Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 18

Department of the Treasury Internal Revenue Service

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

Open to Public

Inspection

Α	For the	e 2018 calendar year, or tax year beginning Ju	L 1, 2018 and	ending	JUN 30, 2019		
В	Check if applicabl	C Name of organization President and Fellows of Middlebu	ry		D Employer ide	ntifi	cation number
	Addre chang	ss College					
F	Name chang				03-	017	9298
F	Initial	(221 () 111	ivered to street address)	Room/su	ite E Telephone nur	mbe	r
F	Final	Controller's Office		102			3-5547
_	—return. termin ated	·	ZIP or foreign postal code		G Gross receipts \$		514,093,404.
	Amen	ded widdlebury ym 05753	ccg. , p = = = = = =		H(a) Is this a grou	up re	eturn
\vdash	Applic		e L. Patton	$\overline{\Box}$	for subordin		
	pendi		5753		H(b) Are all subordina	ates II	ncluded? Yes No
$\overline{\mathbf{T}}$	Tax-ex			ol DIS	27 If "No," attac	ch a	list (see instructions)
		te: www.middlebury.edu			H(c) Group exem	ptio	n number
ĸ	orm of	organization: x Corporation Trust As	sociation Other	L Ye	ar of formation: 1800	٨	A State of legal domicile: VT
	art I	Summary					
_	1	Briefly describe the organization's mission or most	significant activities We are	a glob	al liberal arts		
Activities & Governance					/ `F~!\		
Ë	2	college offering undergraduate, graduate. Check this box if the organization discorplination of voting members of the governing body.	ntinued its operations or dispo	sed of the	oreithan 25% of its ne	et as	ssets
Š	3	Number of voting members of the governing body	(Part VI, line 1a)	A+211	- OL AKEA	á	
Ö	4	Number of voting members of the governing body Number of independent voting members of the government.	verning body (Part VI, line 1b)	1.07	19 2000	4	33
es	5	Total number of individuals employed in calendar y	ear 2018 (Part V. line 2a)		_	5	5498
ŧ	6	Total number of volunteers (estimate if necessary)	IN	T. REV	SERVICE	6	2356
Ę	7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12 BU	JRI INIC	SERVICE STON, VT	7a	1,640,476.
_	b	Net unrelated business taxable income from Form	990-T, line 38		JON, VT	7b	0.
	ŀ			L	Prior Year		Current Year
9	8	Contributions and grants (Part VIII, line 1h)		L	58,563,9		53,857,591.
enc	9	Program service revenue (Part VIII, line 2g)		L	243,236,6		251,877,888.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)	_	93,327,0	21.	85,728,122.
ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)	L	64,0	_	66,803.
	•—	Total revenue - add lines 8 through 11 (must equal			395,191,7	_	391,530,404.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		70,581,5	-	75,733,715.
	14	Benefits paid to or for members (Part IX, column (A	s), line 4)	L		0.	0.
es	15	Salaries, other compensation, employee benefits (F	Part IX, column (A), lines 5-10)	·	163,506,3		179,413,204.
Expenses		Professional fundraising fees (Part IX, column (A), li		 		0.	0.
X		Total fundraising expenses (Part IX, column (D), line		,740.	100 101 0	0.0	122 006 073
ш	1	Other expenses (Part IX, column (A), lines 11a-11d,		-	122,404,2	_	122,986,873.
	1	Total expenses Add lines 13-17 (must equal Part I)			356,492,1	_	378,133,792.
		Revenue less expenses Subtract line 18 from line	12		38,699,6	_	13,396,612.
sets or	١				1,617,085,3		End of Year 1,630,218,997.
SSE	20	Total assets (Part X, line 16)			392,465,2		393,131,711.
Net Ass	21	Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from	lma 20		1,224,620,1	_	1,237,087,286.
	<u> 22</u> art II	Signature Block	line 20		2,001,020,2		2,200,000,2001
		lities of perjury, I declare that I have examined this return,	including accompanying schedule	es and state	ements, and to the best	of m	v knowledge and belief, it is
		ct, and complete. Declaration of preparer (other than office				• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , ,
	, 001100	Van I Provos	7/10 54554 511 411 111 111 111 111				
Sig	n	Signature of officer			Date	``	
Hei		David J. Provost Exec VP Finance	& Treas.		711	01	2020
110	•	Type or print name and title	-				
		Print/Type preparer's name	Preparer's signature		Date Check	k [PTIN
Pai	d	Shyamalee A. Joseph			7/10/2020 self-e	mplov	ed P01085371
	parer	Firm's name KPMG LLP			Firm's EIN		13-5565207
	Only	Firm's address Two Financial Center 60	S.Street	-			
	•	Boston, MA 02111			Phone no.	617	-988-1000
Ma	v the II	RS discuss this return with the preparer shown abo	ve? (see instructions)				X Yes No
	01 12-3			ions.			Form 990 (2018)

Forn	1990 (2018) College	03-0179298 Pag	<u>e 2</u>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u>x </u>
1	Briefly describe the organization's mission		
	Through a commitment to immersive learning, we prepare students to		
	lead engaged, consequential, and creative lives, contribute to their		
	communities, and address the world's most challenging problems.		
_			
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes X	
	prior Form 990 or 990-EZ?	∟ Yes 🚣 I	NO
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X	Na.
3	If "Yes," describe these changes on Schedule O	L res ட	40
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	• •	
	revenue, if any, for each program service reported	ino, ano total expended, and	
4a	(Code) (Expenses \$ 98,734,898. including grants of \$) (Revenue	ue \$ 239,256,031	.)
	Instruction represents the expenses for the educational programs. The	·-····································	- ′
	programs are comprised of students who are full time on the Middlebury		
	VT campus plus the students who are attending the study abroad and		_
	summer programs. A bachelors degree and a masters in language and		_
	English are the primary degrees granted. The Monterey CA campus offers		
	graduate degrees in programs of study in translation, interpretation		
	and language education and international policy management.		_
		. <u> </u>	
4b	(Code) (Expenses \$ 43,334,555. including grants of \$ 617,821.) (Revenue	e \$	_)
	Academic support represents sponsored activities expenses incurred in		_
	support of the educational activities for enrolled students. Grants include support to other organizations, foundations, and research		—
	institutions.		—
	1100104010113.		—
			—
			—
			_
			
			_
4c	(Code) (Expenses \$ 116,217,663. including grants of \$ 74,515,894.) (Revenue	e \$	_)
	Student services and financial aid represents expenses incurred in the		
	support of the enrolled students.	<u> </u>	
			_
	<u> </u>		_
			_
			_
			—
	Other was a second of the seco	·	—
4d	Other program services (Describe in Schedule O)	12 621 857 \	
10	(Expenses \$ 46,128,343. including grants of \$ 600,000.) 600,000.) (Revenue \$ 7000 column 1000 co	12,621,857.)	—
<u>4e</u>	Total program service expenses	Form 990 (20	18\
		rom 330 (20	ıd

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Form 990 (2018) College
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	_	x	
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9	_	_
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
.5	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	rt IV Checklist of Required Schedules (continued)		<u>-</u>	age •
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	1100
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	ļ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	 -	-	
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ľ
	Schedule J	23	x	l
24.5	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	<u> </u>	
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
		240	x	
	Schedule K If "No," go to line 25a	24a 24b	-	x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		x
	any tax-exempt bonds?	24c		x
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
р	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			١.,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	Х	_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	i i		l
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			İ
	instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Х	<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			,,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_A_	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l .
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	ا ہم ا		x
20	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ا مر ا		х
22	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	[- 1	v
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_ X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	İ
352		35a	x	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	550		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	x	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
-	If "Yes," complete Schedule R, Part V, line 2	36	х	
37	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	- {	х
38	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	х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		1	1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ļ	t
	(gambling) winnings to prize winners?	1c	х	
832004	12-31-18	Form	990 (2018)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued))			
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1			
	filed for the calendar year ending with or within the year covered by this return	2a 5498			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,	За	х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0	3b	х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	х	
b	If "Yes," enter the name of the foreign country ▶ See Schedule 0				-
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	he organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		х
þ	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices provided to the payor?	7a		_ х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas required			
	to file Form 8282?	1 1	7с	-	_х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e	-	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file F	·	7g		
ь 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are not statistical departments of the contribution of cars, boats, airplanes, or other vehicles, did the organizations are not statistical departments.		7h	\dashv	
•	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	o by the	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		-		
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter	•			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
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	12b			
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		
	Note. See the instructions for additional information the organization must report on Schedule O				
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1			
	organization is licensed to issue qualified health plans	13b		l	
	Enter the amount of reserves on hand	13c	44	-+	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	60	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun	eration or	4.		х
	excess parachute payment(s) during the year? If "Yos " see instructions and file Form 4720. Schoolule N.		15	-	<u>.</u>
16	If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investme	nt income?	16		x
.0	If "Yes," complete Form 4720, Schedule O	in income (-10		
	1 100 Complete Form Tribe, Generalie G		Form	990	(2018)

