOR	DEGEVDOR DIEDDOGEG			
PUBLICATIONS, REPRODUCTIONS, AND BY GRANTING ACCESS FOR	RESEARCH PURPUSES.			
THE ADMINISTRATION OF THE ART COLLECTION COMPLIES WITH	מחדש חוקקווM			
THE ADMINISTRATION OF THE ART COLLECTION COMPLIES WITH	HOSEOM-LIEDD MIDE			

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

PART X, LINE 2:

Schedule D (Form 990) 2021 LAFAYETTE COLLEGE  Part XIII   Supplemental Information (continued)		24-0795686	Page <b>5</b>
Fait Aiii 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 N	OT 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 DISCLOS	URE 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

#### **SCHEDULE E**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Schools**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

LAFAYETTE COLLEGE

Part I

Employer identification number
24-0795686

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	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	3	Х	
	SEE PART II			
ļ	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
b	, , , , , , , , , , , , , , , , , , , ,	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
5	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?	5a		Х
b	Admissions policies?	5b		X
С	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	<u>5d</u>		X
	Educational policies?	5e		X
	Use of facilities?	5f		X
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		Х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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

Schedule E (Form 990) 2021

Schedule E (Form 990) 2021 LAFAYETTE COLLEGE	24-0795686	Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7,	as	<u> </u>
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 E (Form 990) 2021

# SCHEDULE F (Form 990)

## **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.

Attach to Form 990.

Open to Public

Department of the Treasury
Internal Revenue Service

Attach to Form 990.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Employer identification number** 

LAFAYETTE COLLEGE

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

United States.		3	orocedures for monitoring the use of its	3	
3 Activities per Region. (T	he following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)	
(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, pro- gram 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.
					, ,
GDWDD11 1WDD161 1WD					
CENTRAL AMERICA AND	0	0	PROGRAM SERVICES	ACADEMIC GUDDODE	1 770
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		_	DDOCDAM GERVICES	CMIDENM CEDVICES	1 145
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT SERVICES	1,145. 384,311,939.
<b>3 a</b> Subtotal <b>b</b> Total from continuation		-			701,511,559.
sheets to Part I	0	0			182,398.
c Totals (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

Schedule F (Form 990)	LAFAYETTE CO			24-0795686	Page 1
Part I Continuatio	n of Activitie	s per Regior	(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.
Totala					182,398.
Totals	1	<u>I</u>			

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>(b)</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)
			ecognized as charities by the for counsel has provided a sect			<b>&gt;</b>		

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance Part III can be duplicated if ac			tes. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
(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)

Schedule F (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686

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	X 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)	X 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)	X 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)

Schedule F (Form 990) 2021

Yes X 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)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

LAFAYETTE	COLLEGE				24-079568	6
Part I Fundraising Activities. required to complete this par	Complete if the organization answett.	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rais	eed funds through any of the followin  e X Solicita  f X Solicita  g X Special  or oral agreement with any individual art VII) or entity in connection with positions or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody itrol of	(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
WASHBURN & MCGOLDRICK - 950		Yes	No			
NEW LOUDON ROAD, STE. 210,	CAMPAIGN CONSULTING		Х	0.	19,400.	-19,400.
Total  3 List all states in which the organization or licensing.	on is registered or licensed to solicit o		<b>▶</b> utions	or has been notified	19,400. it is exempt from req	-19,400. gistration
PA,CA,FL,NH,NJ,NY,WA						

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

Schedule G (Form 990) 2021

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 MAROON CLUB GOLF NONE (add col. (a) through OUTING col. (c)) (total number) (event type) (event type) 59,164 59,164. 1 Gross receipts 29,139 2 Less: Contributions 29,139. Gross income (line 1 minus line 2) 30,025 30,025. 4 Cash prizes 5 Noncash prizes Direct Expenses 9,500. 9,500. 6 Rent/facility costs 8,657. 8,657. 7 Food and beverages 1,815. 1,815. 8 Entertainment 1,881. 1,881. Other direct expenses 21,853. 10 Direct expense summary. Add lines 4 through 9 in column (d) 8,172. 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 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? **b** If "No," explain: \_ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain: \_

