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.

2019

DLN: 93493132003411 OMB No. 1545-0047

☐ Yes ☐ No

Form **990** (2019)

Cat. No. 11282Y

Open to Public

Form **990**

Department of the

Interna	l Reve	enue Servic	е					Inspection
A F	or th	ne 2019	calendar year, or tax year be	eginning 07-01-2019 , and ending	06-30-2020			
B Che	ck if a	applicable:	C Name of organization Trustees of Dartmouth College			D Employ	er identif	ication number
		change	Trustees of Dartifloutif College			02-022	2111	
		hange	Doing business as					
☐ Ini		eturn rn/terminate						
		d return	Number and street (or P.O. box		oom/suite	E Telephor	ne number	
□ Ар	plicati	ion pendin	7 Lebanon Street Suite 302 601	.5		(603) 6	46-3011	
				country, and ZIP or foreign postal code				
			Hanover, NH 03755			G Gross re	ceipts \$ 8	,255,534,108
			F Name and address of prin	cipal officer:	H(a) I	s this a group re	turn for	
			Philip Hanlon 7 Lebanon Street Suite 302	6015		ubordinates?		□Yes ☑ No
			Hanover, NH 03755		Н(ь) А	re all subordinat	tes	☐ Yes ☐No
I Ta	x-exe	mpt status	: 🔽 501(c)(3) 🔲 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐		f "No," attach a	list. (see	instructions)
J W	ebsi	te: ► ht	tps://home.dartmouth.edu			Group exemption	number	▶ 8204
K Form	n of o	organization	n: 🗹 Corporation 🗌 Trust 🔲	Association ☐ Other ►	L Year of	formation: 1769	M State	of legal domicile: NH
Pa	art I		nmary					
				on or most significant activities: romising students and prepares them (for a lifetime of l	earning and of r	ecnoncih	le leaderchin
e)			a faculty dedicated to teaching		or a medime or i	earning and or r	esponsib	ie leadersilip,
E C								
Ĕ								
Activities & Governance	,	Chack th	sis boy • D if the organization	n discontinued its operations or dispose	ad of more than	25% of its not -	recete	
ن ت				erning body (Part VI, line 1a)			3	26
> 5 ∽	4	Number	of independent voting member	rs of the governing body (Part VI, line :	1b)		4	25
ıtıe	1		•	n calendar year 2019 (Part V, line 2a)	*		5	10,785
Ž.	1		, ,	necessary)			6	13,800
ĕ	1		•	Part VIII, column (C), line 12			7a	18,507,596
	1			from Form 990-T, line 39			7b	12,959
						Prior Year		Current Year
	8	Contribu	itions and grants (Part VIII, line	1h)		402,986,	869	552,826,074
Ravenue	1			2g)		547,727,		529,329,633
ōΛċ	1	-	•	A), lines 3, 4, and 7d)		471,393,		469,806,590
ď	1		, , ,	nes 5, 6d, 8c, 9c, 10c, and 11e)		22,099,		29,389,112
	1			(must equal Part VIII, column (A), line	12)	1,444,207,		1,581,351,409
	_			X, column (A), lines 1–3)		183,020,	241	192,557,837
	1		paid to or for members (Part I)					
ιo.	1		•	e benefits (Part IX, column (A), lines 5	-10)	519,981,	997	530,470,589
Expenses	1			column (A), line 11e)	, <u> </u>	167,		167,041
9	1		draising expenses (Part IX, column (, ,			-	
쬬	1			nes 11a–11d, 11f–24e)	_	425,125,	511	367,651,690
	1			equal Part IX, column (A), line 25)		1,128,294,		1,090,847,157
	1		e less expenses. Subtract line 1			315,912,		490,504,252
× 6			Tros expenses reasonate mile 2	<u> </u>	Begin	ning of Current Y		End of Year
Net Assets or Fund Balances								
SSe	20	Total as	sets (Part X, line 16)			8,630,388,	531	9,100,996,158
절절	21	Total lia	bilities (Part X, line 26)			1,873,207,	279	1,932,444,502
žZ	22	Net asse	ets or fund balances. Subtract li	ne 21 from line 20		6,757,181,	252	7,168,551,656
Pa	rt II	Sigr	nature Block		•			
				xamined this return, including accompa				
		e and beli ledge.	ef, it is true, correct, and comp	lete. Declaration of preparer (other the	an officer) is bas	sed on all inform	ation of v	which preparer has
		****	** ture of officer			2021-05-12 Date		
Sign		V ⊃igria	ture or officer			Date		
Here	2		e Ingalls Assistant VP, Controller					
			or print name and title		T.	 		
			Print/Type preparer's name	Preparer's signature	Date	Check \square if	PTIN	
Paid		-	Firm's name			self-employed		
Pre		ei	Firm's name			Firm's EIN ►		
Use	Or	ווע [Firm's address ▶			Phone no.		
						1		

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2019)					Page 2
Pa	Statement	of Program Servi	ce Accomplis	hments		
	Check if Sched	dule O contains a resp	onse or note to	any line in this Part III		🗆
1	Briefly describe the o	rganization's mission:	:	•		
	mouth College educates ty dedicated to teachin			epares them for a lifetin	ne of learning and of responsible	leadership, through a
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on	
	the prior Form 990 or	r 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe the	se new services on So	chedule O.			
3	Did the organization of	cease conducting, or	make significant	changes in how it cond	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedi	ule O.			
4		d 501(c)(4) organizat	ions are required	to report the amount	largest program services, as me of grants and allocations to other	
4a	(Code:) (Expenses \$	606,503,726	including grants of \$	178,427,159) (Revenue \$	437,176,787)
	See Additional Data	, (=::, -::::::::::,				,,
4b	(Code:) (Expenses \$	180,236,394	including grants of \$	5,515,372) (Revenue \$	79,110,580)
	See Additional Data					
4c	(Code:) (Expenses \$	164,571,979	including grants of \$	8,615,306) (Revenue \$	8,519,127)
	See Additional Data					
4d	Other program service	ces (Describe in Sched	dule O.)			
	(Expenses \$	inc	cluding grants of	\$) (Revenue \$)
4e	Total program serv	rice expenses ►	951,312,0	99		

Part IV Checklist of Required Schedules Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 . . . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 💆 4 Yes Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . 5 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 Yes 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Yes 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 Yes 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b 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 No total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII **11**c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported No 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 11f Yes 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Nο b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Yes 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 14a Yes 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 14b Yes valued at \$100,000 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 Yes 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Yes 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) 🔧 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Yes Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Yes Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 21

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

rm	990 (2019)			Page 4			
Par	Checklist of Required Schedules (continued)						
			Yes	No			
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes				
:3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes				
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No			
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No			
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No			
6	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		No			
.7	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						
8	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No			
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes				
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No			
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes				
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes				
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No			
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No			
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes				
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes				
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes				
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes				
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No			
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes				
Par				_			
	Check if Schedule O contains a response or note to any line in this Part V			lacksquare			
4	Fortunation was administrative Power 2 of Forms 1006. Fortuna 0 is not a multi-ability.		Yes	No			
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2,976						
IJ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			I			

1c

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ►IT, SP, UK, FR, GM	4a	Yes	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b 5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No
h	solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were			
	not tax deductible?	6b		
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
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		
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			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	Yes	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.	16	Yes	

-orm	990 (2019)			Page
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	lines V
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 26			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA , MA , NH , NY , OK			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Controller's Office 7 Lebanon Street Suite 302 Hanover, NH 03755 (603) 646-3011			

 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. Isist all of the organization's current key employees, if any. See instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (B) Average hours per week (list any hours below dotted line) (C) Average hours per week (list any hours per week list any hours per week (list any hours per week list an	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than subject or the organization or any related organization or trustee) and the organization or			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. 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 furrent key employees, if no. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization or any current officer, director, or trustee. (A) Name and title A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee. (B) A Reportable compensation or trustee of the organization or trustee. (C) (B) A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. ■ List all of the organization which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Average hours per week (list any hours for related organizations below dotted line) ■ (C) Reportable compensation from the organization organization organization organization organizations organi	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. See instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line) ■ Check this box if neither the organization or any related organization organization organization organization organization organization organization	year.		•						, ,		-	n's ta	Κ
List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ● List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization. ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. ● List all of the organization than \$10,000 of reportable compensation from the organization nor any related organization and any related organization compensated any current officer, director, or trustee.	of compensation. Enter -0- in columns (D), (E), and (F) if no	compe	nsati	on w	/as	oaid.		.,				
who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization from the organization and any related organizations. ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization organization nor any related organization organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any neithe													
■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (C) (D) (E) Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee) (C) (D) (E) Reportable compensation from the organization (W-2/1099-MISC) (W-2/1099-MISC) MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations.													
Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organizations (W-2/1099-MISC) (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title Average hours per week (list any hours for related organizations below dotted line) Average hours per week (list any hours for related organizations below dotted line) Average hours per week (list any hours for related organizations below dotted line) Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institutional Trustee Position (w-2/1099- MISC) Officer Institution (w-2/1099- MISC) Officer Institution (w-2/1099- MISC) Officer Institution (w-2/1099- MISC) Officer Institution (w-2/1099-	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it st		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	nated of oth nsation the	n
See Additional Data Table		for related			` '	related							
	See Additional Data Table												
													—
													—

Form 990 (2019)												Page 8
Part VII Section A. Officers, Direct	ors, Trustees	, Key I	Empl	oye	es,	and	High	nest Compens	ated Employees	(cont	inued)	
(A) Name and title	Name and title Average hours per week (list any hours for related organizations) Average hours per week (list any hours for related organizations)				t che inle: ficer	ss pers	son I	Reportable compensation from the organization	Reportable compensation from related organization	n d s	Estim Estim amount o compen from organizat	ated of other sation the
					relat organiz	ted						
See Additional Data Table						<u> </u>				+		
										_		
										+		
										\perp		
1b Sub-Total	art VII, Section	 A				▶						
d Total (add lines 1b and 1c)			<u></u>			▶		15,825,873		0		945,339
2 Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived more than	\$100,000			
3 Did the organization list any former	efficar director	au turat	- lu		l		a = ai	abaat campana	ted employee en		Yes	No
line 1a? If "Yes," complete Schedule 3			ee, Ke •	• •	•	• •	•	gnest compensa	· · ·	3	Yes	
4 For any individual listed on line 1a, is organization and related organization individual										4	Yes	
5 Did any person listed on line 1a receivant services rendered to the organization		•			,			_	individual for	5		No
Section B. Independent Contract	ors											110
Complete this table for your five high from the organization. Report comper										mpens	sation	
Name a	(A) and business addre	:SS						С	(B) Description of services		((Compe	c) nsation
Turner Construction Company 375 Hudson Street								Construc services	ction and contracting		24	,615,487
New York, NY 10014 Engleberth Construction Inc								Constru	ction and contracting		15	7,582,378
150 Water Tower Circle								services			17	,302,376
Suite 101 Colchester, VT 05446												
Windover Construction Inc 66 Cherry Hill Drive								Construc services	ction and contracting		16	5,381,470
Beverly, MA 01915 PC Construction Company								Construe	ction and contracting		-	5,862,721
193 Tilley Drive								services				,,002,,21
South Burlington, VT 05403 Estes & Gallup Inc									ction and contracting			1,856,870
13 Orford Rd Lyme, NH 03768								services				
2 Total number of independent contractor compensation from the organization		not lim	ited t	o th	ose	listed	abov	/e) who received	more than \$100,0	00 of		
											Form 99	0 (2019)