President and Fellows of Middlebury College Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Х Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 33 b Enter the number of voting members included in line 1a, above, who are independent 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? Х 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision х of officers, directors, or trustees, or key employees to a management company or other person? х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 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? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X **b** Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **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 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х **b** Other officers or key employees of the organization 15b 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 х taxable entity during the year? 16a 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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶VT 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Other (explain in Schedule O) Own website Another's website X Upon request 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

Form 990 (2018)

State the name, address, and telephone number of the person who possesses the organization's books and records 🕨

David J. Provost - 8024435699 Old Chapel, Middlebury, VT 05753 Form 990 (2018) College

03-0179298

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

 $oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}}$

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of
	(list any hours for related organizations below line) Selection Complete	other compensation from the organization and related organizations								
(1) Laurie L. Patton	40.00									
President	1.00	х	┞	х	╙	Ļ.,		557,529.	0.	98,572.
(2) Belinda Badcock	1.00	l				1				_
Term Trustee		х	_	<u> </u>	<u> </u>	<u> </u>	_	0.	0.	0.
(3) Parker Harris	1.00								_	
Term Trustee		х	L	<u> </u>	╙	╙	_	0.	0.	0.
(4) Allan Dragone Jr.	1.00	l								
Vice Chair - Charter Trustee	0,50	х	╙	L	L_	L	_	0.	0.	0.
(5) Kirtley Horton Cameron	1.00									
Alumni Trustee		х	L	<u> </u>	<u> </u>	lacksquare		0.	0.	0.
(6) Caroline Sneath McBride	1.00									
Term Trustee		х	L		╙	_		0.	0.	0.
(7) Eve B. Burton	1.00									
Term Trustee		X	<u> </u>					0.	0.	0.
(8) Kimberly Collins Parizeau	1,00									
Charter Trustee	0.50	х	_			┖	<u> </u>	0.	0.	0.
(9) Steven B. Peterson	1.00	1				ŀ				
Charter Trustee		х	┖		L	<u>L</u>	<u> </u>	0.	0.	0.
(10) Elisabeth B. Robert	1,00									
Charter Trustee		Х	┖		乚	乚	L	0.	0.	0.
(11) James Edward Virtue	1.00	1								
Charter Trustee		X	L				L	0.	0.	0.
(12) George C. Lee II	1.00									
Term Trustee	.`	Х	L	L	L	<u> </u>	<u>L</u>	0.	0.	0.
(13) Linda Foster Whitton	1.00	1	l				1			
Charter Trustee		х			<u> </u>			0.	0.	0.
(14) Russell J. Leng	1.00									
Term Trustee		х	$oxed{oxed}$		L	L_	lacksquare	0.	0.	0.
(15) Garrett M. Moran	1.00]			ł]				
Charter Trustee		х	$oxed{oxed}$		<u> </u>	L	<u> </u>	0.	0.	0.
(16) Karen A. Stolley	1.00]								
Term Trustee		х	L				$oxed{oxed}$	0.	0.	0.
(17) Catherine Lee	1.00					_				
Term Trustee		x		L	<u>L</u>		L	0.	0.	0.

832007 12-31-18

Form 990 (2018) College									03-0179298		P	age 8
Part VII Section A. Officers, Directors,	Trustees, Key Em	plo	yees	, an	d H	ighe	st C	Compensated Employe	es (continued)			
(A)	(B)	Г			C)			(D)	(E)		(F)	
Name and title	Average	1,00	o not c		rtior		one	Reportable	Reportable	E:	stımat	ed
	hours per	box	x, unle	ss pe	erson	ıs bot	th an	compensation	compensation	ar	mount	of
	week	H-	icerar	nd a c	recto	or/trus	(1	from	from related		other	
	(list any hours for	E G				İ		the	organizations		npensa	
	related	5	g	l	1	sated	ļ	organization	(W-2/1099-MISC)	,	rom th	
	organizations	trustee or director	trust		₈₂	ubeu	1	(W-2/1099-MISC)			ganızat ıd relat	
	below] m	tonal	١.	lg d	st con	<u> </u>			i	anızat	
	line)	Individual	institutional trustee	Officer	Key employee	Highest compensated employee	Fоrmer			",		
(18) Lucienne M. Ide	1,00		1									
Alumni Trustee		x		<u> </u>				0.	0.			0
(19) Henry J. Simonds	1.00											
Alumni Trustee		х						0.	0.	L		0
(20) Deborah G. Thomas	1.00]				Ţ]					
Charter Trustee		Х			L			0.	0.	<u></u>		0
(21) Suzanne Reider	1.00	1										
Term Trustee		X				L.		0.	0.	<u> </u>		0
(22) Helen Riess	1.00		Ι.					J .				
Term Trustee		Х		_			<u> </u>	0.	0.			0
(23) Richard T. Scanlon	1.00									i		
Term Trustee		X	▙	_	<u> </u>	<u> </u>	_	0.	0.	<u> </u>		0
(24) John S. Weinberg	1.00	ļ]]						
Vice Chair - Charter Trustee (25) Dennis D. Parker	1.00	Х	┢	├	┝			0.	0.	-		0
Alumni Trustee	1.00	l _x						٥.	0.	1		0
(26) Joseph W. Brown	1,00	┝	\vdash	├	┢	┝╌		<u> </u>	<u> </u>			
Term Trustee	<u> </u>	· x]			0.1	0			0
1b Sub-total		L						557,529,	0.		98	572
c Total from continuation sheets to Par	rt VII. Section A							3,208,524.	0.	1	.037	<u> </u>
d Total (add lines 1b and 1c)	, 00011011 71							3,766,053.	0.		,136	·
2 Total number of individuals (including b	ut not limited to th	nose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable			
compensation from the organization						•						24
											Yes	No
3 Did the organization list any former offi	cer, director, or tru	uste	e, ke	y er	nplo	yee,	or h	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J f	for such individual									_3	х	
4 For any individual listed on line 1a, is th	e sum of reportab	le co	omp	ensa	ation	and	doth	ner compensation from	the organization			
and related organizations greater than S	\$150,000? If "Yes,	" co	mple	ete S	Sche	dule	J fo	or such individual		4	х	L
5 Did any person listed on line 1a receive	•				•		elate	ed organization or indivi	dual for services			ĺ
rendered to the organization? If "Yes," or	complete Schedul	e J 1	for su	uch	pers	on				5		Х
Section B. Independent Contractors												
1 Complete this table for your five highes	•								· · · · · · · · · · · · · · · · · · ·	ation 1	irom	
the excenization Depart componentian	for the colondar.	000		~~	uth.	~	ath in	the example the few	/OOF			

(A) Name and business address	(B) Description of services	(C) Compensation
Naylor & Breen Builders Inc	35551, 3551 51 55 55 55	- Companion
191 Alta Woods Pvt, Brandon, VT 05733	Construction	3,954,571
CET Academic Programs		
1155 Conn. Ave, Washington, DC 20036	Program Fee/School Abroad	1,267,828
EBSCO Industries, Inc.		
PO Box 830460, Birmingham, AL 35283	Research Database	807,851
A. Cooper Mechanical Inc	Plumbing and Heating	
171 Leroy Rd, Williston, VT 05495	Contractor	691,331
Champlain Valley Plumbing & Heating, Inc.	Plumbing and Heating	<u> </u>
185 Exchange St., Middlebury, VT 05753	Contractor	634,253

See Part VII, Section A Continuation sheets

Form 990 (2018)