Schedule G (Form 990) 2021

132082 10-21-21

Schedule G (Form 990) 2021 LAFAYETTE COLLEGE	24-0795686	Page <b>3</b>
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	<u>%</u>
<b>b</b> An outside facility	13b	<u>%</u>
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	rds:	
Name ▶		
Address		
<b>15a</b> 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 am	nount	
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>b</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.		
COMPANIE C. DADM T. LINE OD LICH OF MEN HICHER DAID PHNIDATOPRO.		
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
(I) NAME OF FUNDRAISER: WASHBURN & MCGOLDRICK		
(1) NAME OF FONDIALISER. WASHIDORY & MCGOLDATOR		
(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.		

2021.05080 LAFAYETTE COLLEGE

Schedule G	(Form 990) Supplemental Infor	LAFAYETTE CO	OLLEGE			24-0795686	Page 4
Part IV	Supplemental Infor	mation <sub>(continu</sub>	ued)				
-							
-							
-							
-							

#### 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 for the latest information.

OMB No. 1545-0047

2021

Open to Public

Inspection

Schedule I (Form 990) 2021

Name of the organization **Employer identification number** 24-0795686 LAFAYETTE COLLEGE Part I **General Information on Grants and Assistance** 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 X Yes criteria used to award the grants or assistance? 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

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
NSTITUTIONAL SCHOLARSHIP AWARDS	1470	60,726,297.	0.	N/A	N/A
CADEMIC PRIZES, AWARDS, AND FELLOWSHIPS	208	406,225.	0.	N/A	N/A
ARES 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.

Schedule I (Form 990)

## **SCHEDULE J** (Form 990)

**Compensation Information** 

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number LAFAYETTE COLLEGE 24-0795686 **Questions Regarding Compensation** 

			Yes	No
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.			
	First-class or charter travel  X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X    Tax indemnification and gross-up payments      X    Health or social club dues or initiation fees			
	Discretionary spending account  X 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	1b	Х	
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?	2	Х	
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.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  I Compensation survey or study			
	Form 990 of other organizations  X 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:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	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:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	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:			
	The organization?	6a		X
b	Any related organization?	6b		Х
	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	7	Х	
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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686 Page **2** 