orm 9 Part		(2019) Statement	of E	Povonuo						Page 9
Part	VIII				respo	onse or note to any	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(4)	1a	Federated campa	aigns	· .	1a	0		revenue		512 - 514
ants	ŀ	b Membership due:	s.	. [1 b	0				
رس دس	•	c Fundraising even	its .		1c	2,450				
ifts, ar A	•	d Related organiza	tions	5 <u> </u>	1 d	0				
3, G m∷		e Government grants		Ļ	1e	118,895,011				
Contributions, Gifts, Grants and Other Similar Amounts		All other contribution and similar amounts above	s not	included	1f	433,928,613				
	!	g Noncash contribution lines 1a - 1f:\$	ns in	cluded in	1 g	225,413,084				
Cor		h Total. Add lines	1a-1	f		>	552,826,074			
						Business Code				
	2a	Tuition & Fees				611600	419,793,665	419,793,665	0	0
Program Service Revenue	b	Auxiliary Service				611710	59,947,374	55,723,765	4,223,609	0
	c	Medical Related				611600	17,548,374	17,548,374	0	0
ກ Ser	d	Other Education Rela	ted			611600	13,886,921	13,886,921	0	0
rograr	е	All Other				611600	18,153,299	17,853,769	299,530	0
<u>o</u>	f	All other program	serv	ice revenue.		1	0	0	0	0
	g	Total. Add lines 2	2a-2	f	•	529,329,633				
		Investment income similar amounts)		luding divide		nterest, and other	67,614,813	3	8,630,437	58,984,376
		Income from invest				ond proceeds) (0
	5	Royalties					2,952,187	7	(2,952,187
				(i) Rea	ıl	(ii) Personal	-			
	6a	Gross rents	6a	16,2	68,002	2	o			
	b	Less: rental expenses	6b	10,0	27,210		0			
	С	Rental income	_				_			
	d	or (loss) Net rental income	6c		40,792		0 6,240,792	2	126,510	6,114,282
		The Ferrida meeting		(i) Securi		(ii) Other	1			1,==:,===
	7a	Gross amount from sales of assets other than inventory	7a	7,065,2	64,429	1,066,85	1			
	b	Less: cost or other basis and sales expenses 7b 6,662,365,50			3 1,774,00	0				
	С	Gain or (loss) 7c 402,898,9				-707,14	9			
		Net gain or (loss)					402,191,777	7 (5,227,510	396,964,267
Other Revenue	8a	Gross income from fu (not including \$ contributions reporte See Part IV, line 18	d on	2,450 of						
Rev	h	Less: direct expen			8a 8b	28,868 15,986				
ıer		: Net income or (los			ng ev	ents	」 12,882	2		12,882
	9a	Gross income from See Part IV, line 19			9a	0				
	b	Less: direct expen	ses		9b	0	_			
	c	: Net income or (los	s) fr	om gaming	activit	ies) () (0
	10a	aGross sales of inve returns and allowa	ento:	ry, less	10a	0				
	b	Less: cost of good	s so	ld	10 b	0				
	C	Net income or (los Miscellaneo	_		invent	Business Code	T			0
	11	•aSplit Interest & O				52592	20,059,959	5		20,059,955
	b	Other Revenue				90009	9 123,296	5 () (123,296
	c	,) (0	0
		All other revenue Total. Add lines 1				<u> </u>				0
						•	20,183,25	1		
		Total revenue. S	ce II	isu ucuons i	•	• • • •	1,581,351,409	524,806,494	18,507,596	485,211,245 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must constant to the section of the		_		ımn (A).
Check if Schedule O contains a response or note to an		(B)	(C)	⊔ (D)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,101,454	3,101,454		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	185,925,419	185,925,419		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	3,530,964	3,530,964		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	10,316,941	2,249,841	7,214,181	852,919
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1,470,715	1,470,715	0	0
7 Other salaries and wages	457,198,430	378,561,588	48,435,853	30,200,989
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	28,381,300	23,080,217	3,540,791	1,760,292
9 Other employee benefits	7,117,388	5,752,330	923,276	441,782
10 Payroll taxes	25,985,815	20,994,498	3,377,665	1,613,652
11 Fees for services (non-employees):				
a Management	309,133	309,133	0	0
b Legal	3,610,734	1,571,496	2,038,596	642
c Accounting	926,320	15,810	910,493	17
d Lobbying	40,860	0	40,860	0
e Professional fundraising services. See Part IV, line 17	167,041			167,041
f Investment management fees	2,578,118	0	2,578,118	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	90,206,035	82,232,303	-44,476	8,018,208
12 Advertising and promotion	1,688,151	1,409,626	30,564	247,961
13 Office expenses	17,059,211	14,116,167	1,015,157	1,927,887
14 Information technology	17,300,885	7,125,324	9,039,098	1,136,463
15 Royalties	766,048	765,404	604	40
16 Occupancy	40,838,879	38,240,335	2,005,883	592,661
17 Travel	22,647,437	19,773,003	596,959	2,277,475
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0	0	0	0
19 Conferences, conventions, and meetings	1,298,573	1,167,574	64,624	66,375
20 Interest	37,348,944	35,361,913	1,928,725	58,306
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	64,969,224	62,233,756	2,527,197	208,271
23 Insurance	1,300,988	445,140	824,899	30,949
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Purchase for Resale	14,487,853	14,426,054	61,348	451
b Books & Media	13,834,691	13,672,017	89,290	73,384
c UBI Tax Expense	209,399	-88,126	302,567	-5,042
d Other Expenses	36,230,207	33,868,144	897,165	1,464,898
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	1,090,847,157	951,312,099	88,399,437	51,135,621
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).	1			

10a

10b

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part IX .			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	5,444,041	1	10,113,200
2	Savings and temporary cash investments	288,479,831	2	313,045,724
3	Pledges and grants receivable, net	431,519,372	3	389,120,423
4	Accounts receivable, net	44,815,764	4	48,791,350
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B)		_	

2,139,496,281

1,078,323,027

73.799.072

1.920.757

16,945,867

993,530,736

1,169,386,423

5.593.362.235

1,242,047

9,942,386

8,630,388,531

115,435,483

47,188,676

505,324,999

49,790,326

22,997,005

500,000,000

632,470,790

1.873.207.279

1,514,996,313

5,242,184,939

6,757,181,252

8,630,388,531

10c

11

12 0 13

14

15

16

17 18

19

20

21

22

23

24

25

26

27

28

30

31

32

33

0 29

0

Page 11

70.457.810

2.062.045

18,789,303

1,061,173,254

1,069,102,088

6.105.708.367

1,230,634

11,401,960

9,100,996,158

115,933,939

38.923.441

496,524,999

47,705,226

21,181,872

545.000.000

667.175.025

1.932.444.502

1,500,128,527

5,668,423,129

7,168,551,656

9,100,996,158

Form 990 (2019)

0

0

	6	entity or family member of any of these person Loans and other receivables from other disqual section $4958(f)(1)$), and persons described in s
S	7	Notes and loans receivable, net
Assets	8	Inventories for sale or use
AS	9	Prepaid expenses and deferred charges
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D
	ь	Less: accumulated depreciation
	11	Investments—publicly traded securities .
	12	Investments—other securities. See Part IV, line

13

14

15

16

17

18

19

20

21

23

24

26

27

28

30

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

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

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Investments-program-related. See Part IV, line 11

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

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

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Form 990 (2019)

Yes

Yes

Yes (2019)

2c

3a

3b

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

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

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

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

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

Additional Data

Software ID: 19010655

Software Version: 2019v5.0

EIN: 02-0222111

Name: Trustees of Dartmouth College

Form 990 (2019)

Form 990, Part III, Line 4a: Education and Academic Support: A Dartmouth education is unlike any other. Through person-to-person teaching and opportunities to create and apply knowledge on campus and across the globe, Dartmouth instills a love of learning among its students and empowers them for a lifetime of leadership. Academics at Dartmouth are innovative, interdisciplinary, international, and individualized for each student. Each student's experience is distinguished by breadth, depth, and personal connections with top faculty. The institution comprises the Faculty of the Arts & Sciences, the Guarini School of Graduate and Advanced Studies, and three professional schools: the Thayer School of Engineering, the Tuck School of Business, and the Geisel School of Medicine. Dartmouth's approximately 930-person faculty teaches and guides approximately 6,600 undergraduate and graduate students. Dartmouth's library system directly supports the research and teaching mission of Dartmouth College, as well as the life-long learning needs of the Dartmouth community, by providing access to multiple types of resources, including approximately 2.1 million printed volumes, 28,000 microform volumes, 145,000 other physical formats, 367,000 network resources and 1.7 million electronic books. State-of-the-art computing resources are available to faculty and students to foster innovation and excellence in research and in the curriculum. The outbreak of the COVID-19 pandemic has caused domestic and global disruptions in operations for institutions of higher education in the fourth guarter of the fiscal year ended June 30, 2020, and throughout fiscal 2021. Dartmouth's overall mission as described in this Form 990 has not changed due to the pandemic. However, in fiscal year 2020, changes in the mode of Dartmouth's operations included a transition to remote teaching and learning for faculty and students, a substantial reduction in student residential housing, dining, and support programs, a pause in certain sponsored research projects, and a transition to remote working for most of the Dartmouth workforce. Thus, Dartmouth continued to fulfill its educational mission within the constraints imposed by the pandemic.

Form 990, Part III, Line 4b:

nurturing. Prior to the impact of the global pandemic, approximately 85% of Dartmouth undergraduates lived on campus and Dartmouth's diverse dining facilities were an important part of campus life. Athletics at Dartmouth compliment the overall academic and intellectual growth of Dartmouth students, with more than 75% of

undergraduates participating in at least one of the 35 varsity teams, 33 club sports teams and several intramural leagues. In addition, facilities such as the Hanover Country

Club, Dartmouth Skiway, and Morton Farm provide an opportunity for recreation and learning beyond the classroom. There are also approximately 365 graduate and undergraduate student groups which allow students to explore interests in diverse areas, including the arts, academics, activism, culture, politics, sustainability and others.

Campus Life: Our close-knit community is a distinctive and enduring feature of the Dartmouth experience. For students, the process of joining and adapting to a new community can be as educationally significant as their academic work. For this reason, Dartmouth invests resources in creating a community that is both stimulating and

Form 990, Part III, Line 4c:

of higher education and Dartmouth faculty pursue research at the highest levels of their disciplines. Students conduct independent study through one-on-one supervision with a faculty member or work as a member of a research group in state-of-the-art facilities. Dartmouth is home to world-class scholars in the Faculty of Arts & Sciences, the Guarini School of Graduate and Advanced Studies, the Thaver School of Engineering, the Tuck School of Business, and the Geisel School of Medicine-which has strong ties to

Research & Research Support: At Dartmouth, teaching and research are inextricably linked. Dartmouth offers undergraduate students a rigorous curriculum at the forefront

the Dartmouth-Hitchcock Clinic and the Mary Hitchcock Memorial Hospital. In addition, Dartmouth has more than 50 research-focused centers, institutes, and groups in

areas ranging from medicine and the arts to engineering and business. Many of these are interdisciplinary and join faculty and students from across the institution to work on complex issues. During fiscal 2020, faculty and others engaged in sponsored activity received approximately \$206 million in awards from external funding agencies.

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

0

0

0

0

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours		direct	or/ti	uste	ee)		organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
Philip Hanlon	40.0	х		x				1,300,825	0	237,234
President	0.0							1,300,825	0	237,234
Benjamin Wilson	3.0	х						0	0	0
Trustee	0.0							0	0	0
	2.0									

and Independent Contractors

David Hodgson

Eileen Chamberlain Donahoe

Elizabeth Cahill Lempres

Trustee

Trustee

Trustee

			47		ted		
Philip Hanlon	40.0	l					
President	0.0	X		×		1,300,825	0
Benjamin Wilson	3.0						
Trustee	0.0	X				0	0
Carlos Rodriguez-Pastor	3.0	l					
Trustee	0.0	X				0	0
Christopher Lord	3.0						
		X				0	0

0.0 3.0

0.0 3.0

0.0 3.0 Χ

Χ

Χ

......

......

Philip Hanlon	40.0	Х	X		1,300,825	0	
President	0.0		^		1,300,825	0	
Benjamin Wilson	3.0						
Trustee	0.0	Х			U	U	
Carlos Rodriguez-Pastor	3.0						
Trustee	0.0	Х			U	U	
Christopher Lord	3.0						
Trustee	0.0	X			U	U	
Christopher Sununu	1.0						
Trustee	0.0	Х			U	0	
Constance Womack Britton	3.0				_		
Trustee	0.0	Х			0	0	

Benjamin Wilson	3.0	Х			0	0	0
Trustee	0.0				0	0	0
Carlos Rodriguez-Pastor	3.0				0	0	
Trustee	0.0	Х			U	0	0
Christopher Lord	3.0						
Trustee	0.0	X			U	0	0
Christopher Sununu	1.0						
Trustee	0.0	Х			0	0	0
Constance Womack Britton	3.0						
Trustee	0.0	Х			0	0	0
Daniel Black	3.0						

Trustee	0.0						, and the second
Carlos Rodriguez-Pastor	3.0				_		_
Trustee	0.0	Х			0	0	0
Christopher Lord	3.0	Х			0	0	0
Trustee	0.0				0	0	0
Christopher Sununu	1.0	X			0	0	
Trustee	0.0				0	0	
Constance Womack Britton	3.0				0	0	
Trustee	0.0	X			0		U
	2.0						

		X			0	0	Ü
Trustee	0.0						
Constance Womack Britton	3.0						_
		Х			0	0	0
Trustee	0.0	,					
Daniel Black	3.0						_
		Х			0	0	0
Trustee	0.0						

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

Officer

Institutional

Truste

Key employee

Individual trustee or director

Χ

Х

Χ

Χ

Χ

0.0 3.0

0.0

0.0

0.0

0.0

0.0

3.0

3.0

.

2/1099-MISC)

Former

Highest compensated employee (W- 2/1099-

MISC)

0

organization and

related

organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours for related organizations below dotted line)
Elizabeth Cogan Fascitelli	3.0
Trustee	
Tustee	0.0
Elizabeth Mahoney Loughlin	3.0
· -	

and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

James Frank

James Jackson Trustee

Jeffrey Blackburn

Jeffrey Crowe

Gregory Maffei

Hilary C Tompkins

Emily Bakemeier
Trustee

Erica Ruliffson Schultz

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

Officer

Institutional

Trustee

Key employee

Highest compensated employee

Former

Individual trustee or director

Χ

Х

Χ

Х

Х

Χ

Χ

0.0 3.0

0.0 3.0

0.0 3.0

0.0 3.0

0.0 40.0

0.0 39.6

0.4 39.9

0.1 40.0

.....

......