832008 12-31-18

Form 990 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (C) (D) (E) (F) Position Reportable Estimated Name and title Average Reportable hours (check all that apply) compensation compensation amount of from related other per from the organizations compensation week Highest compensated employee (list any organization (W-2/1099-MISC) from the (W-2/1099-MISC) hours for organization trustee related and related organizations organizations Key employee below line) (27) Leilani M. Brown 1.00 0 x 0 Ο. Term Trustee (28) Janine F. Feng 1.00 0 0. Term Trustee ٥. 1.00 (29) Frank W. Sesno Charter Trustee 0 0 0. 1.00 (30) Mark Spence Ο. 0 Term Trustee (31) Kashif Zafar 1.00 Term Trustee 0 0 Ο. 1.00 (32) William F. Truscott Alumni Trustee 0 0 Ο. 1.00 (33) Elizabeth C. Speers ٥. 0 0. Alumni Trustee (34) Zachary A. Bourque 1.00 0. 0 0 Alumni Trustee 40.00 (35) David Donahue Former Secretary 0.50 191,472 0. 74,187. 40.00 (36) Stephanie Neil 0 Assistant Secretary X 81,226 40,834. (37) David Provost 40.00 X 0 EVP Finance & Admin., Treasurer 349,154 90,317. 40.00 (38) Hannah Ross 0. x General Counsel and Secretary 243,382 91,775. (39) Charlene M. Barrett 40.00 65,628 0 Assistant Secretary 29,375. 40.00 (40) Susan Parsons Ritter Associate Secretary x 113,568 0 44,517. (41) Karen Miller 40.00 0 VP for Human Resources & Risk 245,448 74,707. 40.00 (42) Baishakhi Taylor VP for Student Affairs, Dean of Stud X 185,152 0 56,846. (43) Jeffrey Cason 40.00 0. Provost and Executive Vice President Х 222,272 118,360. 40.00 (44) William C. Potter Director of CNS Х 291,962 0 57,495. (45) Vardit Ringvald 40.00 0 Director School of Hebrew Х 259,455 78,586. (46) Michael Schoenfeld 40,00 Sr. VP & Chief Philanthropic Advisor 262,613 0 82,431. Total to Part VII, Section A, line 1c

College

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Form 990 College Part VII Section A. Officers, Directors, T									03-017929	<u> </u>
		mple	oyee			High	est			<u> </u>
(A) Name and title	(B) Average			Pos				(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	stee or director	lnstitutional trustee	Officer	Key employee	Highest compensated employee	Paller Faller	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organization
47) Philip Geier	40.00			П						
xe. Director Davis UWC Program		1			i '	х		247,991.	0.	71,8
48) Susan Baldridge	40.00							<u>-</u>		
rofessor of Psychology		1		ŀ		х		263,623.	0.	75,4
49) Katie Smith Abbott	40.00									
ormer VP Student Affairs & Dean		L				L	х	185,578.	0.	51,2
		,								
		\vdash								
		-		Н			-			
				Н			Н			
									_	
	-									
			П							
				\dashv		_				
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										 .
			\exists	\dashv		\neg	\vdash			
			\dashv	\dashv	-	\dashv				 .
	-		니	\dashv	\dashv	\dashv				
				_	_	_				
otal to Part VII, Section A, line 1c								3,208,524.		1,037,9

College

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b Membership dues Fundraising events 1c Related organizations 6,395,891 Government grants (contributions) 1e All other contributions, gifts, grants, and 47,461,700 similar amounts not included above 5,770,851 Noncash contributions included in lines 1a-1f \$ 53,857,591 h Total. Add lines 1a-1f Business Code 2 a Tuition and Fees 611710 239,256,031 239,256,031 Program Service Revenue College Store 451211 1,414,437 1,414,437 1,362,831 Dining 722514 1,362,831 713910 1,137,437 1,137,437 Snow Bowl 59,249 541800 59,249 Advertising 611710 8,647,903 8,647,903 All other program service revenue 251,877,888. Total. Add lines 2a-2f Investment income (including dividends, interest, and -1,190,722 30,049,122 31,239,844 other similar amounts) income from investment of tax-exempt bond proceeds 32,841 32,841. Royalties (i) Real (ii) Personal 6 a Gross rents Less rental expenses Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities 178,242,000 assets other than inventory Less cost or other basis 122,563,000 and sales expenses 55,679,000 c Gain or (loss) 55,679,000 2,737,987 52,941,013. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 Less direct expenses Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 18,962 18,962 451211 Book store sale items 11 a 323100 15,000. 15,000 Reprographics sale All, other revenue 33,962 Total. Add lines 11a-11d 391,530,404. 251,818,639 1,640,476 84,213,698. Total revenue See instructions Form **990** (2018) 832009 12-31-18

Form 990 (2018) College 03Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respo			mipleto colariir (i y	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	793,172.	793,172.		
2	Grants and other assistance to domestic			L.	
	individuals See Part IV, line 22	74,515,894.	74,515,894.		·
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	424,649.	424,649.	· · ·	
4	Benefits paid to or for members		·		
5	Compensation of current officers, directors,				
	trustees, and key employees	3,577,041.	608,097.	2,360,847.	608,097.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	130,977.	130,977.	11.000 000	4 340 50
7	Other salaries and wages	127,278,530.	110,970,712.	14,988,239.	1,319,579.
8	Pension plan accruals and contributions (include	12 026 602	11 455 536	1 054 046	416 406
_	section 401(k) and 403(b) employer contributions)	13,826,608.	11,455,236.	1,954,946.	416,426.
9	Other employee benefits	26,109,678.	13,831,537.	11,339,710.	938,431.
10	Payroll taxes	8,490,370.	7,034,205.	1,200,454.	255,711.
11	Fees for services (non-employees)		ļ		
a	Management	656,819.	17,289.	639,530.	
	Legal	404,586.	194,110.	210,476.	
	Accounting	404,300.	134,110.	210,470.	
	Lobbying Professional fundraising services See Part IV, line 17				
e f	· ·	5,643,122.		5,643,122.	
	Investment management fees Other (If line 11g amount exceeds 10% of line 25,	3,043,122.		3,043,122.	
9	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	827,961.	271,975.	500,387.	55,599.
13	Office expenses	1,651,609.	687,777.	867,449.	96,383.
14	Information technology	1,960,953.	1,350,285.	549,601.	61,067.
15	Royalties	<u> </u>	·		
16	Occupancy	12,317,459.	9,289,634.	3,027,825.	
17	Travel	9,477,435.	4, 8,178,325.	1,169,199.	129,911.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,144,106.	931,255.	191,566.	21,285.
20	Interest	12,230,342.	11,415,801.	814,541.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	19,648,154.	18,134,347.	1,513,807.	
23	Insurance	2,165,554.	77,428.	2,088,126.	
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 0)				
а	Contracted Services	19,478,629.	13,575,295.	5,228,000.	675,334.
b	Other Miscellaneous Exp	14,561,160.	12,500,908.	1,345,602.	714,650.
С	Food	5,493,029.	5,473,902.	17,214.	1,913.
d	Supplies	2,786,971.	2,523,429.	237,188.	26,354.
е	All other expenses	12,538,984.	29,220.	12,509,764.	
25	Total functional expenses Add lines 1 through 24e	378,133,792.	304,415,459.	68,397,593.	5,320,740.
26	Joint costs Complete this line only if the organization	Ì	_ [1	
	reported in column (B) joint costs from a combined		,		
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				
832010) 12-31-18				Form 990 (2018)

Form 990 (2018)
Part X | Balance Sheet

Part	: X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		' (B) End of year
	1	Cash - non-interest-bearing			5,404,499.	1	11,373,082
	2	Savings and temporary cash investments			324,501.	2	337,679
- [3	Pledges and grants receivable, net			25,882,986.	3	19,932,550
-	4	Accounts receivable, net		Ť	9,122,583.	4	7,196,41
i	5	Loans and other receivables from current and fo	rmer o	fficers, directors.	· · ·	•	· · · · · · · · · · · · · · · · · · ·
	•	trustees, key employees, and highest compensation					_
		Part II of Schedule L		pioyece compilere	30,532.	5	27,23
	6	Loans and other receivables from other disquali	fied ne	rsons (as defined under	,		'
	Ū	section 4958(f)(1)), persons described in section	-	· .			
		employers and sponsoring organizations of sec	-				
ای		employees' beneficiary organizations (see instr)				6	
Assets	7	· · ·	lete Fait ii Oi Scii L	11,949,000.	7	10,032,57	
Ž	7	Notes and loans receivable, net	-	745,245.	8	644,45	
	8	Inventories for sale or use		-	4,044,301.	9	3,756,41
	9	Prepaid expenses and deferred charges	1 1	ŀ	4,044,304.		3,,30,41
	iva	Land, buildings, and equipment cost or other	400	810,111,437.			
		basis Complete Part VI of Schedule D	10a	443,146,744.	373,884,384.	40-	366,964,69
		Less accumulated depreciation	10b	113,110,711.	160,013,000.		166,410,00
	11	Investments - publicly traded securities		}	996,162,000.	11	1,011,114,79
	12	Investments - other securities See Part IV, line		-	330,102,000.	12	1,011,114,79
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets		-	20 522 202	14	22 420 10
	15	Other assets See Part IV, line 11			29,522,283.	15	32,429,10
_	16	Total assets. Add lines 1 through 15 (must equ	al line 3	14)	1,617,085,314.	16	1,630,218,99
	17	Accounts payable and accrued expenses		ļ-	43,269,637.	17	51,320,99
	18	Grants payable		-	22 222 222	18	45.040.05
	19	Deferred revenue		-	21,970,933.	19	15,910,25
	20	Tax-exempt bond liabilities		-	257,375,801.	20	253,945,27
	21	Escrow or custodial account liability Complete			10,407,839.	21	10,815,70
2	22	Loans and other payables to current and former	officer	s, directors, trustees,			
		key employees, highest compensated employee	es, and	disqualified persons	-		
Liabilities		Complete Part II of Schedule L		-		22	
1	23	Secured mortgages and notes payable to unrela		· ·		23	
	24	Unsecured notes and loans payable to unrelate			20,660,000.	24	19,440,00
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24)	Complete Part X of			
- }		Schedule D		-	38,781,004.	-	41,699,47
-	26	Total liabilities. Add lines 17 through 25		. []	392,465,214.	26	393,131,71
-		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🗓 and			ļ
Se		complete lines 27 through 29, and lines 33 ar	d 34.		•		
.	27	Unrestricted net assets			228,394,265.	27	202,176,93
Š	28	Temporarily restricted net assets			602,723,416.	28	623,921,35
2	29	Permanently restricted net assets			393,502,419.	29	410,989,00
2		Organizations that do not follow SFAS 117 (A	SC 958	B), check here ▶Ш			
5		and complete lines 30 through 34.					, ,
3	30	Capital stock or trust principal, or current funds		Į		30	
	31	Paid-in or capital surplus, or land, building, or ed	luipmei	nt fund		31	
Net Assets of Fund Balances	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
z	33	Total net assets or fund balances			1,224,620,100.	33	1,237,087,28
	34	Total liabilities and net assets/fund balances			1,617,085,314.	34	1,630,218,99