### 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.

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ALISON R. BYERLY	(i)	0.	300,000.	1,423,521.	13,656.	48,993.	1,786,170.	0.
FORMER PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KRISHNA MEMANI	(i)	389,973.	321,406.	2,791.	27,550.	25,119.	766,839.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MERVIN A. BURTON	(i)	134,089.	358,000.	25,650.	9,525.	2,590.	529,854.	0.
DIR OF INVESTMENTS (THRU 07/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ROGER A. DEMARESKI	(i)	378,951.	0.	39,939.	27,550.	76,738.	523,178.	0.
VP FIN & ADMIN/TREAS (THRU 11/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) LESLIE F. MUHLFELDER	(i)	340,047.	10,000.	3,637.	24,082.	38,910.	416,676.	0.
VP HUMAN RESOURCES, GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KIMBERLY A. SPANG	(i)	321,456.	0.	11,394.	22,750.	22,939.	378,539.	0.
VP DEVELOPMENT & COLLEGE RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JOHN E. MEIER	(i)	314,016.	0.	2,074.	21,494.	34,863.	372,447.	0.
PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LI ZHAO	(i)	186,874.	163,000.	253.	13,393.	458.	363,978.	0.
INVESTMENT ASSOCIATE	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) NICOLE HURD	(i)	262,500.	0.	29,078.	24,938.	42,952.	359,468.	0.
PRESIDENT (AS OF 07/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) GREGORY V. MACDONALD	(i)	253,173.	0.	4,322.	18,200.	81,215.	356,910.	0.
VP ENROLLMENT MGMT (THRU 04/2022)	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SAIYID A. RIZVI	(i)	317,302.	0.	3,188.	20,341.	14,233.	355,064.	0.
PROFESSOR OF ECONOMICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) JOHN M. GARRETT	(i)	235,533.	0.	42,624.	19,630.	22,739.	320,526.	0.
HEAD COACH - FOOTBALL (THRU 12/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) CRAIG BECKER	(i)	264,908.	1,500.	3,128.	18,043.	25,314.	312,893.	0.
ASSOC VP FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) BRUCE A. MURPHY	(i)	265,305.	0.	4,718.	18,872.	21,407.	310,302.	0.
KIRBY PROFESSOR OF GOVERNMMENT & LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JOHN L. O'KEEFE	(i)	243,005.	0.	576.	17,100.	19,745.	280,426.	0.
VP & CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) ANNETTE DIORIO	(i)	231,173.	10,000.	1,558.	16,245.	10,839.	269,815.	0.
VP CAMPUS LIFE	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) MARK EYERLY	(i)	228,335.	0.	2,384.	16,174.	19,550.	266,443.	0.
VP MARKETING & COMM (THRU 06/2022)	(ii)	0.	0.	0.	0.	0.	0,	0.
(18) ALMA SCOTT-BUCZAK	(i)	182,850.	0.	26,455.	13,322.	24,392.	247,019.	0,
ASSOC VP HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)						-	
	(ii)							
	(i) (ii)							
	_							
	(i) (ii)							
	(II)	l	l	l			I .	I .

#### Part III Supplemental Information

Schedule J (Form 990) 2021

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

Schedule J (Form 990) 2021

#### Part III Supplemental Information

Schedule J (Form 990) 2021

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

Schedule J (Form 990) 2021

#### Part III Supplemental Information

Schedule J (Form 990) 2021

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021 Page 3 Part III | Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. 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.

1

#### **SCHEDULE K** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds** 

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990.

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

OMB No. 1545-0047 2021 Open to Public Inspection

Name of the organization

LAFAYETTE COLLEGE

**Employer identification number** 24-0795686

	_												
Part I Bond Issues													
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description	on of purpose	(g) De	efeased	(h) On of is		(i) Po	
								Yes	No	Yes	No	Yes	No
NORTHAMPTON CITY GPA (SERIES 2010 A					I	REFUND SERIE	S 10A, VAR.						
A AND B)	23-3007498	66353LAY3	04/30/10	26,6	89,800.	CAP. PROJECT	S		х		х		Х
					(	COLLEGE REFU	NDING REVENU	E					
B NORTHAMPTON CITY GPA (SERIES 2018)	23-3007498	66353LDL8	10/02/18	21,5	20,883.	BONDS			Х		х		Х
					C	CONSTRUCT./R	ENOV.						
C NORTHAMPTON CITY GPA (SERIES 2006)	23-3007498	66353LAG2	09/14/06	15,1	.00,000.	ATHLETIC FAC	ILITIES		Х		Х		Х
D NORTHAMPTON CITY GPA (SERIES 2003)	23-3007498	66353LAA5	04/02/03	10,1	.90,000.	REFUND SERIE	s 93		Х		Х		Х
Part II Proceeds													
			Α		В						D		
1 Amount of bonds retired			4	485,173.		326,873.	4,189,573.		3.			15,	383.
2 Amount of bonds legally defeased													
3 Total proceeds of issue			26	690,421.		21,520,883.	15,1	.00,000	).		10,	190,	000.
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds							1	.08,121	١.				
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds						370,883.							
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceeds							10,709						
· · · · · · · · · · · · · · · · · · ·				400,421.			14,9	81,170	).				
11 Other spent proceeds			22	290,000.		21,150,000.					10,	190,	000.
12 Other unspent proceeds									_				
13 Year of substantial completion				2013		2018		007				2003	
			Yes	No	Yes	No	Yes	No		Yes	_	No	
14 Were the bonds issued as part of a refunding i	•				l								
if issued prior to 2018, a current refunding issued	· · · · · · · · · · · · · · · · · · ·			Х	Х			X			_		X
15 Were the bonds issued as part of a refunding i													
issued prior to 2018, an advance refunding issue)?					Х	77	Х		X	-			
-			Х		Х		Х			Х			
17 Does the organization maintain adequate book	ks and records to su	upport the	v				•			v			
final allocation of proceeds?		Х		Х		Х			Х				