2/1099-MISC)

712,682

456,285

710,739

2,334,254

(W- 2/1099-

MISC)

0

0

organization and

related

organizations

39,622

38,011

37,642

39,605

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours for related organizations below dotted line)
Laurel Richie	5.0
Trustee	0.0
Mitchell Kurz	3.0
Trustee	l oo

and Independent Contractors

Nathaniel Fick Trustee

Richard Kimball

Richard Lewis

S Caroline Kerr Trustee

Joseph Helble

Michael Wagner

Trustee

Trustee

Provost

VP & CFO

EVP

Richard Mills

Alice Ruth

Chief Executive Officer - Investment Office

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

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours		direct	or/tr	uste	ee)		organization (W-	organizations	from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations	
Duane Compton	40.0				x			720,690	0	38,428	
Dean, Geisel School of Medicine	0.0				^			720,090	0	36,420	
Elizabeth Smith	40.0				х			485,102	0	29,899	
Dean of Faculty	0.0										
Frank Roberts	39.9				x			209,077	0	28,626	
Associate VP, FOM	0.1								_	_==,,	
Joshua Keniston	39.8										

275,023 0 16,632 VP Campus Services & Institutional Projects (from 12/1/2019) 0.2 40.0 Matthew Slaughter 849.002 ol 38,127

Dean, Tuck School of Business	0.0					015,002		33,127
Robert Lasher	40.0			.,		004.276		20.472
Sr. Vice President for Advancement	0.0			x		804,376	0	30,473
Sandhya Iyer	40.0					FFF 200		42.044
				Х		555,290	0	42,911

Robert Lasher	40.0		.,		004.076		
Sr. Vice President for Advancement	0.0		Х		804,376	0	
Sandhya Iyer	40.0						
Concret Councel			Х		555,290	0	

42,911 General Counsel 0.0

Χ

Χ

714,134

837,041

0

0

0

30,993

33,930

35,049

39.8

Steven Moore 368,510

> 0.0 40.0

> > 0.0

0.2

......

VP Campus Services (through 11/30/2019)

and Independent Contractors

Chair and Professor of Psychology

Managing Director, Investment Office

Jessica Jones

Alan Green

40.0

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

organizations

0

455,574

382,645

40,675

39,011

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Former Interim Provost

Former Dean of Faculty

Michael Mastanduno

	ally flours	١ ،	unect	.01/11	ıusu	ee)		organization (w-	Organizations	nom the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustée	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Kelsey Morgan	39.8					x		1,220,990	0	38,187	
Chief Investment Officer	0.2					^		1,220,990		36,167	
Michael Sullivan	40.0										
Managing Director, Investment Office	0.0					Х		989,540	0	42,305	
				$\overline{}$	-						

Chief Investment Officer	0.2						
Michael Sullivan	40.0			v	000 540		43
Managing Director, Investment Office	0.0			X	989,540	0	42,
Steven Leach	40.0					_	
Director, Norris Cotton Cancer Center	0.0			Х	845,530	0	37,
	40.0						

				Χ	989,540	0	42,305
Managing Director, Investment Office	0.0				·		,
Steven Leach	40.0						
				Χ	845,530	0	37,365
Director, Norris Cotton Cancer Center	0.0						
- 6	40.0						

Steven Leach	40.0			V		845,530	0	27.265
Director, Norris Cotton Cancer Center	0.0			^		845,530	٥	37,365
Carolyn Dever	40.0				_	E00 E44	0	20.614

Director, Norris Cotton Cancer Center	0.0				,		,	
Carolyn Dever	40.0							
Former Provost				Х	598,564	0	30,	614

Χ

Carolyn Dever	40.0						
Former Provost	0.0			Х	598,564	0	
David Kotz	40.0						

......

0.0 40.0

0.0

efil	efile GRAPHIC print - DO NOT PROCESS					3493132003411		
SC		ULE A	- Dublic (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) c empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza artmouth Colle					Employer identific	ation number
iiuste	es or D	artificatif Colle					02-0222111	
	rt I		for Public Charity State				See instructions.	
1 1	rganiz		a private foundation because	•	-		(A)(:)	
		•	onvention of churches, or as					
2	✓		scribed in section 170(b)(,	, ,		
3		·	or a cooperative hospital serv	_			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated for the benefit (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
7		section 17	ation that normally receives a ' 0(b)(1)(A)(vi). (Complete	Part II.)			nit or from the genera	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9		non-land g	ural research organization de rant college of agriculture. So	ee instructions. Enter	the name, city, a	and state of the o	college or university:	,
10		An organization that normally receives: (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)						
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
е			box if the organization receiver Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	the number	of supported organizations				<u> </u>	
g			ing information about the su	· · · · · · · · · · · · · · · · · · ·	r '			
	(i) N	Name of supports of the second		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota			tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	

Page 2

	If the organization faile						quaiiiy u	muer Part III.
S	ection A. Public Support	a to quality unde	the tests listed	. selett, picase t	Jon piece i die II.	,		
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	389,222,461	351,100,124	404,610,910	402,986,869	55	2,826,074	2,100,746,438
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0	0
3	The value of services or facilities furnished by a governmental unit to	0	0	0	0		0	0
4	the organization without charge Total. Add lines 1 through 3	389,222,461	351,100,124	404,610,910	402,986,869	55:	2,826,074	2,100,746,438
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on							119,848,495
	line 1 that exceeds 2% of the amount shown on line 11, column (f).							
6	Public support. Subtract line 5 from line 4.							1,980,897,943
S	ection B. Total Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(f) Total
7	Amounts from line 4	389,222,461	351,100,124	404,610,910	402,986,869	55:	2,826,074	2,100,746,438
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	79,292,998	63,393,195	67,473,272	79,724,667		7,779,802	367,663,934
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	24,170,021	1,089,266		112,959	25,372,246
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	7,652,192	22,819,168	24,695,837	13,979,300	2	0,196,133	89,342,630
11	Total support. Add lines 7							2,583,125,248
12	through 10 Gross receipts from related activities,	etc. (see instruction	ons)			12		2,590,850,723
	First five years. If the Form 990 is f					ion 501	(c)(3) orga	· · · · · · · · · · · · · · · · · · ·
	check this box and stop here							
<u>_</u>	ection C. Computation of Publ	ic Support Perc	entage					
14	Public support percentage for 2019 (I			column (f))		14		76.69 %
	Public support percentage for 2018 S		•			15		79.82 %
	33 1/3% support test—2019. If th						heck this b	
	and stop here. The organization qua	lifies as a publicly	supported organiza	tion				. ▶ ☑
	b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
b	organization		rganization did not		ne 13, 16a, 16b, o this box and stor	 r 17a, a here.	 nd line	▶□
18	supported organization							▶□

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 business						
4	under section 513 Tax revenues levied for the						
•	organization'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						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

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

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

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

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

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

provide detail in Part VI.

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

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

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

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

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

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

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

	edule A (101111 550 01 550 E2) 2015			age 3			
Pa	rt IV Supporting Organizations (continued)						
_			Yes	No			
	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?						
		11a					
	A family member of a person described in (a) above?	11b					
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c					
S	ection B. Type I Supporting Organizations						
			Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1					
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-					
2	operated, supervised, or controlled the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting						
	organization.						
S	ection C. Type II Supporting Organizations						
_			Yes	No			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of						
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1					
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).						
S	ection D. All Type III Supporting Organizations		v				
_			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?						
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).						
_		2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax						
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3					
S	ection E. Type III Functionally-Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):					
	The organization satisfied the Activities Test. Complete line 2 below.						
	b						
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)				
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No			
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a					
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's						
	involvement.	2b					
3	Parent of Supported Organizations. Answer (a) and (b) below.						
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a					
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h					

3b

Schedule A (Form 990 or 990-EZ) 2019 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in Part VI). See instructions	nsive (provide		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations	(i)	(ii) Underdistributions	(iii) Distributable

8	Distributions to attentive supported organizations to wh details in $\bf Part\ VI)$. See instructions	sive (provide		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019:			

9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
i Carryover from 2014 not applied (see instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
<u></u> \$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to		

e From 2018.

d Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 39, 31, and 31 from 31.		
4 Distributions for 2019 from Section D, line 7:		
<u> \$</u>		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		

	See instructions.		
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7	Excess distributions carryover to 2020. Add lines 3j and 4c.		
8	Breakdown of line 7:		
а	Excess from 2015		
b	Excess from 2016		
С	Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

Schedule A (Form 990 or 990-EZ) 2019 Page 8
Part VI	Section A, lines 1, 2 Part IV, Section D,	formation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See
		Facts And Circumstances Test
990 Sched	lule A, Suppleme	ental Information
Ret	urn Reference	Explanation
Schedule A, Other Incon	Part II, Line 10 ne	Other income consists of income from split interest distributions, fundraising events and other miscellaneous income.

990 Schedule A, Supplemental Information						
Return Reference	Explanation					
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - OTHER INCOME, COLUMN A - 7652192.0, COLUMN B - 22819168.0, COLUMN C - 246958 37.0. COLUMN D - 13979300.0. COLUMN E - 20196133.0. COLUMN F - 89342630.0:					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

(Proxy Tax) (see separate instructions), then

If "Yes," describe in Part IV.

SCHEDULE C (Form 990 or 990-

EZ)

3

Political Campaign and Lobbying Activities

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

2019

DLN: 93493132003411

☐ Yes

☐ No

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. Moreover below. Attach to Form 990 or Form 990-EZ.

Moreover below. More

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** Trustees of Dartmouth College 02-0222111 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes □ No

Was a correction made?

Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

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

Did the filing organization file Form 1120-POL for this year?

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2 5

Schedule C. Part II-B. Line 1 DETAILED DESCRIPTION OF THE LOBBYING

those organizations.

ACTIVITY

Schedule C (Form 990 or 990-EZ) 2019 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Part II-B Form 5768 (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes | No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Nο Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Yes Media advertisements? Nο C Mailings to members, legislators, or the public? Yes Publications, or published or broadcast statements? Nο e Grants to other organizations for lobbying purposes? Yes 33,685 Direct contact with legislators, their staffs, government officials, or a legislative body? Yes 7,175 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Nο Other activities? Nο Total. Add lines 1c through 1i 40,860 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 2a Nο If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year Carryover from last year 2b h C Total 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 3 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information. Return Reference Explanation

Meetings were held with US congressional staff, and a letter was sent to delegation members regarding US

affecting Dartmouth College and a portion of dues paid to various organizations are allocated to lobbying by

immigration policy and practice changes. A local law firm is retained to monitor State legislative activity

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

(Form 990)

DLN: 93493132003411

OMB No. 1545-0047

Supplemental Financial Statements

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

Open to Public

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization **Employer identification number** Trustees of Dartmouth College 02-0222111 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 53 0 2 Aggregate value of contributions to (during year) 15,504,606 Aggregate value of grants from (during year) 24,538,664 Aggregate value at end of year 48,863,365 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ✓ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2019

 ${f c}$ Leasehold improvements

d Equipment

e Other .

	aule D	(Form 990) 2019											Page 2
Par	3111	Organizations Ma	aintaining Colle	ections c	of Art, H	istori	cal Tı	eası	ıres, oı	Othe	r Similar <i>A</i>	Assets (c	ontinued)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):								collection				
а	✓	Public exhibition				d	\checkmark	Loan	or excha	ange pr	ograms		
b	\checkmark	Scholarly research				е		Othe	r				
С	✓	Preservation for future	e generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.												
5		g the year, did the org s to be sold to raise fur										☐ Ye	s 🗹 No
Par	rt IV	Escrow and Cust Complete if the or X, line 21.			" on Forr	n 990	, Part	IV, li	ne 9, oi	repor	rted an amo		
1 a		e organization an agent ded on Form 990, Part I										☐ Ye	s 🗹 No
b	Ι Ε "∀ε	es," explain the arrange	ement in Part VIII :	and comple	ate the fol	lowing	tahla:		1			Amount	
c		ning balance				_			ŀ	1c		Amount	
d	-	ions during the year .							ŀ	1d			
е		butions during the year								1e			
f		g balance							1	1f			
2a		ne organization include								ccount	liability2	V vo	 s □ No
_													S LINO
b	rt V	s," explain the arrange		Cneck nere	e ir the ex	pianati	on nas	been	provided	ın Par	τχιιι	. 🖭	
- (I C V	Complete if the or		ered "Yes	" on Forr	n 990	, Part	IV, li	ne 10.				
			L	(a) Currer			rior yea			ears bac	ck (d) Three y	ears back	(e) Four years back
1 a	Beginn	ing of year balance .		5,731	,322,087	5,4	194,203	,052	4,95	6,494,1	67 4,47	4,403,649	4,663,491,080
b	Contrib	outions		107	,796,093	:	102,953	,449	18	3,367,8	84 7	7,116,273	119,094,796
С	Net inv	estment earnings, gair	ns, and losses	409	,069,726		386,849	,471	59	0,875,2	.48 63	0,383,527	-99,549,524
d	Grants	or scholarships	. [59	,929,335		55,221	.,722	5	1,914,2	.53 49	9,921,282	46,798,620
		expenditures for facilition	es	213	,078,743	:	197,462	2,163	18	34,619,9	94 17	5,488,000	161,834,083
f	Admini	strative expenses .	[0			0			0	0	0
g	End of	year balance	[5,975	,179,828	5,	731,322	,087	5,49	4,203,0	52 4,95	5,494,167	4,474,403,649
2	Provi	de the estimated perce	ntage of the currer	nt year end	l balance ((line 1g	g, colu	mn (a)) held a	s:			
а	Board	d designated or quasi-e	ndowment >	22.68 %									
b	Perm	anent endowment ►	27.05 %										
c	Temp	orarily restricted endo	wment ► 50.2	7 %									
	The p	ercentages on lines 2a	, 2b, and 2c should	d equal 100	0%.								
3a	orgar	nere endowment funds nization by:	·		organizati	on that	are h	eld an	d admini	stered	for the		Yes No
		nrelated organizations					•						(i) No
L.		elated organizations .				 	ه مانیام D	•					(ii) No
ь 4		s" on 3a(ii), are the re libe in Part XIII the inte											10
	rt VI	Land, Buildings,			113 CHGOW	THE I	unus.						
		Complete if the or			" on Forn	n <u>9</u> 90	, Part	IV, li	ne 11a.	See F	orm 990, P	art X, lin	e 10.
	Descri	ption of property	(a) Cost or othe (investmen	r basis	(b) Cost o						d depreciation	, '	d) Book value
	Land			0			20,95	52,445					20,952,445
		gs		0		1	,459,23				666,510,589		792,723,860