Form **990** (2018)

President and Fellows of Middlebury

Forn	n 990 (2018) College	03-01/929	<u> </u>	<u> Pa</u>	<u>ge</u> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	391	,530	,404
2	Total expenses (must equal Part IX, column (A), line 25)	2	378	,133	,792
3	Revenue less expenses Subtract line 2 from line 1	3	13	,396	,612.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,224	,620	,100
5	Net unrealized gains (losses) on investments	5	1	,737	,000
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	- 2	,666	, 426
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,237	,087	, 286
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX.
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	• O	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	1 1		i
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				ľ
b	Were the organization's financial statements audited by an independent accountant?		2b	х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,	1 1		ĺ
	consolidated basis, or both				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,]		l
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
_	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
За	The a recent of a recent award, was the organization required to an early of a addition as a continuous	•			
За	Act and OMB Circular A-133?		3a	х	
	· · · · · · · · · · · · · · · · · · ·	_	_3a	х	

832012 12-31-18

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information. President and Fellows of Middlebury

OMB No 1545-0047

Open to Public

Inspection Employer identification number

Nam	e of t	he organization Presid	lent and Fellows	of Middlebury				Employe	identification number
		Colleg	re					0	3-0179298
Pa	rt I	Reason for Public	Charity Status (/	All organizations must co	omplete th	ıs part) Se	ee instruction	S	
The	organ	ization is not a private found	dation because it is (For lines 1 through 12, o	heck only	one box)			
1		A church, convention of ch	iurches, or associatio	on of churches describe	d in sectio	n 170(b)(1	I)(A)(ı).		
2	X _	A school described in sect	ion 170(b)(1)(A)(iı). (Attach Schedule E (Forn	n 990 or 9	90-EZ))			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).		()
4		A medical research organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state							
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
		section 170(b)(1)(A)(iv). (0							
6	닉	A federal, state, or local go	-						
7		An organization that norma		intial part of its support f	rom a gov	ernmental	unit or from	the general	public described in
	$\overline{}$	section 170(b)(1)(A)(vi). (C	•						
8		A community trust describe			•				
9	Ш	An agricultural research org	-			-		_	
		or university or a non-land-	grant college of agno	ulture (see instructions)	Enter the	name, city	y, and state o	f the collec	je or
10		An organization that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	and gross receipts from
		activities related to its exer	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of	its suppor	t from gross investment
		income and unrelated busi	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the o	rganization	after June 30, 1975
		See section 509(a)(2). (Co	mplete Part III)						
11		An organization organized	and operated exclus	ively to test for public sa	fety See	section 50)9(a)(4).		
12		An organization organized	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to c	arry out the	purposes of one or
		more publicly supported or	rganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2)	See section	509(a)(3). (Check the box in
		lines 12a through 12d that	describes the type of	of supporting organization	n and con	plete lines	s 12e, 12f, an	d 12g	
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
		organization You must o	complete Part IV, Se	ections A and B.					
b	L.,	J Type II. A supporting org	janization supervised	l or controlled in connec	tion with it	s support	ed organizatio	on(s), by ha	iving
		control or management of	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
	_	organization(s) You mus	st complete Part IV,	Sections A and C.					
С		■ Type III functionally interest.	egrated. A supporting	g organization operated	ın connec	tion with, a	and functiona	ılly ıntegrat	ed with,
		ts supported organization	n(s) (see instructions	s) You must complete I	Part IV, Se	ctions A,	D, and E.		
d	<u> </u>		y integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	rted organ	ızatıon(s)
		that is not functionally in	tegrated The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requirement (see instruct	tions) You must con	nplete Part IV, Sections	s A and D,	and Part	V.		
e		☐ Check this box if the orga					a Type I, Type	II, Type III	
		functionally integrated, o	r Type III non-functio	nally integrated support	ıng organı	zation			
f	Ente	er the number of supported	organizations						
g		vide the following information			L live le the eres	nuzation lielad			1 (14)
	(Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1.10	(iv) Is the orga in your govern	ng document?	(v) Amount of support (see ii	-	(vi) Amount of other support (see instructions)
		Organization		above (see instructions))	Yes	No	support (see ii	istructions)	support (see instructions)
		. 							
			<u> </u>						
Tota	1								

	resident and F	ellows of Mid	dlebury			
Schedule A (Form 990 or 990-EZ) 2018	ollege				03-017929	i ugo z
Part II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(vi)
(Complete only if you check	ed the box on line 5	5, 7, or 8 of Part I c	r if the organizatio	n failed to qualify	under Part III If th	e organization
fails to qualify under the test	s listed below, plea	se complete Part	IH)			
Section A. Public Support			_		-	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and				<u> </u>	<u> </u>	
membership fees received (Do not						
include any "unusual grants ")	49,195,841.	44,212,743.	35,276,000.	58,563,974.	53,857,591.	241,106,149.
2 Tax revenues levied for the organ-			· - ·			
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities			-			
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3	49,195,841.	44,212,743.	35,276,000.	58,563,974.	53,857,591.	241,106,149.
5 The portion of total contributions		, , , ,				
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the	1		' I		ı	ĺ
amount shown on line 11,						
column (f)						7,530,618.
6 Public support. Subtract line 5 from line 4						233,575,531.
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	49,195,841.	44,212,743.	35,276,000.	58,563,974.	53,857,591.	241,106,149.
8 Gross income from interest,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				.,	
dividends, payments received on						
securities loans, rents, royalties,			\ \ \			
and income from similar sources	52,363,258.	43,220,682.	24,872,338.	49,023,084.	30,524,053.	200,003,415.
9 Net income from unrelated business		7 7			, ,	
activities, whether or not the						
business is regularly carried on						
10 Other income Do not include gain				$\overline{}$		
or loss from the sale of capital						
assets (Explain in Part VI)	}					
11 Total support. Add lines 7 through 10	-			<u>`</u>		441,109,564.
12 Gross receipts from related activities	etc (see instruction				12	1,169,080,761.
13 First five years. If the Form 990 is for			d fourth or fifth to	v vear as a section	· -	,
organization, check this box and sto	=	inst, second, time	u, 10u/m, or mar ta	A year as a section	11 30 1(0)(0)	▶□
Section C. Computation of Pub		rcentage			$\overline{}$	
14 Public support percentage for 2018			olumn (fl)		14	52.95 %
15 Public support percentage from 201		-	Oldifili (i))		15	52.50 %
16a 33 1/3% support test - 2018. If the	•		a line 13 and line 1	 		
	-			14 15 33 1/3/0 0/11	iore, crieck triis be	x all
stop here. The organization qualifies		-		line 15 ie 22 1/20/	or more, check th	\
b 33 1/3% support test - 2017. If the	-			III E I J IS 33 1/3%	or more, check ti	"3 500
and stop here. The organization qua		-		12 160 or 16h -	and line 14 is 100/	or more
17a 10% -facts-and-circumstances tes	_					•
and if the organization meets the "fac		•	· · · · · · · · · · · · · · · · · · ·		t vi now the organ	nzation
meets the "facts-and-circumstances"	-	•		=	70. and line 15 in	10% or