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

Schedule K (Form 990) 2021

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#### **SCHEDULE K** (Form 990)

Department of the Treasury Internal Revenue Service

Part I Bond Issues

## **Supplemental Information on Tax-Exempt Bonds**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2021 Open to Public Inspection

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

(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	d (e) Issu	e price	(f) Descript	ion of purpose	(g) De	efeased	( <b>h)</b> On of is:		(i) Po	
								Yes	No	Yes	No	Yes	No
						CONTRUCTION	/PARTIAL						
A NORTHAMPTON CITY GPA (SERIES 2017)	23-3007498	66353LDE4	06/14/17	158,2	71,482.	ADVANCE REFU	JNDING PRIOR	В	х		х		Х
В													
											, !		
С													
											, !		
D													
Part II Proceeds					1								
				١		В	С				D		
			***	7,893,994.									
2 Amount of bonds legally defeased													
3 Total proceeds of issue				3,271,482.									
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds									-				
				. 011 000									
7 Issuance costs from proceeds				1,011,988.									
•									-				
9 Working capital expenditures from proceeds				0,000,000.									
10 Capital expenditures from proceeds			7,	7,259,495.					-				
<ul><li>Other spent proceeds</li><li>Other unspent proceeds</li></ul>				7,235,455.					+				
<ul><li>12 Other unspent proceeds</li><li>13 Year of substantial completion</li></ul>				2020									
real of substantial completion			Yes	No	Yes	No	Yes	No		Yes	$\Box$	No	
14 Were the bonds issued as part of a refunding	issue of tax-exempt	bonds (or.	100	110	100	110	100	110		100	$\top$	110	
if issued prior to 2018, a current refunding iss	•	• •		Х									
15 Were the bonds issued as part of a refunding													
issued prior to 2018, an advance refunding is		•	х										
16 Has the final allocation of proceeds been made													
17 Does the organization maintain adequate boo				_	_								
			х										
HA For Paperwork Reduction Act Notice, see t									Scho	dule K	(Eorr	n 000)	20

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

Schedule K (Form 990) 2021

Sch	edule K (Form 990) 2021 LAFAYETTE COLLEGE			24-0	795686				Page
Pai	t III Private Business Use								
			Α		В		C		)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No 	Yes	No 	Yes	No 	Yes	No
	which owned property financed by tax-exempt bonds?		Х		Х		Х		Х
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		Х		Х		Х		Х
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		Х		Х		Х		Х
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?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		Х		Х		Х		Х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		9
5	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		%		%		%		9
6	Total of lines 4 and 5		%		%		%		9
7	Does the bond issue meet the private security or payment test?		Х		х		Х		Х
8a	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?		х		х		х		Х
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		9
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	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		Х		Х		X	
Pai	t IV Arbitrage		•		,		'		
			A		В		С		)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х		Х		Х		Х
2	If "No" to line 1, did the following apply?				•		'		
	Rebate not due yet?		Х		Х		Х		Х
	Exception to rebate?		Х		Х		Х		Х
	No rebate due?	X		Х		Х		X	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•		•		•		
	performed								
	portornio		1						