0

0

0

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

388,955,116

270,354,271

75,289,858

172,207,091

313,665,258

98,147,180

	Complete if the organization answered "Yes" on I		110.366 01111 330, 1	art A, mic 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
1) Financial	` ''			, car market value
2) Closely-l	neld equity interests			
3) Other <u> </u>	quity/Venture Capital Limited Partnership	1,960,734,092		F
B) Real Esta	te & Real Asset Limited Partnerships	742,359,926		F
C) Other Inv	vestments	471,257		F
D) Fixed Inc	ome Securities and Commingled Funds	86,554,627		F
E) Global Ec	uity Commingled Funds	1,920,531,488		F
F) Hedge Fu	nds	1,395,056,977		F
G) Derivativ H)	es	0		
	(b) must equal Form 990, Part X, col. (B) line 12.)	6,105,708,367		
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on I	Form 990, Part IV, line 1	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
1)				value
2)				
3)				
4)				
5)				
5)				
7)				
3)				
9)				
otal. (Columr	o (b) must equal Form 990, Part X, col.(B) line 13.)		•	
otal. (Columr	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
otal. (Column Part IX	Other Assets.		1d. See Form 990, Par	t X, line 15. (b) Book value
otal. (Column	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
Part IX 1)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
Part IX 1) 2)	Other Assets. Complete if the organization answered 'Yes' on F		Id. See Form 990, Pai	
Part IX 1) 2) 3)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
1) 2) 3) 4)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Pai	
1) 2) 4) 5) 6)	Other Assets. Complete if the organization answered 'Yes' on F		1d. See Form 990, Par	
1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description		1d. See Form 990, Par	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered 'Yes' on F	n		(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) otal. (Colum	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.	orm 990, Part IV, line 1		(b) Book value
potal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) otal. (Column Part X . 1) Federal i	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I	orm 990, Part IV, line 1		(b) Book value
Part IX 1) 2) 3) 4) 5) 6) Otal. (Columnation of the columnation	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liability on Interest Rate Swap Agreements	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174
part IX 1) 2) 3) 4) 5) 6) 7) etal. (Columnal of the columnal of the co	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I	orm 990, Part IV, line 1		(b) Book value
1) Federal i 2) Mark to N 3) Employee 4) Condition 5) Governm	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liabilities Benefit Liabilities	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174 306,275,223 22,982,049 12,816,697
1) Federal i 2) Mark to N 3) Employee 4) Condition 5) Governm 6) Other	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liabilities Benefit Liabilities All Asset Retirement Obligation	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174 306,275,223 22,982,049
1) Federal i 2) Mark to N 3) Employee 4) Condition 5) Governm 6) Other 7)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liabilities Benefit Liabilities All Asset Retirement Obligation	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174 306,275,223 22,982,049 12,816,697
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal i 2) Mark to N 3) Employee 4) Condition	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liabilities Benefit Liabilities All Asset Retirement Obligation	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174 306,275,223 22,982,049 12,816,697
1) Federal i 2) Mark to N 3) Employee 4) Condition 5) Governm 6) Other 7) 8)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes Market Liabilities Benefit Liabilities All Asset Retirement Obligation	orm 990, Part IV, line 1		(b) Book value 990, Part X, line 25. (b) Book value 275,052,174 306,275,223 22,982,049 12,816,697

Schedule D (Form 990) 2019

Page 4

1	Total revenue, gains, and other s	support per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on i	investments	2a			
b	Donated services and use of facil	ities	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.) .		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.) $oldsymbol{.}$		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4	${f c.}$ (This must equal Form 990, Part I, line 12.)			5	
Par		penses per Audited Financial Statem ization answered 'Yes' on Form 990, Par			Returi	n
1		dited financial statements			1	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25:				
а	Donated services and use of facil	ities	2a			
b	Prior year adjustments		2b			
c	Other losses		2c			
d	Other (Describe in Part XIII.) $oldsymbol{.}$		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.) .		4b		_	
C					4c	
5		4c. (This must equal Form 990, Part I, line 18	.) .		5	
	t XIII Supplemental Info					
		Part II, lines 3, 5, and 9; Part III, lines 1a and s 2d and 4b. Also complete this part to provide			t V, line	4; Part X, line 2; Part
	Return Reference		Ex	olanation		
See A	Additional Data Table					
		+				

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: 19010655 **Software Version:** 2019v5.0

EIN: 02-0222111

Name: Trustees of Dartmouth College

Supplemental Information

Return Reference

Explanation

Dartmouth believes it has taken no significant uncertain tax positions.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 1a Collections of art - financial statement footnote	Dartmouth's collections include works of art, literary works, historical treasures, and ar tifacts that are maintained in its museum and libraries. These collections are protected a nd preserved for public exhibition, education, research, and the furtherance of public ser vice. Each of the items is cataloged, preserved, and cared for, and activities verifying t heir existence and assessing their condition are performed continuously. The collections a re subject to a policy that requires proceeds from their sale to be used to acquire other items for collections. The collections, which were acquired through purchases and contributions since Dartmouth's inception, are not recognized as assets in the Consolidated Statem ent of Financial Position. Purchases of collection items are recorded in the Consolidated Statement of Activities as non-operating decreases in net assets without donor restriction in the year in which the items are acquired or in net assets with donor restrictions if the assets used to purchase the items are restricted by donors. Contributed collection items are not recorded in the consolidated financial statements.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 4 Collections of art - description of collections	Collections at Dartmouth College exist in two primary areas: the Hood Museum of Art (the Hood) and the Dartmouth College library system. The Hood Museum of Art at Dartmouth College is one of the oldest and largest college museums in the country. The collections of the Hood, which number some 65,000 objects, are rich, diverse, and available for the use by bot h Dartmouth and the broader community. Access to works of art is provided through permanen t collection displays, the online collections database, special exhibitions, the website, scholarly publications, and programs and events. These exhibits and programs are an exciting learning resource for students and the academic community. The Hood offers a vital curricular resource, a source for lectures, gallery talks, symposia, and receptions for the public, and an on-line database of thousands of works. The Dartmouth College Library is committed to partnering with faculty and students to enhance and showcase Dartmouth scholarly output and entrepreneurial endeavors. The Library provides immersive and transformative learning experiences, prepares students for a lifetime of learning and responsible leadership, and proactively supports undergraduate, graduate, and professional student academic success through innovative educational programs. The Library offers creative workspaces for individual and collaborative scholarly enquiry and aims to promote well-being as well as st imulate innovative thinking. The Rauner Special Collections Library houses Dartmouth's Archives, the Rare Books Collections, and the Manuscripts Collection. Dartmouth's Archives do cuments the history of the College through the historical records of the institution including the three professional schools, as well as the history of the surrounding area through a selected collections related to local businesses and organizations. Totaling more than 1 00,000 volumes, Dartmouth's rare book collections constitute a resource of major importance to the institution and the scholarly world at large. The

Supplemental Information

Supplemental Information	
Return Reference	Explanation
Schedule D, Part IV, Line 2b Explanation of escrow agreement	Certain donors have established irrevocable split-interest agreements with Dartmouth, prim arily charitable gift annuities, pooled life income funds, and irrevocable charitable rema inder trusts, whereby the donated assets are invested and a liability is recognized for di stributions to be made in accordance with the agreements. For all residential rental prope rties and some commercial rental properties, Dartmouth collects a security deposit which i t holds in escrow to be used, if necessary, to pay for damages identified when the propert y is vacated.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	Dartmouth's endowment plays a critical role in supporting the current and future work of D artmouth. Its investment and spending policies are designed to balance the needs of curren t Dartmouth students with the needs of future generations of Dartmouth students. Earning I ong-term returns that maintain the inflation-adjusted purchasing power of the endowment un derpins this concept of intergenerational equity. The endowment is composed of both restricted funds, for which donors designate a specific purpose for their gifts, and unrestricte d funds. There are over 6,000 separate funds that make up Dartmouth's endowment. Dartmouth 's endowment spending policy seeks to balance the competing objectives of supporting the c urrent generation of students and faculty with the need to preserve the endowment's purcha sing power for future generations. Distributions from the endowment, which are approved an nually by the Board of Trustees, are intended to support Dartmouth's mission by contributing funding to support financial aid and a variety of needs in academic, research and stude nt life activities.

_ _ _

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493132003411 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ 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. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** Trustees of Dartmouth College 02-0222111 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h Νo If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

chedule E (Form 990 or 990EZ) (2019)	Page 2
Part II Supplemental Information. Provide the exp any other additional information. See instructions.	lanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide
Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	Dartmouth's racially nondiscriminatory policy is widely publicized through a variety of print and electronic media. The notification language set forth in Section 403 of Rev. Proc. 75-50 is included in Dartmouth's brochures and other publications which are available to the general public.
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	Dartmouth College received federal and state funding in support of its instructional and research programs.
	Schedule E (Form 990 or 990-EZ) (2019)

SCHEDULE F	State	ement of	Activities	Outside the Un	ited States	OMB No. 1545-0047	
Form 990)	► Compl	2019					
epartment of the Treasury	•	Go to www.irs.	► Attach i gov/Form990 for i	nformation.	Open to Public Inspection		
ame of the organization					Employer ide	ntification number	
rustees of Dartmouth Colle	ege				02-0222111		
General Inf Form 990, P			Outside the l	Jnited States. Comple	ete if the organization	answered "Yes" on	
1 For grantmakers.	Does the or	ganization mai	ntain records to	substantiate the amoun	t of its grants and		
				stance, and the selectior	n criteria used		
to award the grants	or assistan	ce?				🗹 Yes 🗌 No	
For grantmakers. outside the United S		Part V the orga	anization's proce	edures for monitoring the	e use of its grants and o	ther assistance	
Activites per Region.	(The followin	ng Part I, line 3	table can be dupli	icated if additional space i	s needed.)		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	fundraising, program	(e) If activity listed in (d) is- program service, describe specific type of service(s) in the region	a (f) Total expenditures for and investments in the region	
See Add'l Data							
3a Sub-total	,	(10			1,947,978,004	
b Total from continuation							
Part I c Totals (add lines 3a a	nd 3b)	(_			55,447,615 2,003,425,619	
			1				

Schedule F (Form 99	0) 2019							Page 2
			nizations or Entitie ceived more than \$5,					on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Education	6,300	Wire Transfer			
			above that are recogr nsel has provided a se					1
3 Enter total nui	mber of other org	ganizations or entitie	s				•	0
							Schedule	F (Form 990) 2019

Part III can be du				(-) M	(6) A 6	(-) Description	(I-) Mathadas
Гуре 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
See Add'l Data							

Sche	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	✓ Yes	□No

Schedule F (Form	990) 2019 Page 5
Promamo amo met any	pplemental Information vide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; punts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting hod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide additional information. See instructions. F, Supplemental Information
Return Reference	Explanation
Schedule F, Part	Grants distributed by Dartmouth consist primarily of scholarships, fellowships and related support given to Dartmouth students. Scholarships are awarded based on the financial need of the student. Scholarship applications are reviewed by a financial aid officer. Financial aid officers are

Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	Grants distributed by Dartmouth consist primarily of scholarships, fellowships and related support given to Dartmouth students. Scholarships are awarded based on the financial need of the student. Scholarship applications are reviewed by a financial aid officer. Financial aid officers are expected to recuse themselves from any case in which they either have a personal interest or feel they cannot be impartial. A random sampling or cases read by each undergraduate financial aid officer is reviewed by the Associate and Senior Associate Directors to ensure compliance with federal regulations, adherence to Dartmouth policies, consistency in results and accuracy. Scholarships are credited to an individual student's account through the Banner Student Information System after the student is enrolled for the term (these credits are included in "non-cash assistance" in Part III above). Scholarship funds are withdrawn if the student ceases to be enrolled. Fellowships are granted in support of a student's educational or research endeavors. All educational and research work is monitored by Dartmouth faculty.

990 Schedule F, Supplemental Information

Return Reference

	·
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF	Grants distributed by Dartmouth consist primarily of scholarships, fellowships and related support given to Dartmouth students. Scholarships are awarded based on the financial need of the student. Scholarship applications are reviewed by a financial aid officer. Financial aid officers are expected to recuse themselves from any case in which they either have a personal interest or feel they cannot be impartial. A random
GRANT FUNDS	sampling of cases read by each undergraduate financial aid officer is reviewed by the Associate and Senior Associate Directors to ensure
	compliance with federal regulations, adherence to Dartmouth policies, consistency in results and accuracy. Scholarships are credited to an
	individual student's account through the Banner Student Information System after the student is enrolled for the term (these credits are
	included in "non-cash assistance" in Part III above). Scholarship funds are withdrawn if the student ceases to be enrolled. Fellowships are

Explanation

granted in support of a student's educational or research endeavors. All educational and research work is monitored by Dartmouth faculty.