Schedule A (Form 990 or 990-EZ) 2018

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990 EZ) 2018 College Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

_	quality disdentine tests listed b	clow, picase comp	siete i art ii j				
	ction A. Public Stipport						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not			•			
	include any "unusual grants ")				i		
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpòse				_		
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	, , , , , , , , , , , , , , , , , , ,						
	or expended on its behalf			-			
5	The value of services or facilities	\ \					
	furnished by a governmental unit to	\ \					
	the organization without charge						
6	Total. Add lines 1 through 5	١					
7 a	Amounts included on lines 1, 2, and		\				
	3 received from disqualified persons		\				
h	Amounts included on lines 2 and 3 received		`				-
_	from other than disqualified persons that		\				
	exceed the greater of \$5,000 or 1% of the		\				
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
	Gross income from interest.						
	dividends, payments received on	ļ					
	secunties loans, rents, royalties,						
	and income from similar sources			 			
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b				\		
11	Net income from unrelated business					-	
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain			 	 \		L
	or loss from the sale of capital	į ,					
	assets (Explain in Part VI)				\		
	Total support (Add lines 9, 10c, 11 and 12)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth to	ax year as a sectio	7 501(c)(3) organiz	ation,
	check this box and stop here						▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2018 (I			column (fl)		15	%
	Public support percentage from 2017		•	(,,,		16	%
	ction D. Computation of Inves			1		101	70
	· · · · · · · · · · · · · · · · · · ·					\ \ \	
	Investment income percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	ine 13, column (f))		17	<u>%</u>
18	Investment income percentage from 2	2017 Schedule A,	Part III, line 17			18	<u>%</u>
19a	19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not						
	more than 33 1/3%, check this box a	nd stop here . The	organization qual	ifies as a publicly s	supported organiza	ition	\ ▶□
h	33 1/3% support tests - 2017. If the	=	•		•		and
_	line 18 is not more than 33 1/3%, che	•					
20	•		•	•		•	\mathbf{z}
	Private foundation. If the organization	п аю посспеск а	DOX OF TIME 14, 18	a, or 190, check tr			>000 ET/0010
8320	23 10-11-18			1 🗖	Scho	eaule A (Form 990	or 990-EZ) 2018

Part IV | Supporting Organizations

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

Section A.	All	Supporting	Organizations
------------	-----	------------	---------------

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 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)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined 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**.
- c 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1		
2		
3a		
3b		
3c		
4a_		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
1 <u>0</u> b		

832024 10-11-18

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard 832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

2b

3а

activities but for the organization's involvement

Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

03-0179298	Page 6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov 20, 1970 (explain in	Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		<u> </u>
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1		
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)	.		<u></u>
a	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		Ī.
	Fair market value of other non-exempt-use assets	1c	· · · · · · · · · · · · · · · · · · ·	
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)		•	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			T
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	· · · · · · · · · · · · · · · · · · ·	
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount		- -	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	J]
	emergency temporary reduction (see instructions)	6	· 	
7	Check here if the current year is the organization's first as a non-functional	y integra	ted Type III supporting org	anization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2018

Pai	^{T V}	(a)(3) Supporting Orga	anizations _(continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ıs	
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			
8	Distributions to attentive supported organizations to which the	he organization is responsive	•	
	(provide details in Part VI) See instructions		. <u></u>	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018 `
_1	Distributable amount for 2018 from Section C, line 6		. !	
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			·
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D,			
	line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions	<u>-</u>		
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c			,
8	Breakdown of line 7			
а	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			
			Cohodulo A	(Form 900 or 900 EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

President and Fellows of Middlebury

Schedule A	Form 990 or 990 EZ) 2018 College	03-0179298	Page
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 19 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any a (See instructions)	ines 1 and 2, Part IV, Sect Part V, Section B, line 1e,	ion C.
			
_	<u> </u>		
		 	
<u>.</u>			
		•	
		· · · · · ·	
	<u> </u>		
			_

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organiza 	tions Complete Part III	_		
Name of organization President	and Fellows of Middlebury		Emp	loyer identification number
College				03-0179298
Part I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 o	organization.
Provide a description of the organic Political campaign activity expendic Volunteer hours for political campa	tures	al campaign activities	n Part IV ►\$	
Part I-B Complete if the org	ganization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization und	er section 4955	▶ \$	
2 Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	▶ \$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a Was a correction made?				└─ Yes └─ No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	ganization is exempt unde	er section 501(c),		
1 Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt func	tion activities > \$	
2 Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for se	ection 527	
exempt function activities			▶ \$	
3 Total exempt function expenditures	Add lines 1 and 2 Enter here ar	nd on Form 1120-POL,		
line 17b			▶ \$	
4 Did the filing organization file Form	•			Yes No
5 Enter the names, addresses and er made payments For each organiza contributions received that were pr	ition listed, enter the amount paid	from the filing organiz	zation's funds Also enter th	ne amount of political
political action committee (PAC) If				no oogrogatoo tana or a
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
	-			
		_		
1000				
For Paperwork Reduction Act Notice,	see the Instructions for Form 9	90 or 990-EZ.	Schedule C	(Form 990 or 990-EZ) 2018

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Schedule C (Form 990 or 990-EZ) 2018

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity	Yes	No	Am	ount	
1 During the year, did the filing organization attempt to influence foreign, national, state, or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of					
a Volunteers?		Х	l		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		х			
c Media advertisements?		х			
d Mailings to members, legislators, or the public?		х			
e Publications, or published or broadcast statements?		X			
f Grants to other organizations for lobbying purposes?		х			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Х	<u> </u>		893	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			
i Other activities?		Х			
j Total Add lines 1c through 1i		 -		893	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b If "Yes," enter the amount of any tax incurred under section 4912	j]			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), see	otion 501/o	V5\ or oc	otion	-	
501(c)(6).		,(J), UI SE			
			Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		_1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), see					
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer 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 po	olitical			···	
expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	\$	3			
4 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 an	nd political				
expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information					
Provide the descriptions required for Part I·A, line 1, Part I·B, line 4, Part I·C, line 5, Part II·A (affiliated gr instructions), and Part II·B, line 1. Also, complete this part for any additional information Part II-B, Line 1, Lobbying Activities:	oup list), Part I	I-A, lines 1 a	and 2 (see		
A Middlebury officer spent approximately 5 hours in 2019 preparing for					
Vermont state senate education hearing on the formation of a sexual	_			**	
assault task force,					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

President and Fellows of Middlebury

Employer identification number 03-0179298

Par	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed 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 a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, F	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structi	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year▶	·	•
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items		•
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		\$ 21,432,078.
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1		-
а	Revenue included on Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	▶ \$
	Assets included in Form 990, Part X		> \$
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2018

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03-0179298

Scneaule D (I	-orm 990) 2018	Correge		
Part VII	Investments - O	ther Securities		

Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11b See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Equity securities	283,468,552.	End-of-Year Market Value
(B) Alternative equities	317,771,456.	End-of-Year Market Value
(C) Debt securities	5,750,481.	End-of-Year Market Value
(D) Real estate and mortgages	11,885,605.	End-of-Year Market Value
(E) Private equity partnerships	390,382,334.	End-of-Year Market Value
(F) Other investments	1,856,365.	End-of-Year Market Value
(G)		
(H)		
Total (Col (b) must equal Form 990, Part X, col. (B) line 12)	1,011,114,793.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13 (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3) (4)(5) (6)(7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col (B) line 13.)

Part IX Other Assets.

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

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

Other Liabilities. Part X

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Funds held for others	4,021,853.
(3)	Annuities and Unitrusts payable	29,159,241.
(4)	Refundable Government Loans	8,518,385.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25)	41,699,479.

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

Schedule D (Form 990) 2018

832053 10-29-18

Schedule D (Form 990) 2018

for works of art, history, and culture of diverse societies.

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

➤ Attach to Form 990 or Form 990-EZ.