**3** Is the bond issue a variable rate issue?

Page 2

Sche	edule K (Form 990) 2021 LAFAYETTE COLLEGE			24-0	795686				Page 2
Par	t III Private Business Use								
			A		В		С		)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		х						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		Х					I	
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		Х						
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?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	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		%		%		%		%
6			%		%		%		%
7	Does the bond issue meet the private security or payment test?		х						
8a	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?		х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or		•		•				
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9									
	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?	х							
Par	t IV Arbitrage	l							
			A		В		С	Г	)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
-	Penalty in Lieu of Arbitrage Rebate?	100	Х		1		110		
2	If "No" to line 1, did the following apply?		•						
	Rebate not due yet?		х						
	Exception to rebate?		х						
	No rebate due?	Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•		<u> </u>		-		
	performed								
3	Is the bond issue a variable rate issue?		Х						

24-0795686

Part IV Arbitrage (continued)								
		A	E	3		)		)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х		Х		X		Х
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		X		Х
<b>b</b> Name of provider								
c Term of GIC								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		Х
7 Has the organization established written procedures to monitor the								
requirements of section 148?	х		х		x		х	
Part V Procedures To Undertake Corrective Action								
		A	E	3		)		)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	х		х		x		х	
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instr	uctions.					

ENTITY 2

Page 3

LAFAYETTE COLLEGE 24-0795686

Schedule K (Form 990) 2021 LAFAYETTE COLLEGE			24-0	795686				Page 3
Part IV Arbitrage (continued)								
		A	E	3		C		
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
<b>b</b> Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	Х							
Part V Procedures To Undertake Corrective Action								
		A	E	3		C	C	)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	Х							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instr	uctions.					
PART I, BOND ISSUES:								
(F) DESCRIPTION OF PURPOSE:								
CONTRUCTION/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 TRS FORM 8038 IT IS COMPRISED OF TWO								

Schedule K (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686 Page 4

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

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

LAFAYETTE COLLEGE

Employer identification number 24-0795686

Pai	rt i   Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	
		applicable		Form 990, Part VIII, line 1g	noncash contribu	ition an	nounts	3
1	Art - Works of art	Х	1		EXPERT OPINION			
2	Art - Historical treasures			·				
3	Art - Fractional interests							
4	Books and publications	Х		11,050.	FMV			
5	Clothing and household goods	Х		3,000.	FMV			
6	Cars and other vehicles			,				
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	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	Х	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)	Х	6	3,154.	COST			
26	Other (GOODS/SVCS)	Х	1	1,622.	FMV			
27	Other (GOODS/SVCS)	Х	1	1,400.	EXPERT OPINION			
28	Other ()							
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29			2	
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

132142 11-17-21

## **SCHEDULE 0** (Form 990)

# 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.

**Employer identification number** 

24-0795686

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

LAFAYETTE COLLEGE

► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. Inspection

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 THE CHAIRS OF THE STANDING COMMITTEES OF THE BOARD SECRETARY 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

132211 11-11-21

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

Schedule O (Form 990) 2021

<u>Schedule O (Form 990) 2021</u> Page **2** 

**Employer identification number** Name of the organization LAFAYETTE COLLEGE 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:

<u>Schedule O (Form 990) 2021</u> Page **2** 

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

Schedule O (Form 990) 2021

THE PROCESS FOR DETERMINING THE COMPENSATION OF THE OFFICERS AND KEY

Schedule O (Form 990) 2021 Page 2

Schedule O (Form 990) 2021	Page 2
Name of the organization  LAFAYETTE COLLEGE	Employer identification number 24-0795686
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)

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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