Additional Data

Central America and the

Caribbean

Software ID: 19010655 **Software Version:** 2019v5.0 **EIN:** 02-0222111

--- T

Name: Trustees of Dartmouth College

1,876,021,779

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Darier	(la) Niverala au a f	(-) Ni	(a) A akirriki an ana adronka d	(-) T6+::+ :-+ : (-)	(f) T-+-					

(a) Region	offices in the region	employees or agents in region	in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
Antarctica	0	0	, ,	Education and educational	3,415

0 Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Central America and the 0 Program Services 123,174 Research Caribbean Central America and the 0 | Program Services Education and educational 119,572 Caribbean lconsultina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Central America and the 0 | Program Services Study abroad programs 184,899 Caribbean 84,144 East Asia and the Pacific 0 IInvestments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) East Asia and the Pacific 0 | Fundraising 275,367 East Asia and the Pacific 0 Program Services Research 839,622

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Fast Asia and the Pacific 0 | Program Services Education and Educational 1.043.493 Consulting 465,663 East Asia and the Pacific 0 Program Services Study Abroad Programs

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland and 0 Investments 58,267,522 Greenland) Europe (Including Iceland and 1 |Fundraising 1.362.975 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland and 0 Program Services 3.058.856 Research Greenland) Europe (Including Iceland and 0 Program Services Education and educational 2,571,233 Greenland) lconsultina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland and 9 Program Services Study abroad programs 3,552,357 Greenland) Europe (Including Iceland and 0 | Program Services lvolunteer services 3.933 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Middle East and North Africa 0 | Program Services 262,277 lResearch Middle East and North Africa 0 Program Services Education and educational 355,230 consultina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 160,097 0 Program Services Study abroad programs Middle East and North Africa 0 Fundraising 5,239

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) North America (Canada & 0 | Fundraising 158,412 Mexico only) North America (Canada & 0 | Program Services Research 999,062 Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) North America (Canada & 0 Program Services Education and educational 878,120 Mexico only) consulting North America (Canada & 0 Program Services Study abroad programs 1.675 Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) 0 | Program Services 15,440 North America (Canada & Volunteer services Mexico only) Russia and Neighboring States 143,409 0 Program Services lResearch

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Russia and Neighboring States 0 | Program Services Study abroad programs 82,675 Russia and Neighboring States 0 Program Services Education and educational 86,282 lconsultina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 | Fundraising 69,680 South America 0 Program Services Research 248,544

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South America 0 | Program Services Education and educational 352,038 consultina 389,441 South America 0 Program Services Study abroad programs

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 0 | Fundraising 23,716 South Asia 0 Program Services Research 107,433

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South Asia 0 | Program Services Education and educational 332,463 consultina South Asia 139,974 0 Program Services Study abroad programs

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Sub-Saharan Africa 49,302,329 0 lInvestments Sub-Saharan Africa 0 Fundraising 5,600

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa 0 | Program Services 441,056 lResearch Sub-Saharan Africa 0 Program Services Education and educational 536,315 lconsultina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) Sub-Saharan Africa 0 |Program Services 351,108 Study abroad programs

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (g) Description of (h) Method of (c)Number (d) Amount (e) Manner of (f) Amount of assistance of cash grant cash non-cash non-cash valuation (book, recipients disbursement assistance assistance FMV, appraisal, other) 82.510 Student Scholarships/Tuition 0 N/A lFM∨ Central Americal Remission scholarships land the Caribbean Scholarships/Tuition 31 0 N/A 501.727 Student IFMV East Asia and Remission scholarships lthe Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount (e) Manner of (f) Amount of (g) Description of (h) Method of assistance of cash grant cash non-cash non-cash valuation (book, recipients disbursement assistance assistance FMV, appraisal, other) Scholarships/Tuition 133 0 N/A 2,225,339 Student lfmv lEurope Remission scholarships (Includina Iceland and (Greenland Scholarships/Tuition 0 ln/a 120.015 Student lfmv Middle East and Remission scholarships North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of (f) Amount of (a) Description of (h) Method of assistance cash grant cash disbursement non-cash non-cash valuation (book, recipients assistance FMV, appraisal, assistance other) 225,028 |Student Scholarships/Tuition 0 ln/a fmv South America Remission scholarships Scholarships/Tuition 12 0 IN/A 197,523 |Student fmv South Asia scholarships remission

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) scholarship/tuition 0 ln/a 172,522 | Student lfmv Sub-Saharan scholarships remission Africa

SCHEDULE G

DLN: 93493132003411

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

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

	ne of the organization stees of Dartmouth College							Employer ider	ntification number			
us	stees of Dartmouth College							02-0222111				
Pa	Fundraising Activ	·	_			vered "Yes" on F	orm 990	, Part IV, line 1	7.			
	Indicate whether the organiz	ation raised funds th	rough any	of the fo	llowir	ng activities. Check	all that a	pply.				
а												
b	✓ Internet and email solicit	ations		f	✓	Solicitation of gov	ernment (grants				
c	✓ Phone solicitations			g	✓	Special fundraisin	g events					
d	✓ In-person solicitations											
2a	Did the organization have a workey employees listed in Fo							·	s □ No			
b	If "Yes," list the 10 highest p to be compensated at least \$			draisers)	pursu	ant to agreements	under wh	ich the fundraise	ris			
)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?) Gross receipts from activity	(or r	nount paid to etained by) aiser listed in col. (i)	(vi) Amount paid to (or retained by) organization			
		Bida atauta sia	Yes	No								
	Grenzebach Glier and Associates Inc 401 N Michigan Suite 2800	Provide strategic counsel to the advancement program		No		0		235,041	-235,04			
	Chicago, IL 60611											
ot	al			. •		0		235,041	-235,04			
	List all states in which the orgalicensing.	inization is registered	d or licens	ed to soli	cit co	ntributions or has b	een notifi	ied it is exempt fr	rom registration or			

	dule G (Form 990 or 990-EZ) 2019 rt III Fundraising Events. Comple	ete if the organization a	answered "Yes" on For	n 990. Part IV. line 18	Page 2
	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and			
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		Athletics - Hockey (event type)	(event type)	(total number)	col. (c))
Revenue					
	1 Gross receipts	31,318	0	0	31,318
	2 Less: Contributions	2,450	0	0	2,450
	3 Gross income (line 1 minus line 2)	28,868	0	0	28,868
	4 Cash prizes	0	0	0	0
တွ	5 Noncash prizes	2,598	0	0	2,598
euse	6 Rent/facility costs	6,867	0	0	6,867
X X	7 Food and beverages	3,305	0	0	3,305
Direct Expenses	8 Entertainment	0	0	0	0
	9 Other direct expenses	3,216	0	0	3,216
	10 Direct expense summary. Add lines 4 t	hrough 9 in column (d)			15,986
	11 Net income summary. Subtract line 10				12,882
Par	Gaming. Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Re	1 Gross revenue				
uses	2 Cash prizes				
A P P	3 Noncash prizes				
Direct Expense	4 Rent/facility costs				
	5 Other direct expenses				
		☐ Yes <u>%</u>	☐ Yes <u>%</u>	☐ Yes %	
	6 Volunteer labor	∐ No	∐ No	∐ No	
	7 Direct expense summary. Add lines 2 t	hrough 5 in column (d)			
	8 Net gaming income summary. Subtract	t line 7 from line 1, colum	n (d)		
9 a b	Enter the state(s) in which the organizati Is the organization licensed to conduct ga If "No," explain:	aming activities in each of	these states?		☐ Yes ☐ No
10a b	Were any of the organization's gaming lic	enses revoked, suspende	d or terminated during the		☐ Yes ☐ No

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ning activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ▶						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3		
		pt activities during the tax year					
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I (Form 990)

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

DLN: 93493132003411

Open to Public Inspection

nternal Revenue Service							
lame of the organization rustees of Dartmouth Co	llege					Employer identific	ation number
						02-0222111	
	nformation on Grants						
Does the organization the selection criteria	on maintain records to sub a used to award the grants	stantiate the amount of or assistance?	the grants or assistance,	the grantees' eligibility	for the grants or assistant	ce, and	☑ Yes ☐ No
_	the organization's procedu		-				
Part II Grants and that received	Other Assistance to Don I more than \$5,000. Part I	nestic Organizations a I can be duplicated if ad	and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes	" on Form 990, Part IV, line	21, for any recipient
(a) Name and addres organization or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
(2)							
(3)							
(4)							
[5)							
(6)							
7)							
(8)							
9)							
10)							
[11]							
[12]							
	of section $501(c)(3)$ and g of other organizations liste	-					47 1
	N						

Department of the

Treasury

(4) Health Insurance Subsidy

(5) Prizes and awards

(2) Fellowships

(3) Internships

(5)

(6)

(7)

Part IV

grant funds.

Return Reference

Schedule I. Part I. Line 2

Procedures for monitoring use of

Part III

Schedule I (Form 990) 2019

Part III can be duplicated if additional space is needed.

Explanation

12,226,184 1,515,285 198

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

student's educational or research endeavors. All educational and research work is monitored by Dartmouth faculty.

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

(c) Amount of

cash grant

538.920

499.387

(b) Number of

recipients

4139

1044

706

899

536

fmv 2,348,905 fmv 7,372 fmv

(d) Amount of

noncash assistance

171,609,076 fmv

90,867 fmv

Grants distributed by Dartmouth consist primarily of scholarships, fellowships and related support given to Dartmouth students. Scholarships are awarded based on the

financial need of the student. Scholarship applications are reviewed by a financial aid officer. Financial aid officers are expected to recuse themselves from any case in which they either have a personal interest or feel they cannot be impartial. A random sampling of cases read by each undergraduate financial aid officer is reviewed by

Ithe Associate and Senior Associate Directors to ensure compliance with federal regulations, adherence to Dartmouth policies, consistency in results and accuracy. Scholarships are credited to an individual student's account through the Banner Student Information system after the student has enrolled for the term (these credits are included in "non-cash assistance" in Part III above) Scholarship funds are withdrawn if the student ceases to be enrolled. Fellowships are granted in support of a

(e) Method of valuation (book.

FMV, appraisal, other)

Page 2

(f) Description of noncash assistance

Schedule I (Form 990) 2019

Student scholarships/tuition remission and employee

Subsidize health insurance costs for graduate

Achievement recognition awards to individual

tuition reimbursement

n/a

students

students

Student fellowships/employment

Additional Data

(a) Name and address of

organization

633 Third Avenue 20th Floor New York, NY 10017 Amherst College

155 South Pleasant Street 2nd

Amherst, MA 010025000

Floor

Software ID: 19010655 **Software Version:** 2019v5.0

EIN: 02-0222111

Name: Trustees of Dartmouth College

Form 990	Schedule I,	, Part I	I, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.	

or government			-	assistance	other)	
American Committee for the	13-1623886	501(c)(3)	25,000	0	n/a	n

501(c)(3)

Weizmann Institute of Science Inc

(b) EIN

04-2103542

(e) Amount of non-(c) IRC section (d) Amount of cash if applicable grant cash

(g) Description of (h) Purpose of grant or assistance

(f) Method of valuation (book, FMV, appraisal, non-cash assistance

Distribution from donor

advised fund

Distribution from donor

n/a 32,000 0 n/a n/a ladvised fund

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

PO Box 9123 JAF BLG New York, NY 100879123

Big Brothers Big Sisters Mountain Region 1229 S St Francis Dr Ste C Santa Fe, NM 87505	85-0276498	501(c)(3)	10,000	0	n/a	Distribution from donor advised fund
Cambridge in America Cambridge University Boat Club Foundation	52-6071299	501(c)(3)	10,000	0	n/a	Distribution from donor advised fund

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

Charities Aid Foundation of America 225 Reinekers Ln Ste 375 Alexandria, VA 22314	43-1634280	501(c)(3)	50,000	0	n/a	-	Distribution from donor advised fund
Child Advocates of SW Connecticut 55 Greens Farms Road Ste	27-2518861	501(c)(3)	10,000	0	n/a		Distribution from donor advised fund

200-6 Westport, CT 06880

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 84-1711691 501(c)(3) 10.000 Childrens Radio Foundation 0ln/a Distribution from donor ladvised fund

115 W 30th Street Suite 400 New York, NY 10001 Citizens Climate Education 26-2948811 501(c)(3) 13.100 Distribution from donor 0ln/a

advised fund Corp 1330 Orange Ave Suite 309

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Coronado, CA 92118

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Congregation Emanu-El of 13-6125497 501(c)(3) 12,000 0 n/a Distribution from donor n/a

150 Broadway Suite 2100 New York, NY 10038

Westchester 2125 Westchester Avenue East Rye, NY 10580						advised fund
Facing History and Ourselves Inc	04-2761636	501(c)(3)	100,000	0	n/a	Distribution from donor advised fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) First Presbyterian Church of 99-0108712 501(c)(3) 5.500 Distribution from donor 0ln/a Honolulu ladvised fund 45-550 Kionagle Road

0ln/a

Distribution from donor

advised fund

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Kaneohe, HI 96744
Fulton Theatre Company

Lancaster, PA 17608

1865

12 North Prince St PO Box

23-1631733

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

Greater Houston Community	23-7160400	501(c)(3)	15,000	0	n/a	n/a	Distributio
Foundation							advised fu
5120 Woodway Drive 6000							l .
Houston, TX 77056							ĺ

Greenwich, CT 06830

Greenwich Academy 06-0653118 501(c)(3) 62.000l 0ln/a n/a Distribution from donor 200 N Maple Avenue ladvised fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Greenwich Country Day School 06-0646657 501(c)(3) 95.000l O N/A IN/A Distribution from donor 401 Old Church Road ladvised fund