Open to Publi-Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

President and Fellows of Middlebury

Employer identification number

College 03-0179298

Part I

Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

YES NO

1 VES NO

			1	L.,,
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,	<u> </u>		┢──
-	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	x	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the	<u> </u>		
•	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes	ĺ		[
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain			
	If you need more space, use Part II	3	x	
	See Part II	<u> </u>	1	-
		ļ		
		l		
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	x	1
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	х	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	x ·	1
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II			
				}
				!
				ŀ
5	Does the organization discriminate by race in any way with respect to	1		
а	Students' rights or privileges?	5a		х
b	Admissions policies?	5b		х
C	Employment of faculty or administrative staff?	5c		x
d	Scholarships or other financial assistance?	5d		_ X
е	Educational policies?	5e		х
f	Use of facilities?	5f		х
g	Athletic programs?	5g		х
h	Other extracurricular activities?	5h		х
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		[
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a_	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of	_		
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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

Schedule E (Form 990 or 990-EZ) 2018

President and Fellows of Middlebury

Schedule E (Form 990 or 990-EZ) 2018 College 03-0179296	Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information	
Line 3 - Explanation of Nondiscrimination Policy:	
Middlebury communicates its commitment to non-discrimination	
to all students, faculty and staff through its policies in	
its handbook which is on Middlebury's main web site, and	<u>_</u>
through outreach and education. The policy is included in the	
Middlebury handbook, which is a resource guide for incoming	
students. The Compliance Officer is committed to maintaining a diverse	
and inclusive campus environment where bigotry and intolerance are	
unacceptable.	
Line 6 - Explanation of Government Financial Aid:	
Students apply for and receive federal financial aid and faculty or staff	
apply for and receive government grants.	
 	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the granteser's eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance outside the United States Pergrant Part IV, line 3 table can be duplicated if additional space is needed Color Notices on the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the region of the reg	Name of the organization					Employer identif	ication number
Part General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, Incl 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance? X Yes No	President and Fellows	of Middlebury	Y				
Form 990, Part IV, Into 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection critical used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of (C) Number of	College						
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Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas, 0 0 Investments 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a							
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas, 0 0 Investments 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a							
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas, 0 0 Investments 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a						i.	
the Caribbean - Antigua & Barbuda, Aruba, Bahamas, 0 0 Investments 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a	Sub-Saharan Africa	1	9	Program Services	Studies Abr	oad	212,522.
Antigua & Barbuda , Aruba , Bahamas ,	Central America and						
Aruba, Bahamas, 0 0 Investments ' 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a	the Caribbean -						
Aruba, Bahamas, 0 0 Investments ' 136,315,231. 3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a	Antigua & Barbuda,						
3 a Subtotal 18 399 146,228,346. b Total from continuation sheets to Part I 0 0 0. c Totals (add lines 3a 0 0 0	Aruba, Bahamas,	o	o	Investments	'		136,315,231.
b Total from continuation sheets to Part I 0 0 0 0. c Totals (add lines 3a		18					
sheets to Part I 0 0 0 0. c Totals (add lines 3a							
c Totals (add lines 3a		o	0				0.
				<u> </u>			
	*	18	399				146,228,346.

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

President and Fellows of Middlebury College

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

3 Enter total number of other organizations or entities

832072 10-31-18

Schedule F (Form 990) 201	8 College				03-0179	298 '		Page
		-	Outside the United States (icated if additional space is no		organization answered	d "Yes" on Form	990, Part IV, line 15, f	or any
1 (a) Name of organization	(b) IRS code section and EIN (if applicable	I (c) Pegion	(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, FM appraisal, other)
	1	Europe (Including Iceland & Greenland)	Research Grant	424,649	Disbursement made directly to .prganization	0.		PMV
						·		
			_					
-								
2 Enter total number of	recipient organization	ons listed above that are	recognized as charities by the	foreign country	/, recognized as tax e	xempt		1

Page 2

President and Fellows of Middlebury

Schedule F (Form 990) 2018 College

03-0179298

Page 3

	dditional space is nee	(c) Number of	(d) Amount of	(e) Manner of	(f) Amount of	(g) Description of	(h) Method o
a) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	noncash assistance	noncash assistance	(h) Method of valuation (book, FMV appraisal, oth
							
							
					+		
		 					

Scrieu	net (101111990) 2010 - 0011099	***************************************	raye 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization	-	
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		
	(see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	X 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)	X Yes	□□ No

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Name of the organization President and Fellows of Middlebury Employer identification number College 03-0179298 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance the grantees' eligibility for the grants or assistance, and the selection X Yes ☐ No criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book FMV, appraisal, other) non-cash assistance or government (if applicable) cash assistance or assistance Research Foundation for the State University of New York ~ 35 State 14-1368361 501(c)(3) Street - Albany, NY 12207 38.775 Research Grant Point Park University 201 Wood Street 25-1094922 501(c)(3) Pittsburgh, PA 15222 8 311 Research Grant Georgia Tech Applied Research 505 Tenth Street NW 58-2374837 501(c)(3) Atlanta, GA 30318 72,801 0 Research Grant Oregon Health & Science University 3181 S.W. Sam Jackson Park Rd 93-1176109 501(c)(3) 26,080 Portland, OR 97239 0 Research Grant Town of Middlebury 77 Main Street Town-Middlebury 600,000 0 Middlebury, VT 05753 Town Bridge Project Town Hall Theater 68 South Pleasant Street Middlebury, VT 05753 26-2091573 501(c)(3) 47,205 Annual Pledge 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 6. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2018)

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Schedule I (Form 990) (2018) College	or widdiepury	,			03-0179298	Page 2
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed	s Complete if the	organization answ	ered "Yes" on Form	990, Part IV, line 22		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of nonca	sh assistance
Financial Aid - Scholarships- Reported as non-cash	1 1		ł	1		
assistance. The assistance is a tuition offset.	3018	0.	74,515,894			
,						
Part IV Supplemental Information Provide the information rec	uired in Part I, lin	ie 2, Part III, column	(b), and any other a	idditional information		
Part I, Line 2			_			
Disbursements in furtherance of Middlebury's exempt	programs ar	e made in				
accordance with procedures or subject to conditions						
	986851151160	Dy				
Middlebury's governing board designed to ensure the	t the indivi	duals				
receiving disbursements from Middlebury are adequat	ely investige	ated to				
ensure that they are qualifying recipients. Grant a	ub-awardees	are				
required to submit A-133 reports which are reviewed	by the Midd	lebury's				
grant accountant. All billings are reviewed and app	proved by the	principal				
investigator and grant accountant before being paid	All financ	ial	 -			
832102 11-02-18		44			Schedule I (F	orm 990) (2018)

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Schedule I (Form 990) College	03-0179298	Page 2
Schedule I (Form 990) College Part IV Supplemental Information	· - · · · · ·	
assistance reported in Schedule I, Part III is in the form of tuition		
reduction/offsets to ensure that financial assistance funds are used for		
their intended educational purpose.		
		· · · · · · · · · · · · · · · · · · ·
		
	,	
~		
		
	Schedule	I (Form 990)

832291 04-01-18 Schedule I (Form 990

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information. President and Fellows of Middlebury

College

Employer identification number

03-0179298

P	Part I Questions Regarding Compensation			
			Yes	No
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	-		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal	use	ł	ł
	Travel for companions Payments for business use of personal resid	ence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ľ
	Discretionary spending account Personal services (such as maid, chauffeur,	chef)		
		-	1	1
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	_		-
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	—
2		-		-
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	├
3				
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization	to		
	establish compensation of the CEO/Executive Director, but explain in Part III	J]	
	X Compensation committee X Written employment contract			
	Independent compensation consultant		!	1
	Form 990 of other organizations X Approval by the board or compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensation compensati	ımıttee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing]	1
Ī	organization or a related organization			
а	a Receive a severance payment or change-of-control payment?	4a		, x
b		4b	х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
				İ
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation] '	J·
	contingent on the revenues of			
а	a The organization?	5a		х
b	b Any related organization?	5b		х
	If "Yes" on line 5a or 5b, describe in Part III]	}
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the net earnings of	_		
а	a The organization?	6a		X
b	h Any related organization?	6b		X_
	If "Yes" on line 6a or 6b, describe in Part III	.		l
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 67 If "Yes," describe in Part III	7	х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		.]	_
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	х	<u> </u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	X	L