24-0795686

(a)	(b)	(c)	(d)		(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)		ome	End-of-year		Direct c	ontrolling itity	9
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organizat	tion answered "Yes" on Form 99	0, Part IV, line 34,	becaus	e it had one	or more	related tax-exer	npt	
(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section		(e) lic charity s (if section	Direc	(f) ct controlling entity		<b>g)</b> 512(b)(13) rolled :ity?
		loreigh country)			D1(c)(3))		<b>,</b>	Yes	No
JOHN T GALLAHER CHARITABLE TRUST -								103	110
23-6215376, PO BOX 185, PITTSBURGH, PA									
15230	PERPETUAL TRUST	PENNSYLVANIA	501(C)(3)	PF		LAFAYE	TTE COLLEGE	х	
CHARLES W BLAIR TESTAMENTARY TRUST B -									
72-6130983, 10 S DEARBORN, CHICAGO, IL									
60603	PERPETUAL TRUST	ILLINOIS	501(C)(3)	PF					Х
CHURCH, PRESBYTERIAN CHURCH USA FOUNDATION	_								
SIGLER - 23-1440115, 200 EAST TWELFTH									
STREET STE B JEFFERSONVILLE TN 47130	PERPETUAL TRUST	TENNESSEE	501(C)(3)	PF					х

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

CHURCH, PRESBYTERIAN CHURCH USA FOUNDATION RAYMOND MUSIC - 23-1440115, 200 EAST TWELFTH STREET, STE B, JEFFERSONVILLE, TN 47130

LAFAYETTE COLLEGE

Schedule R (Form 990) 2021

TENNESSEE

501(C)(3)

PERPETUAL TRUST

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	Percenta ping ownersh er?
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	alloca	itions?			
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No.
						l					

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	Legal domicile (state or foreign	(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	512( cont ent	tion b)(13) rolled tity?
		country)		,				Yes	No
	-		LAFAYETTE					_	
CHARITABLE REMAINDER UNITRUSTS (24)	INVESTMENTS	PA	COLLEGE	TRUST			100%	Х	<del>                                     </del>
	_								
PERPETUAL TRUST (1)	INVESTMENTS	NV		TRUST					Х
	_								
PERPETUAL TRUST (2)	INVESTMENTS	NV		TRUST					х
	_								
PERPETUAL TRUST (3)	INVESTMENTS	PA		TRUST					х
	-								
	-								

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	s with one or more re	elated organizations listed i	in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		Х				
	b Gift, grant, or capital contribution to related organization(s)										
	Gift, grant, or capital contribution from related organization(s)				1c		Х				
	Loans or loan guarantees to or for related organization(s)				1d		Х				
е	Loans or loan guarantees by related organization(s)				1e		Х				
f	f Dividends from related organization(s)										
g	Sale of assets to related organization(s)				1g		Х				
i	Exchange of assets with related organization(s)				1i		Х				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х				
k Lease of facilities, equipment, or other assets from related organization(s)											
m Performance of services or membership or fundraising solicitations by related organization(s)											
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)											
0	Sharing of paid employees with related organization(s)				10		Х				
p Reimbursement paid to related organization(s) for expenses											
r	Other transfer of cash or property to related organization(s)				1r		Х				
s	Other transfer of cash or property from related organization(s)				1s	Х					
2	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	nis line, including covered r	elationships and transaction thresholds.							
	<b>(a)</b> Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount inv	olved						
	ŭ	type (a-s)									
	urchase of assets from related organization(s) Achange of assets with related organization(s) Achange of assets with related organization(s) Achange of assets with related organization(s) Asset of facilities, equipment, or other assets to related organization(s) Asset of facilities, equipment, or other assets from related organization(s) Asset of facilities, equipment, or other assets from related organization(s) Asset of facilities, equipment, or other assets from related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundraising solicitations by related organization(s)  Incommance of services or membership or fundrai										
<b>1</b> ) (	HARITABLE REMAINDER TRUSTS	S	373,687.	FMV							
2)											
3)											
<u> </u>											
4)											
5)											
<b>C</b> \											
6)		1									

Yes No

Schedule R (Form 990) 2021 LAFAYETTE COLLEGE 24-0795686 Page 4

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) Percentage ownership