401 Old Church Road
Greenwich, CT 06830

Horizons at Norwalk
Community College Inc
PO Box 244

401 Old Church Road
advised fund

10,000

0 n/a
n/a
Distribution from donor advised fund

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Norwalk, CT 06853

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

39 Fast 78th Street Suite 501

New York, NY 10075

HSPVA Friends 4119 Montrose Ste 210 Houston, TX 77006	74-1997921	501(c)(3)	50,000	0	n/a		Distribution from donor advised fund
Kenner Family Research Fund	47-3163011	501(c)(3)	100,000	0	n/a	n/a	Distribution from donor

advised fund

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

1375 Fairfax Ave San Francisco, CA 94124

Legal Aid of North Carolina Inc 224 S Dawson St Raleigh, NC 27601	31-1784161	501(c)(3)	5,568	0	n/a	1 7	Distribution from donor advised fund
Meals on Wheels of San Francisco Inc	94-1741155	501(c)(3)	500,000	0	n/a	n/a	Distribution from donor advised fund

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

9400 W Higgins Rd Ste 215 Rosemont, IL 60018

New York Historical Society 170 Central Park West New York, NY 10024	13-1624124	501(c(3)	25,000	0	ln/a	1	Distribution from donor advised fund
Orthopaedic Research and	36-6009467	501(c)(3)	12,000	0	n/a		Distribution from donor

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

advised fund

Pennsylvania State University 408 Old Main University Park, PA 16802	24-6000376	501(c)(3)	50,000	0	n/a	n/a	Distribution from donor advised fund
Porter-Gaud Foundation	45-2701202	501(C)(3)	20,000	0	n/a	n/a	Distribution from donor

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

300 Albemarle Road

Charleston, SC 29407

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

231 West 39th street Suite

New York, NY 10018

1200

Regents of the University of Michigan 5082 Wolverine Tower 3003 South State Street Ann Arbor, MI 481091287	38-6006309	501(c)(3)	100,000	0	n/a	n/a	Distribution from donor advised fund
Roundabout Theatre Company	13-6192346	501(c)(3)	25,000	0	n/a	n/a	Distribution from donor

advised fund

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

0ln/a

n/a

Distribution from donor

	Saint Peter's Lutheran Church 619 Lexington Avenue new york, NY 10022	13-1656685	501(c)(3)	25,000	0	n/a		Distribution from donor advised fund
--	---	------------	-----------	--------	---	-----	--	--------------------------------------

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Southern Methodist University

3140 Dyer St MS261 Dallas, TX 75275 74-2021178

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

0ln/a

n/a

Distribution from donor

advised fund

Special Care Incorporated 12201 N Western Avenue Oklahoma City, OK 73114	73-1227079	509(a)(1)	63,522	0	n/a	Distribution from donor advised fund

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Storm King Art Center

New Windsor, NY 12553

1 Museum Road

14-1457573

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

The Board of Trustees of the Leland Stanford Junior University PO Box 20466 Stanford, CA 94309	94-1156365	501(c)(3)	80,000	0	n/a	n/a	Distribution from donor advised fund
The Corporation of the Brick	12-5562296	501(C)(3)	10,000	۸ ا	n/2	n/a	Distribution from donor

PO Box 20466
Stanford, CA 94309

The Corporation of the Brick
Presbyterian Church of NY
62 E 92nd St
new york, NY 10128

Distribution from donor advised fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-7056392 501(c)(3) 10.000 The Ecolint-American 0ln/a Distribution from donor

0ln/a

ladvised fund

Foundation ladvised fund 5824 Steeplechase Drive plano, TX 75093 The Open Door Shelter Inc 22-2536909 501(c)(3) 330.000 Distribution from donor

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4 Merritt Street

Norwalk, CT 06854

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government The Horace Mann School 13-1740455 501(C)(3) 15,000 0 n/a Distribution from donor n/a

231 W 246th St Bronx, NY 10471						advised fund
The Mclean Hospital Corporation	04-2697981	501(c)(3)	40,000	0	n/a	Distribution from donor advised fund

115 Mill Street belmont, MA 02478

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Squash and Education Alliance 20-4597358 501(c)(3) 11,000 Distribution from donor 0|n/a advised fund

555 8th Avenue Suite 1102 new york, NY 10018						advised fulfid
The Southern Poverty Law Center Inc	63-0598743	501(c)(3)	10,000	0	n/a	Distribution from donor

400 Washington Ave Montgomery, AL 36104

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

50 0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(6)(3)

The Winston Churchill

50 Valley Street Providence, RI 02909

Inc

04-6079351

Foundation of the United States 39 Evergreen Row Armonk, NY 10504	04-00/8331	301(0)(3)	30,000	U	II/a		advised fund
United Way of Rhode Island	05-0276059	501(C)(3)	11,250	0	n/a	n/a	Distribution from donor

Oln/a

ln/a

Distribution from donor

advised fund

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

501(c)(3)

06-1609222

Waterside School Inc.

Stamford, CT 06902

770 Pacific Street

Upper Valley Haven 713 Hartford Ave White River Junction, VT 05001	03-0277908	501(c)(3)	25,000	0	n/a		Distribution from donor advised fund
---	------------	-----------	--------	---	-----	--	--------------------------------------

0ln/a

400.000

n/a

Distribution from donor

ladvised fund

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

Advance Transit Inc	22-2558708	501(c)(3)	481,770	0	n/a	n/a	Charitable contribution
PO Box 1027 Wilder, VT 05088							

 Wilder, VT 05088
 26-0150662
 501(c)(3)
 10,000
 0 n/a
 n/a
 Charitable contribution

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Kingston, RI 02892

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 02-6006033 501(c)(3) 6.034 Charitable contribution Granite United Wav 0ln/a

1 Court St Ste 370 Lebanon, NH 03766

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Franconia, NH 03580

The Frost Place 26-4497702 501(c)(3) 6.000 O N/A Charitable contribution PO Box 74

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government . . 02 0225760 E04()(3) 40 440 contribution

297 Creek Road Middlebury, VT 05753	03-0335768	501(c)(3)	48,410	U	in/a	пуа	Charitable contribution
Vital Communities Inc	03-0355283	501(C)(3)	10,000	0	N/A	N/A	Charitable contribution

195 North Main St White River Jct, VT 05001

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49313	200 3	411	
Schedule J (Form 990)		Compensation Information					OMB No. 1545-0047		
		For certain Office							
		Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.)	
D			► Attach	to Form 990. instructions and the latest inform) Dpen i			
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.go</u>	101			Insp	ectio	n	
	ne of the organizates of Dartmouth C				Employer identifica	tion nu	ımber		
					02-0222111				
Pa	rt I Questi	ons Regarding Compensa	tion				l		
1 a				the following to or for a person listed			Yes	No	
		ection A, line 1a. Complete Part	. –	y relevant information regarding thes	e items.			i	
		s or charter travel	⊻	Housing allowance or residence for p					
	_	companions nification and gross-up payment	🗆	Payments for business use of persor Health or social club dues or initiation				İ	
		nincation and gross-up payment hary spending account	.s 🔽	Personal services (e.g., maid, chauff				İ	
	Discretion	iary spending account		reisonal services (e.g., illaid, chadh	lear, cher			İ	
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1b	Yes		
2				or allowing expenses incurred by all r, regarding the items checked on Lin	e 1 a 2	2	Yes		
	directors, truste	es, officers, including the CLO/I	-xecutive Directo	r, regarding the items checked on Lin	e 1a:			İ	
3				ed to establish the compensation of the not check any boxes for methods	e			İ	
				CEO/Executive Director, but explain in	n Part III.			İ	
	✓ Compensa	ation committee	✓	Written employment contract					
	_ '	ent compensation consultant	✓	Compensation survey or study					
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensat	tion committee				
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fil	ling organization or a				
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a		No	
b		r receive payment from, a suppl				4b	Yes		
c				nsation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Part	III.				
	Only 501(c)(3), 501(c)(4), and 501(c)(29)) organizations	must complete lines 5-9					
5			_	the organization pay or accrue any				İ	
	compensation c	ontingent on the revenues of:		- ' '				İ	
а	The organization	1?				5a	Yes		
b						5b		No	
	•	5a or 5b, describe in Part III.							
6		ed on Form 990, Part VII, Section ontingent on the net earnings of		the organization pay or accrue any					
а	=	1?				6a		No	
b	, ,		• • •			6b		No	
-	•	6a or 6b, describe in Part III.			Ī				
7				the organization provide any nonfixed rt III		7	Yes		
8				red pursuant to a contract that was					
				section 53.4958-4(a)(3)? If "Yes," de				NI -	
						8		No	
9				presumption procedure described in l		9		1	
For F	Panerwork Redu	ction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 5	0053T Schedule J		990)	2019	

Schedule J (Form 990) 2019

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	(D) Nontaxable benefits	columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								
	_							
	+							

Page 3

Schedule 1 (Form 990) 2019

Schedule J (Form 990) 2019

	·
Schedule J, Part I, Line 1a First-class	Dartmouth travel policy allows for first or business class air travel for business purposes in limited circumstances. Consistent with this policy, on infrequent
or charter travel	occasions senior officers flew first class with the President's approval. The lack of a major commercial airport within 80 miles of Dartmouth requires use of charter
	air travel to fulfill the business travel requirements of the President. For this reason, the President and certain senior officers had access for business purposes to
	charter flight service, the cost of which was fully defrayed by private donations designated for this purpose.
Schedule 1 Part I Line 1a Travel for	The President's wife traveled with him for husiness purposes including participating in alumni events and meetings with key constituent donors on Dartmouth's

behalf. companions Dartmouth provided housing for the President. This arrangement was for Dartmouth's convenience and a condition of employment and therefore was not taxable to Schedule J. Part I. Line 1a Housing allowance or residence for personal uselthe President. Dartmouth provided housekeeping services for cleaning and maintaining the President's house. The value of services provided for personal living space was Schedule J, Part I, Line 1a Personal

recognized as imputed income to the President. services Schedule J. Part I. Line 4b Dartmouth provided the President with a nonqualified 457(f) supplemental retirement plan. The Plan provided for annual credits to the plan subject to vesting Supplemental nonqualified retirement requirements based on continuation of employment through set dates. The President received \$210,000, and accrued \$150,000 relative to the Plan during the

calendar year 2019. \$160,000 of the deferred compensation received had been reported in prior years, as reflected in Column F. A portion of the incentive bonus for investment office employees is based on meeting certain return targets. A portion of the performance bonus for the Sr. VP of Advancement is based on achieving certain advancement goals.

plan Schedule J. Part I. Line 5a Compensation contingent on revenues of the organization Schedule J. Part I. Line 7 Non-fixed Alice Ruth, Chief Executive Officer - Investment Office, received a performance bonus of \$1,250,000 during calendar year 2019. Kelsey Morgan, Deputy Chief Investment Officer, received incentive compensation of \$698,756 during calendar year 2019. Michael Sullivan, Managing Director in the Investment Office, received payments incentive compensation of \$585,104 during calendar year 2019. Jessica Jones, Managing Director in the Investment Office, received incentive compensation of

\$489,088 during calendar year 2019. Robert Lasher, Senior Vice President for Advancement, received a performance bonus of \$119,200 during calendar year 2019. Sandhya Iyer, General Counsel, received a performance bonus of \$10,000 during calendar year 2019. Steven Moore, Interim VP Campus Services, received

Software ID: 19010655 **Software Version:** 2019v5.0

EIN: 02-0222111

Name: Trustees of Dartmouth College

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

	<u> </u>		rt II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							
(A) Name and Title		(B) Breakdown (i) Base Compensation	of W-2 and/or 1099-MIS	C compensation (iii)	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)		
			Bonus & incentive compensation	Other reportable compensation	compensation			reported as deferred on prior Form 990		
1Philip Hanlon	(i)	1,072,390	0	228,435	175,200	62,034	1,538,059	160,000		
President	(ii)	0			0					
1Richard Mills	(i)	710,739	0	0	25,200	12,442	748,381	0		
EVP	(ii)	0								
2 Joseph Helble	(i)	712,277	0	405	25,200	14,422	752,304	0		
Provost	(ii)	0								
3Michael Wagner	(i)	455,925	0	360	25,200	12,811	494,296	0		
VP & CFO	(ii)	0			0					
4 Alice Ruth	(i)	1,083,095	1,250,000	1,159	25,200	14,405	2,373,859	0		
Chief Executive Officer -	(ii)	0								
Investment Office 5 Elizabeth Smith	(i)	483,650	0	1,452	25,200	4,699	515,001	0		
Dean of Faculty	(ii)									
6 Duane Compton	(i)	720,365	0	325	25,200	13,228	759,118	0		
Dean, Geisel School of	(ii)			323			759,110			
Medicine 7Matthew Slaughter	(i)	849,002	0	0	25.220	12.027	0	0		
Dean, Tuck School of					25,200 	12,927	887,129			
Business	(ii)	0	0	0	0	0	0	0		
8 Sandhya Iyer	(i)	544,710 	10,000	580	25,200	17,711	598,201	0		
General Counsel	(ii)	0	0	0	0	0	0	a		
9Robert Lasher	(i)	685,176 	119,200	0	25,200	5,273	834,849	0		
Sr. Vice President for Advancement	(ii)	0	0	0	0	0	0	0		
10Steven Moore	(i)	324,923	16,042	27,545	25,200	5,793	399,503	a		
VP Campus Services (through 11/30/2019)	(ii)	0	0	0	0	0	0	o		
11Frank Roberts	(i)	209,077	0	0	18,365	10,261	237,703	0		
Associate VP, FOM	(ii)	0	0	0	0	0	0	0		
12Joshua Keniston	(i)	255,023	20,000	0	12,936	3,696	291,655	O		
VP Campus Services & Institutional Projects (from 12/1/2019)	(ii)	0	0	0	0	0	0	0		
13Kelsey Morgan	(i)	521,075	698,756	1,159	19,600	18,587	1,259,177	0		
Chief Investment Officer	(ii)	0	0	0	0	0	0	0		
14Alan Green	(i)	714,134	0	0	25,200	8,730	748,064	0		
Chair and Professor of Psychology	(ii)	0	0	0	0	0	0	0		
15Michael Sullivan	(i)	403,277	585,104	1,159	25,200	17,105	1,031,845	0		
Managing Director,	(ii)	0			n	n				
Investment Office 16 Steven Leach	(i)	845,530	0	0	25,200	12,165	882,895			
Director, Norris Cotton	(ii)	0								
Cancer Center 17Jessica Jones	(i)	346,794	489,088	1,159	25,200	9,849	872,090	0		
Managing Director,	(ii)	ο		1,139		5,049 	672,090			
Investment Office 18Michael Mastanduno	(i)	382,420	0	0	35 330	12.011	424.656	0		
Former Dean of Faculty		502,420		225	25,200 	13,811	421,656			
19Carolyn Dever	(ii) (i)	598,564	0	0	0	0	0	0		
Former Provost				0	25,200 	5,414	629,178			
	(ii)	0	0	0	0	0	0	0		

(A) Name and Title

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

(i) Base Compensation

(ii) Bonus & incentive

Other reportable

(C) Retirement and other deferred compensation

(D) Nontaxable benefits

(E) Total of columns

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(B)(i)-(D)

(C) Retirement and other deferred compensation

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B)(i)-(D)

(B

			compensation	compensation				prior Form 990
21David Kotz	(i)	454,614	0	960	25,200	15,475	496,249	0

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

Former Interim Provost

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

Supplemental Information on Tax-Exempt Bonds explanations, and any additional information in Part VI.