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

Schedule J (Form 990) 2018

College

Schedule J (Form 990) 2018 College 03-0179298

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

Page 2

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

03-0179298

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

		(B) Breakdown of	W 2 and/or 1099 MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i) (D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation .	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	compensation	Deneitts	(6)(i) (0)	reported as deferred on prior Form 990	
(1) Laurie L. Patton	(1)	554,691.	0.	2,838.	57,750.	40,822.	656,101.	0,	
President	(n)	0.	0.	0.	0.	0.	0.	0.	
(2) David Donahue	(1)	188,601.	0.	2,871.	44,205	29,982.	265,659.	0.	
Pormer Secretary	(n)	0.	0.	0.	0.	0.	0.	0.	
(3) David Provost	(1)	289,738.	0.	59,416.	57,750.	32,567.	439,471.	0.	
EVP Finance & Admin., Treasurer	(n)	0.	0.	0.	0.	0.	0.	0.	
(4) Hannah Ross	(1)	242,729.	0.	653.	55,000.	36,775.	335,157.	0.	
General Counsel and Secretary	(n)	0.	0.	0.	0.	0.	0.	0.	
(5) Susan Parsons Ritter	(3)	112,826.	0.	742.	26,617.	17,900.	158,085.	0.	
Associate Secretary	(n)	0.	0.	0.	0.	0.	0.	0.	
(6) Karen Miller	(1)	222,277.	0.	23,171.	51,450.	23,257.	320,155.	0.	
VP for Human Resources & Risk	(n)	0.	0.	0.	0.	0.	0.	0.	
(7) Baishakhi Taylor	(1)	184,885.	0.	267.	24,453.	32,393.	241,998.	0.	
VP for Student Affairs, Dean of Stud	(11)	0.	0.	0.	0.	0.	0.	0.	
(8) Jeffrey Cason	(1)	220,678.	0.	1,594.	100,618.	17,742.	340,632.	0.	
Provost and Executive Vice President	(n)	0.	0.	0.	0.	0.	0.	0.	
(9) William C. Potter	3	285,757.	0.	6,205	44,000.	13,495.	349,457.	0.	
Director of CNS	(n)	0.	0.	0.	0.	0.	0.	0.	
(10) Vardit Ringvald	3	238,727.	0.	20,728.	55,125.	23,461.	338,041.	0.	
Director School of Hebrew	(11)	0	0.	0.	0.	0.	0.	0.	
(11) Michael Schoenfeld	3	256,477.	0.	6,136.	57,750.	24,681.	345,044.	0.	
Sr. VP & Chief Philanthropic Advisor	(n)	0,	0.	0.	0.	0.	0.	0.	
(12) Philip Geier	(3)	241,855.	0.	6,136.	57,094.	14,747.	319,832.	0.	
Exe. Director Davis UWC Program	(n)	0.	0.	0.	0.	0.	0.	0.	
(13) Susan Baldridge	(1)	262,574.	0.	1,049.	57,750.	17,666.	339,039.	0.	
Professor of Psychology	(II)	0	0.	0.	0.	0.	0.	0.	
(14) Katie Smith Abbott	(3)	184,901.	0.	677.	30,367.	20,903.	236,848.	0.	
Former VP Student Affairs & Dean	(1)	0.	0.	0.	0.	0,	0.	0.	
	3						<u> </u>		
	(1)								
-	3								
	(u)								

Schedule J (Form 990) 2018

Pı	resident and Fellows of Middlebury		
	ollege	03-0179298	Page 3
Part III Supplemental Information			
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also	complete this part for any additional information	
Part I, Line la			
As a condition of employment M	iddlebury provides the President, an officer,		
and the Director of the School	of Hebrew, a highly compensated employee,		
with a residence for the conve	nience of the employer.		
Part I, Line 7	•		
The President's compensation i	s set by the Compensation Committee of the		
Board of Trustees. Any increas	es shall be within the Board's sole		
discretion and shall be based	upon the President's performance, which will		
be reviewed yearly, prior to J	une 30 by the Chair of the Board, who will		
make a recommendation to the Co	ompensation Committee for compensation		
Part I, Line 8			
The President's employment con	tract includes provisions governing the		
following term of the contrac	t, renewal/extension, duties, compensation,		
benefits/reimbursements, evaluation	ation process of the president, termination,		
office and residence expenses,	and sabbatical leave.		
Part I, Line 4b			
		Cabadula I/Farm 0	

Flesident and letions of	Middlebaly		
Schedule J (Form 990) 2018 College		03-0179298	Page 3
Part III Supplemental Information			
Provide the information, explanation, or descriptions required for Part I,	lines 1a, 1b 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II A	Also complete this part for any additional information	
Part I, Line 4b			
The Provost participates in a supplemental nonqualifie	ed retirement		
plan which is contingent upon services.			
Deferred compensation includes pretax contributions to	a the veluntary		
Deterred compensation includes pretax contributions to	the voluntary		
retirement plan, contributions to Middlebury's non-que	alified tax advantaged		
deferred-compensation retirement plan (457 plan), and	Middlebury		
contributions to the core retirement plan on the behal	lf of the employee.		
Part II, Column (D)			
Nontaxable benefits include, but are not limited to,			
nontaxable housing, flexible spending accounts, tuition	on reimbursement	···· ·· · · · · · · · · · · · · · · ·	
program, medical, dental, and vision insurance, workma	an's compensation		
insurance, life insurance, disability insurance, and t	nemployment		
insurance.			
		Schedule J (Form t	990) 2018

SCHEDULE K (Form 990)

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

2018 Open to Public Inspection

	tach to Form 990 Go	to www irs gov/F	d any additional in form990 for instru	ctions and	the latest	information			Inspection Employer identification num				
College								0.	3-017	9298			
Part I Bond Issues		· · · · · · · · · · · · · · · · · · ·											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) issu	ie buce	(f) Descripti	on of purpose	(g) De	teased	(h) On		• •	
		į	1							of is	\rightarrow	finan	 -
								Yes	No	Yes	No	Yes	No
		L				refunding (S	•		١		l l		
A VEHBFA (Series 2010)	23-7154467	924166DH1	11/01/10	101,	791,989.	2002B, 2008)		-	x	\vdash	х	_	X
B VEHBFA (Series 2009)	23-7154467	924166DG3	01/14/10	62,	014,213.	refunding (S	eries 1999)		x		x		x
C VEHBPA (Series2012A&B)	23-7154467	924166EC1	04/10/12	67,	058,784.	Adv & refund	2002	┿	х	\vdash	х		X
D VEBFHA (Series 2016)	23-7154467	924166HZ7	08/05/16	36,	781,621.	refunding (S	erles 2006A)		x		x		, х
Part II Proceeds	-												
		-	A			В	С				D		
Amount of bonds retired							5,0	70,00	٦,				
2 Amount of bonds legally defeased													
3 Total proceeds of issue													
4 Gross proceeds in reserve funds			101	101,791,989. 62,014,213. 6			67,0	58,784. 36,78			781,	621	
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds		<u> </u>		817,182. 605,880.			7	722,528			491,120		
8 Credit enhancement from proceeds													
9 Working capital expenditures from prod	ceeds												
10 Capital expenditures from proceeds			100	,974,807.		61,408,333.	66,3	36,25	5.		36	, 290,	501
11 Other spent proceeds													
12 Other unspent proceeds													
13 Year of substantial completion				2010		2010		12	_			2016	
			Yes	No	Yes	No	Yes	No	_	Yes	4	No_	
14 Were the bonds issued as part of a refu	• ,	bonds (or,							1				
if issued prior to 2018, a current refund			×		х		х		+-	x	—		
15 Were the bonds issued as part of a refu	-	nds (or, if							1		1		
issued prior to 2018, an advance refun				х		x	X		+		+		<u> </u>
16 Has the final allocation of proceeds bee			×		_ х	-	х		+	<u> </u>	+		
17 Does the organization maintain adequa	ite books and records to s	upport the	1				. .						
final allocation of proceeds?			х		х		x			X			

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

Schedule K (Form 990) 2018

President and Fellows of Middlebury 03-0179298 Schedule K (Form 990) 2018 College Page 2 Part III Private Business Use Yes 1 Was the organization a partner in a partnership or a member of an LLC. Yes No No Yes No Yes No 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? 3a Are there any management or service contracts that may result in private business use of bond financed property? х x х b If "Yes" to line 3a does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond financed property? d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carned on by your organization, another section 501(c)(3) organization, or a state or local government .01 6 Total of lines 4 and 5 % % % 01 % Does the bond issue meet the private security or payment test? 8a Has there been a sale or disposition of any of the bond financed property to a non governmental person other than a 501(c)(3) organization since the bonds were issued? b If "Yes" to line 8a, enter the percentage of bond financed property sold or disposed % % % c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141 12 and 1 145 2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141 12 and 1 145-2? Part IV Arbitrage 1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Yes No Yes No Yes No Yes No Penalty in Lieu of Arbitrage Rebate? X х Х х 2 If "No" to line 1, did the following apply? Х х х a Rebate not due yet? b Exception to rebate? х х c No rebate due? If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed 3 Is the bond issue a vanable rate issue? х