OMB No. 1545-0047

DLN: 93493132003411

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

▶ Attach to Form 990.

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

Trustees of Dartmouth College

Private Business Use

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** 02-0222111 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No New Hampshire Health & Educ 02-0279866 644614FP9 03-12-2003 113.250.000 Refund 6-1-93 issue Χ Χ Χ Facilities Authority New Hampshire Health & Educ 02-0279866 644614RV3 90,000,000 Issue cost, new construction, Χ Χ 04-05-2007 Facilities Authority capital renovations, equipment New Hampshire Health & Educ 02-0279866 000000000 08-06-2015 101,000,000 Refunded 04-01-02 series 2002 Χ Χ Χ Facilities Authority New Hampshire Health & Educ 02-0279866 000000000 08-06-2015 89,665,000 Refund 04-05-07 Series 07A issue Χ Facilities Authority Part II **Proceeds** C D 85,050,000 15,000,000 2 Total proceeds of issue . 3 1,125,000 93,437,682 101,000,000 89,665,000 4 5 3,437,682 6 0 1,125,000 471,429 0 8 0 9 0 10 89,528,571 11 101,000,000 89,665,000 0 13 2009 2005 2009 Yes Yes Yes No Yes No No No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ Χ Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Χ Χ Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Χ Χ

Part 🎹 Yes No Yes No No Yes Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Χ Are there any lease arrangements that may result in private business use of bond-financed Χ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50193E Schedule K (Form 990) 2019 counsel to review any research agreements relating to the financed property?

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

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

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

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . .

If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Private Business Use (Continued)

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

Exception to rebate?

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

Was the hedge superintegrated? Was the hedge terminated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

Part Ⅲ

b

d

6

Part IV

b

C

Arbitrage

Χ

0.52 %

0.52 %

Yes

Χ

Χ

Χ

Х

0 %

C

No

Χ

Х

Χ

Х

Page 2

Χ

0.63 %

0 %

0.63 %

0.19 %

Χ

No

Χ

Χ

Χ

X

0 %

Χ

Χ

Χ

Yes

Χ

Χ

Schedule K (Form 990) 2019

D

	-	-				_	_	
	Yes	No	Yes	No	Yes	No	Yes	No
Are there any management or service contracts that may result in private business use of bond-financed property?				×				Х
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								

Χ

Χ

No

Χ

0 %

В

Yes

Χ

Χ

Α

Νo

Χ

Χ

Χ

Х

Yes

Χ

Χ

В

No

Explanation

No

Χ

Χ

Yes

R

No

Yes

No

Yes

Χ

Yes

Yes

Χ

The difference between issue price and total proceeds equals (\$112,125,000) to refinance prior issue.

Page 3

No

D

D

Nο

Yes

Χ

Yes

Χ

Nο

03/12/2003

requirements of section 148? . . . Procedures To Undertake Corrective Action Part V Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions). Return Reference Schedule K, Part II, Line 3 Bond issued

Schedule K (Form 990) 2019

(GIC)?

period?

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Return Reference	Explanation
Schedule K, Part II, Line 3 Bond issued 04/05/2007	The difference between issue price and total proceeds equals \$3,437,682 of investment income.

Return Reference	Explanation
edule K, Part II, Line 3	The outstanding balance of the 2007A issue (\$89,665,000) was refunded by the 2015C (\$45,000,000) and 2016D
ds issued on 08/06/2015	(\$44.665,000) issues on August 6, 2015.

Sched

Return Reference	Explanation			
Schedule K, Part II, Line 3 Bond issued on 12/21/2017	The difference between issue price and total proceeds is the Original Issue Premium of \$9,631,168.			

Return Reference	Explanation
	Voluntary closing agreement request was filed on November 17, 2020 and is currently pending pursuant to the IRS- TEB's Voluntary Closing Agreement Program (VCAP) with respect to an "identified violation" described in Section
	7.2.3.4.3(2) of the Internal Revenue Manual.

Return Reference	Explanation
Schedule K, Part VI Bond issued on 04/26/2016	As reflected in the IRS Form 8038 that was filed in connection with the issuance of the Series 2016A bonds, 100% of the proceeds of the issue were deposited on the issue date of the Series 2016A bonds in an irrevocable escrow fund to advance refund certain tax-exempt obligations issued for the benefit of the College in 2009. As reflected in a Verification Report dated April 29, 2016, which was prepared by a third party in connection with the issuance of the Series 2016A bonds, the aggregate yield of the investments in such escrow fund is less than the yield on the Series 2016A bonds for the yield computation period during which amounts in the escrow fund will remain unspent. Accordingly, no rebate liability has arisen or will arise under Code Section 148(f) with respect to the Series 2016A bonds, and no rebate computation was required to be prepared in connection with the Series 2016A bonds.

Return Reference	Explanation
Schedule K, Part VI Bond issued on 12/21/2017	As reflected in the IRS Form 8038 that was filed in connection with the issuance of the Series 2017 bonds, after paying certain issuance costs, the remaining proceeds were deposited on the issue date in an irrevocable escrow fund to advance refund certain tax-exempt obligations issued for the benefit of the College in 2009. As reflected in a Verification Report dated December 21, 2017, which was prepared by a third party in connection with the issuance of the Series 2017 bonds, the aggregate yield of the investments in such escrow fund is less than the yield on the Series 2017 bonds for the yield computation period during which amounts in the escrow fund will remain unspent. Accordingly, no rebate liability has arisen or will arise for Series 2017 issue, and no rebate computation was required to be prepared in connect with the Series 2017 bonds.

Return Reference	Explanation
	Issuer name: New Hampshire Health & Educ Facilities Authority The calculation for computing no rebate due was performed on 04/29/2016

Return Reference	Explanation
	Issuer name: New Hampshire Health & Educ Facilities Authority The calculation for computing no rebate due was performed on 12/21/2017

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

OMB No. 1545-0047

Open to Public

Schedule K (Form 990) 2019

DLN: 93493132003411

Inspection

Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Trustees of Dartmouth College

Department of the Treasury

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

02-0222111

Employer identification number

Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No 02-0279866 165,000,000 Partially defeased 06-18-09 09A Х Χ New Hampshire Health & Educ 000000000 04-29-2016 Facilities Authority issue Χ Χ New Hampshire Health & Educ 02-0279866 000000000 12-21-2017 37,660,000 Partially defeased 06-18-09 09A Χ Facilities Authority Part ${f II}$ **Proceeds** Α В C D Amount of bonds retired . 2 165,000,000 47,291,168

explanations, and any additional information in Part VI. ▶ Attach to Form 990.

								1	
4	Gross proceeds in reserve funds		0		0				
5	Capitalized interest from proceeds		0		0				
6	Proceeds in refunding escrows		165,000,000		46,939,540				
7	Issuance costs from proceeds		0		351,628				
8	Credit enhancement from proceeds		0	0					
9	Working capital expenditures from proceeds		0		0				
10	Capital expenditures from proceeds		0		0				
11	Other spent proceeds		0		0				
12	Other unspent proceeds	0 0							
13	Year of substantial completion	2	2012 2012		012				
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		x				
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	Х		Х					
16	Has the final allocation of proceeds been made?	Х		Х					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х		Х					
Pai	t Ⅲ Private Business Use		•						
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		х				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				

Cat. No. 50193E

Schedule K (Form 990) 2019

d

6

8a

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2019

No

Yes

Χ

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

0 %

0 %

0 %

C

No

Χ

Х

Yes

0 %

0 %

0 %

В

Yes

Χ

Χ

Χ

Χ

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

Α

No

Χ

Χ

Х

Yes

Χ

Χ

Χ

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

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

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

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

Exception to rebate?

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

Term of hedge Was the hedge superintegrated? Was the hedge terminated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

Term of GIC

requirements of section 148? . . .

Yes	No	Yes	No	Yes
	Х		Х	

Χ

В

No

Page 3

No

D

D

Nο

Yes

Yes

Nο

Yes No Yes No Yes Has the organization established written procedures to ensure that violations of federal tax

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

requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

efile GRAPHIC	print - DO N	OT PROCES	S As	Filed Data -					DL	.N: 93	4931	3200	3411
Schedule L		Tran	sactio	ons with li	ntereste	d Persor	าร			01	MB No.	1545	-0047
(Form 990 or 990-	·EZ) ► Comple	ete if the orga	anization	answered "Yes	s" on Form 9	90, Part IV, li	ines 2	5a, 2	25b, 26	5,	20	11	Ω
			► Atta	28c, or Form 99 ach to Form 99	0 or Form 99	0-EZ.							
Department of the Trea Internal Revenue Service	,	Go to <u>www.ii</u>	rs.gov/Fo	o <u>rm990</u> for inst	ructions and	the latest in	forma	tion.		9	Open t Insp		
Name of the orga	nization						Er	nplo	yer ide	entifica	ation n		
Trustees of Dartmou	uth College						0.7	2-022	2111				
Part I Exces	s Benefit Tra	nsactions (section 50	1(c)(3), section !	501(c)(4), and	d section 501(c				ns only).		
	ete if the organiz												
1 (a)	Name of disqua	lified person	(b	Relationship be	etween disqua organization	lified person ar	nd		escript ansacti				ected?
											1	-5	NO
							-						
							+					<u> </u>	
2 Enter the an	nount of tax incu	rred by the ord	ganization	managers or dis	qualified pers	ons during the	year u	ınder	section	n			
4958.	ount of tax, if ar									\$			
5 Enter the an	iounit of tax, if an	iy, on line 2, a	above, reii	induised by the c	organization .		•	•		\$			
Com repo	ins to and/or aplete if the organ orted an amount of the contraction o	nization answe on Form 990, I	ered "Yes" Part X, line	on Form 990-EZ e 5, 6, or 22	, Part V, line 3	38a, or Form 99	90, Pa	rt IV,	line 26	; or if	the org	anizat	tion
(a) Name of interested person		Relationship (c) Purpose organization of loan) Loan to or from the organization? (e) Original principal amount				default? Appr				(i) Written agreement?	
									comm	nittee?	<u> </u>		
			То	From			Yes	No	Yes	No	Yes		No
 Total .					<u> </u> ▶ \$								
	nts or Assista	nce Benefit	ina Inte										
	plete if the org	anization an	swered "	Yes" on Form 9	990, Part IV,	, line 27.							
(a) Name of interested person (b) Relationship betw interested person and organization		n and the	een (c) Amount of assistance (d) Type of		of assi	assistance (e) Purpose of assistan				stance			
		3											
				+					-+				
For Paperwork Red	uction Act Notice	see the Instru	ctions for I			at. No. 50056A		C-1		/5	990 or		>

(a) Name of interested person	between interested person and the organization	transaction	(d) Description of transaction	of organization's revenues?		
				Yes	No	
(1) Paul Young	Spouse of Former Officer		Calendar 2019 employee compensation		No	

Part V

Explanation

Schedule I. (Form 990 or 990-F7) 2019

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

Return Reference

Supplemental Information

DLN: 93493132003411 SCHEDULE M OMB No. 1545-0047 Noncash Contributions (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Trustees of Dartmouth College 02-0222111 Part I Types of Property (a) (b) (c) (d) Number of contributions or Check if Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 35 Other - Valued at \$1 per Art—Works of art . . allocation/donor credit 2 Art—Historical treasures Art—Fractional interests Х 2 Other 4 Books and publications 5 Clothing and household aoods Cars and other vehicles . **7** Boats and planes . . . 8 Intellectual property . . Securities—Publicly traded . Χ 767 53,898,366 Market value 10 Securities—Closely held stock . Χ 3,672 Market value 11 Securities—Partnership, LLC, Χ 1 171,511,000 Opinions of experts or trust interests . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential 1 Other - Valued at \$1 per allocation/donor credit 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles 19 Food inventory . 1 Other - Valued at \$1 per allocation/donor credit 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . Self-created 2 2 Other - Valued at \$1 per Χ items/archival allocation/donor credit Other ▶ (records Horses and Χ 3 4 Other - Valued at \$1 per equestrian allocation/donor credit 26 Other ► (equipment Specialized 1 Other - Valued at \$1 per equipment/musical allocation/donor credit Other ▶ (instruments Other ▶ (_____ Number of Forms 8283 received by the organization during the tax year for contributions 29 14 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 Yes 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes contributions? **b** If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2019)

Schedule M (Form 990) (2019)	Page 2
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
Schedule M, Part I, Line 33	Pursuant to accounting standards codification 958 (ASC 958), Dartmouth Does not capitalize its collections, including works of art, literary works, historical treasures and artifacts that are maintained in its museums and libraries. Non-cash contributions of this nature are, therefore, not recognized as revenue for financial statement purposes, except for a nominal value of \$1 each. These collections are protected and preserved for public exhibition, education, research and the furtherance of public service. Other non-cash contributions with no readily ascertainable fair value or which are deemed immaterial are not recognized as revenue for financial statement purposes, except for a nominal value of \$1 each.
Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions	Dartmouth occasionally uses third parties, including auction houses, to sell specialized items such as jewelry and art.
Schedule M, Part I Explanations of reporting method for number of contributions	Art - Works of art - Number of contributions Books and publications - Number of contributions Securities - Publicly traded - Number of contributions Securities - Closely held stock - Number of contributions Securities - Partnership, LLC, or trust interests - Number of contributions Real estate - Residential - Number of contributions Other - Self-created items/archival records Number of contributions Other - Horses and equestrian equipment Number of contributions Other - Specialized equipment/musical instruments Number of contributions Food inventory - Number of contributions
	Schedule M (Form 990) (2019)

efile GRAPH	[C prin	t - DO NOT PROCESS	As Filed Data -		DLN:	: 93493132003411
SCHEDUL (Form 990 or EZ)	990-	Supplemen Complete to pro Form 990 Go to	ions on n.	OMB No. 1545-0047 2019 Open to Public Inspection		
Name l Bethe of g Trustees of Dartmo					Employer ident	ification number
					02-0222111	
990 Scheaule	o, Su	pplemental Information	on			
Return Reference				Explanation		
Form 990, Part IV, Line 28c Business transactions with interested persons	with firm mbers, nterest. r 7:19-a tments, ay be n ting (1) of the ir r investible h's investitution formatic of Trust Trustee st be re t Commby a two of the p e relate h the Si he invesport to ting a co	ns in which related parties (as well as other categories Under the New Hampshire and Dartmouth's Policy or such investments are subjected, the Investment Office that the transaction is fair an anvestment are no less favoraments not involving related astment would not comprise all investors who have components to the proposed investment committee as Investment Committee as Investment Committee as Investment Committee as Investment Gommittee mel cused from the discussion and the Investment Committee approves, and the Investment Gommittee approves and the Investment in the discussion and the Audit Committee Contains the Audit Committee Contains the Audit Committee Contains the Audit Committee Contains the Audit Committee Contains and the Audit Committee Contains and Committee Contains the Audit Committee Contains and Committee Contains the Audit Committee Contains and Committee Contains the Audit Committee Contains and Committee Contains the Audit Committee Contains the Commit	e.g., Trustees or non-Tof officers and Dartmo Pecuniary Benefit Law Pecuniary Benefit Tract to substantial overs must submit to the Board reasonable to Dartmouth than parties. The analysis namore than 10% of the mitted to participate in a sconsidered by the I and the full Board. In earn beard members. In account of \$5,000 or and the amount of \$5,000 or and the amount of the earn published in the nual basis, the Chief Ir ing information about the of such investments.	apply to Dartmouth investments frustee Investment Committee muth employees) have a financial of (Revised Statutes Annotated, Committee and Party Invight. Before such an investment and of Trustees an analysis documouth; and (2) that the terms the terms of other recent similar dust also document that Dartmouth, and must identify any other the same fund. Based on this in investment Committee of the Board in the investment of the investment of the Board each give their apprordance with State law, a notice more - identifying Dartmouth, the investment - is then filed with a local daily newspaper, before the total party investments, including with the performance of other investments.	e i Chapte res m men ut in ard - nt mu Audi oval	

Return

Reference		
Form 990, Part VI, Line 11b Review of form 990 by governing body	The 990 review process is as follows: A draft of the completed Form 990 is sent to the Aud it and Oversight Committee and a draft of the sections concerning compensation is sent to the Governance Committee. The Governance Committee may contact management or the Audit and Oversight Committee with any questions or concerns on the compensation sections. The Audit and Oversight Committee then meets with senior management personnel to review the proces s by which the Form 990 was prepared, discuss any items of significance, and resolve any q uestions. The Audit and Oversight Committee then votes to accept the Form 990 based on man agement's representations. Prior to the return being filed, a draft of the complete Form 990 is provided to the full board. At the next meeting of the Board of Trustees, the Audit and Oversight Committee reports to the full Board on the results of its review.	
	U	

Explanation

Return Reference	Explanation	
Form 990, Part VI, Line 12c Conflict of interest policy	Compliance with Dartmouth's institution-wide Conflict of Interest policy is required by co llege policy. Compliance is monitored by the Office of General Counsel, which reviews info rmation concerning potential conflicts solicited from approximately 370 trustees, faculty, and staff members each year. Compliance with the requirements of the policy concerning re searchers engaged in externally sponsored research is enforced and monitored by the Office of the Provost, and particularly by the Office of Sponsored Projects and the Conflict of Interest Committee of the Council on Sponsored Activities which, in accordance with federa I regulations, solicit information from researchers concerning financial interest that may affect or be affected by proposed research. In addition, the Office of the General Counse I and the Investment Office monitor compliance with the policy on Pecuniary Benefit Transa ctions and related party investments.	

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The process for determining the compensation of Dartmouth's President and other officers a nd key employees is as follows: (1) Comparability data are gathered by the Chief Human Res ources Officer from a compensation survey conducted by a nationally known compensation con sulting firm and shared with officials responsible for setting the compensation for the of ficers and key employees. (2) Recommendations for compensation adjustments for officers and key employees are prepared by the officials responsible for setting the compensation of said employees, using comparability data and a review of the employee's performance. (3) The officials' recommendations are presented for approval to the Governance Committee of the Board, together with the comparability data. (4) Comparability data for the President's compensation is also presented to the Governance Committee by the Chief Human Resources Officer. The Board of Trustees Executive Committee approves the President's compensation. The President and the Investment Committee jointly approve the Chief Executive Officer - Investment Office's compensation.

Evalenation

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The process for determining the compensation for Dartmouth's other officers and key employees is described above.

Return

available to the public

Reference	Explanation
Form 990, Part VI, Line	Dartmouth makes its governing document (The Charter of Dartmouth College), conflict of int erest policies and financial statements available to the public by posting these documents
19 Required documents	on its website.

Explanation

D -4.....

Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Net change in split interest agreement4485996; Net unrealized change in value of non-investment items77829707;

Funlamation

efile GRAPHIC print - Do	NOT PROCESS	As Filed Data -										DLN: 93493:	132003	3411
SCHEDULE R (Form 990) Department of the Treasury	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.								OMB No. 1545-0047 2019 Open to Public					
Internal Revenue Service													ction	
Name of the organization Trustees of Dartmouth College										oloyer identif	icatior	n number		
Part I Identification	of Discognided E	ntities. Complete if	the erga	aization and	vorad "Va	o" on Forn	000 Part	· T\/ line 3	•	222111				
Part Identification	l oi bisi egai ded E	indices. Complete ii	the organ	IIZation ansv	vereu ie:	5 011 F0111	1 990, Part	. iv, iiie s						
Name, address, and	(a) EIN (if applicable) of dism	egarded entity			(b) Primary activity		(c) Legal domicile (state or foreign country)		ome End-of-year asset				(f) controlling entity	
Part II Identification	of Belated Tay-Ev	emnt Organization	s Compl	ete if the ord	nanization	answered	l "Ves" on l	Form 990	Part 1	V line 34 he	Cause	a it had one or	more	
related tax-exer	npt organizations di		is: compi		garnzacion	diisweree	. 103 011		, , , , , ,	.v, iiic 5 i b		. It flud one of		
See Additional Data Table Name, address, an	(a) d EIN of related organizati	ion	Prim	(b) Primary activity		(c) (d) micile (state in country)			(e) Public charity status (if section 501(c)(3))		Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?
													Yes	No
For Paperwork Peduction A	t Notice see the Tue	structions for Form C	00			t No 5013	L DEV				- Sch	edule P (Form	000) 30	110

· , ,											
Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.											
(a) Name, address, and EIN of related organization	(b) Primary	(c) Legal	(d) Direct	(e) Predominant	(f) Share of		(h) Disproprtionate				

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Dispropi allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k) Percentage ownership
				3117			Yes	No		Yes	No	
Part IV Identification of Related Organizations Taxable as a Co	rporation	or Trus	t. Complete	if the organi	zation ansv	vered "Ye	s" on F	orm 9	990, Part IV	, line	34	
because it had one or more related organizations treated as												

Part IV Identification of Related Or because it had one or more re	rganizations Taxable as a Cor elated organizations treated as a	poration or Trust. Com corporation or trust durin	plete if the org ng the tax year	anization an:	swered "Yes"	on Form 99	0, Part IV, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-or year assets	(h) f- Percentage ownership	Section (b) cont	i) on 512 (13) rolled city?
(1)Charitable Remainder Unitrusts (93)	Fundraising/Development	NH	Trustees of Dartmouth College	Trust					No
(2)Pooled Income Funds (3)	Fundraising/Development	NH	Trustees of Dartmouth College	Trust					No
			I	1		Sc	hedule R (Form	990) 2	019

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.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	<u> </u>
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No

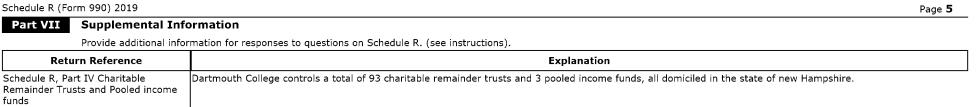
m	m Performance of services or membership or fundraising solicitations by related organization(s)						
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						
0	Sharing of paid employees with related organization(s)	10		No			
p	Reimbursement paid to related organization(s) for expenses	1 p		No			
q	Reimbursement paid by related organization(s) for expenses	1 q		No			
r	Other transfer of cash or property to related organization(s)	1r	Yes				
s	Other transfer of cash or property from related organization(s)	1 s	Yes				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.						
See ,	Additional Data Table						

(a) Name of related organization (b) Transaction type (a-s) (d) Method of determining amount involved (c) Amount involved

Page **3**

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

Part VI 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) (c) (d) (e) Are all partners (f) (g) (h) (i) Code V-UBI (j) **(k)** Percentage Primary activity Legal Predominant Share of Share of Disproprtionate General or allocations? ownership domicile income section total end-of-year amount in box managing (state or (related, 501(c)(3) income assets partner? unrelated, organizations? of Schedule foreign excluded from country) K-1 (Form 1065) tax under sections 512-514) Yes No Yes No Yes No



02-0486238

30 Main Street Suite 330

Burlington, VT 05401 20-8530788

3 Stoneview Lane Sharon, MA 02067 04-6045227

7 Lebanon Street Suite 302 Hanover, NH 03755

One Medical Center Drive Lebanon, NH 03756 22-2715483 **Software ID:** 19010655 **Software Version:** 2019v5.0

EIN: 02-0222111

Insurance

Educational Loans

Fundraising

Health Care

Administration

Name: Trustees of Dartmouth College

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Torin 550, Schedule R, Fare 12 Identification of Related			1	1	1	1 .	_
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio (b)(contr enti	n 512 (13)
						Yes	No
7 Lebanon Street Suite 302 Hanover, NH 03755 02-0362923	Educational Loans	NH	501(c)(3)	Type I	Trustees of Dartmouth College	Yes	
7 Lebanon Street Suite 302 Hanover, NH 03755 02-0518373	Real Estate Holding	NH	501(c)(25)		Trustees of Dartmouth College	Yes	
7 Lebanon Street Suite 302 Hanover, NH 03755 02-0514301	Real Estate Holding	NH	501(c)(25)		Trustees of Dartmouth College	Yes	
7 Lebanon Street Suite 302 Hanover, NH 03755	Real Estate Holding	NH	501(c)(2)		Trustees of Dartmouth College	Yes	

501(c)(3)

501(c)(3)

501(c)(3)

Type I

Type III-FI

Type I

VT

MA

UK

NH

Dartmouth-Hitchcock

Clinic

NΑ

NΑ

NA

No

No

No

Yes

(b) (c) Name of related organization Transaction Amount Involved (d) type(a-s) Method of determining amount involved Dartmouth Educational Loan Corporation 2,102,100 Cost Α Cost Dartmouth Educational Loan Corporation 183,916 Dartmouth Educational Loan Corporation R 3,120,731 Cost Foundation for Jewish Life at Dartmouth 67,928 Cost Foundation for Jewish Life at Dartmouth R 194,157 Cost Foundation for Jewish Life at Dartmouth S 130,432 cost Seven Lebanon Street Inc. В 374,840 Cost Seven Lebanon Street Inc. Κ 1,470,660 Cost Seven Lebanon Street Inc 119,736 Cost Seven Lebanon Street Inc Cost S 674,840 South Street Downtown Holdings Inc Κ 154,159 Cost South Street Downtown Holdings Inc 275,875 Cost South Street Downtown Holdings Inc S 800,000 Cost Charitable Remainder Trusts S 1,070,427 Cost

С

1,046,936

Cost

Form 990, Schedule R, Part V - Transactions With Related Organizations

Dartmouth Trust