832122 11-01-18

Schedule K (Form 990) 2018

Schedule K (Form 990) 2018 College			03-01	79298				Page 3
Part IV Arbitrage (Continued)								
<u> </u>		A		В		C	1	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		х		x		х		х
b Name of provider								
c Term of hedge	1		1		1			
d Was the hedge superintegrated?					1			
e Was the hedge terminated?	1							
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		×		х		х
b Name of provider		•				•		
c Term of GIC	<u> </u>		1					
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		1	1	1	ì	1		
6 Were any gross proceeds invested beyond an available temporary period?		х		х		х		К
7 Has the organization established written procedures to monitor the requirements of						ĺ		
section 148?	х	İ	x		x		x	
Part V Procedures To Undertake Corrective Action						•		
		Α		В		c		
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary	-		,					
closing agreement program if self remediation isn't available under applicable						ļ		
regulations?	x		x		×		x	
Part VI Supplemental Information Provide additional information for responses to question	s on Schedu	le K See inst	ructions					
SCHEDULE K, PART I, BOND ISSUES								
Series 2012 A and B								
The Series 2012 Bond issuance was comprised of of Series A and Series			<u> </u>					
B. All information on the Form 8038 is consolidated. The figures in								
Column C refer to the consolidated figures for both Series 2012 A and								
В.	,							
		·						
(a) Issuer Name VEHBFA (Series 2012A)								
(f) Description of purpose advance refunding (Series 2002A)								
								_
(a) Issuer Name VEHBFA (Series 2012B)						•		
(f) Description of purpose advance refunding (Series 2002A)				-	· ·			
								
Series 2009, 2010, 2012 and 2016 - Part IV, Line 2c								
The bond proceeds for each bond issue were immediately expended to					-			
refund the previous bond issues. Consequently, no rebate calculation								
Was required.			-					
-								
								
832123 11 01 18						Sci	nedule K (For	m 990) 2018

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Inspection

ANTHE OF THE	e organization Pa	resident	and	Fellows of	Middl	ebury	7	<u>.</u>	Em	ployer	ident	ificati	on nu	mber	
		ollege								0179	298				
Part I	Excess Bene	fit Trans	acti	ons (section 50	01(c)(3), sect	ion 501(c)(4), and 50	1(c)(29) organizatioi	ns only	/)					
	Complete if the c	organization	ansv	wered "Yes" on	Form 9	990, Pa	art IV, line 25a or 25b	o, or Form 990-EZ, P	art V,	line 40)b				
1 ,			(b) F	Relationship bet	veen o	disqua	lified ,_	.\ D				(d)	(d) Correcte		
(a) Nan	ne of disqualified p	erson		person and or	ganıza	ation	100	e) Description of tran	isacuc)TI		Y	es	No	
							,								
2 Enter t	the amount of tax	ncurred by	the c	rganization man	agers	or disc	qualified persons dui	ring the year under							
section	n 4958	-			-					▶ \$					
3 Enter t	the amount of tax,	if any, on lir	ne 2,	above, reimburs	ed by	the or	ganization			▶ \$					
	•		ŕ	,	•		•								
Part II	Loans to and	l/or From	n Int	erested Per	sons						•				
	Complete if the c	organization	ansv	wered "Yes" on I	Form 9	990·FZ	, Part V, line 38a or F	Form 990. Part IV. lir	ne 26.	or if th	ne oraz	nızatı	on		
	reported an amou	-					, , , , , , , , , , , , , , , , , , , ,		,						
(a') Name of	(b) Relation	_	(c) Purpose	(d) Lo	an to or	(e) Original	(f) Balance due	(a) In	(h) Ap by bo	proved	(i) W	/ritten	
•	ested person	with organiz				n the zation?	principal amount	(., 50.0		ult?	comm	ard or uttee?	agree	ment?	
					То	From			Yes	1		No	Yes	No	
Ramaswa	amy	FMR Key		Mortgage	· · ·	X	67,671.	27,231.	1.00	х	Yes		X	'''	
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				<u> </u>		L		27,231,		L					
otal Part III	Grants or As	cictopoo	В.	nofiting Into	·ooto	d Da	▶ \$	27,231.	Щ.		L				
rait III				•											
	Complete if the o		T				·	1		— <u>-</u> -					
(a) Na	ame of interested p	erson		(b) Relationship			(c) Amount of assistance	(d) Type assistan			•) Purp		f	
				interested pers the organiza		ū	43313141100	433131411			•	2551510	11100		
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832131 10-25-18

53

2018.05051 President and Fellows of Mi MIDD_

SCHEDULE M (Form 990)

Noncash Contributions

Department of the Treasury

Name of the organization

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

Attach to Form 990.

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

Inspection

Employer identification number

President and Fellows of Middlebury College 03-0179298 Part I Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes 7 8 Intellectual property х 19 5,763,641,FMV 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 7,210,FMV 25 Other Miscellaneous 26 Other 27 Other Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a contributions? b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

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

Schedule M (Form 990) 2018

describe in Part II

Schedule M (Fe	orm 990) 2018 College	03-0179298	Page 2
Part II S	upplemental Information. Provide the information required by Part I, lines 30b, 3 reporting in Part I, column (b), the number of contributions, the number of items receive its part for any additional information	i2b, and 33, and whether the organd, or a combination of both. Also c	nization
Schedule M,	Part I, Column (b):		·
We are repo	rting the number of contributions based on the number of		
contributor	5.		
Schedule M,	Line 32b:		
Middlebury	will sell from time to time noncash items, other than		
securities,	at local auction houses.		
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			-
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832 142 10-18-18		Schedule M (For	m 990) 2018

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

President and Fellows of Middlebury

Employer identification number

College	03-01/9296
Form 990, Part III, Line 4d, Other Program Services:	
Auxiliary enterprises represent expenses of dormitories, and the	· · · · · · · · · · · · · · · · · · ·
expenses and revenue from recreational facilities and food services.	
Also included is the grant commitment to support the bridge for the	
Town of Middlebury.	
Expenses \$ 46,128,343. incl grants of \$ 600,000. Revenue \$ 12,621,857.	
Form 990, Part V, Line 4b, List of Foreign Countries:	
Germany, France, Russia, Spain,	···-
United Kingdom, Italy, Japan, Chile,	
Argentina, Austria, Cameroon	
Form 990, Part VI, Section A, line 1:	
Middlebury has an executive committee who has broad authority to act on	
behalf of the Board of Trustees. The executive committee is comprised of	
trustees who are currently serving on the governing Board of Trustees.	
Form 990, Part VI, Section B, line 11b:	
Management presents the Form 990 to the Audit Committee for a detailed	
review. Once the Audit Committee has completed their review, management	
provides the return to the full Board of Trustees. The full board receives	
the Form 990 before it is filed with the IRS. The Form 990 is posted in the	
electronic board book and trustees are notified when the return is	
available.	

Form 990, Part VI, Section B, Line 12c:

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

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization President and Fellows of Middlebury Employer identification number College 03-0179298 Middlebury has a written conflict of interest policy. Each member of the Board of Trustees or an Advisory Board is given the written policy and is requested to review and understand the terms of the policy and to immediately disclose any possible financial, personal, familial, or business relationship that may give rise to a conflict. Each Trustee completes an annual disclosure form. The disclosure forms are reviewed annually by Management and the Audit Committee Chair. Form 990, Part VI, Section B, Line 15: Middlebury has a formal compensation committee who reviews and recommends to the full board the compensation for the top management officials. The Compensation Committee ordinarily consists of the Chair, Vice Chair, and one Trustee appointed by the Chair. The Committee establishes goals for the President and the annual performance appraisal process. The Committee reviews and sets total compensation for the President of the Middlebury as well as reviews and comments on compensation and contracts for other senior officers of the Middlebury. The Committee is authorized to engage legal counsel and compensation consultants as appropriate. Form 990, Part VI, Section C, Line 19: Middlebury has made its annual audited financial statements available to the general public by posting the statements on the its website. Middlebury will also provide copies upon request and copies are available in the financial offices. The conflict of interest policy is also posted on the website. Middlebury's Form 990 is available through Guidestar.org.

N 60 W

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, Ilne 33, 34, 35b, 36, or 37 ► Attach to Form 990

2018 Open to Public Inspection

OMB No 1545-0047

Name of the organization

► Go to www irs gov/Form990 for instructions and the latest information President and Fellows of Middlebury

College

Employer identification number 03-0179298

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (d) (e) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state or Direct controlling Primary activity Total income End-of year assets entity foreign country)

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

(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	(f) Direct controlling entity	cont	g) 512(b)(13) trolled tity?
				501(c)(3))		Yes	No
Delineation Corporation - 23-7259519	To receive or purchase				President and		1
Controller's Office	real and personal property	Í	1		rellows of	ĺ	ſ
Middlebury, VT 05753	for the benefit of MC	Vermont	501(c)(2)		Middlebury	х	L
Green Mountain Higher Education Consortium -	Promoting the educational						
90-1113280, 120 Graham Way, Shelburne, VT	purpose and consolidating		1				
05482	services	Vermont	501(c)(3)	Line 10		ļ	х
	j					1	
				· · · -		<u> </u>	├
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For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 College

03-0179298

Page 2

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

organization to the particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular pa												
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(1)	(i)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end of year assets	Disproportionals allocations? Yes No		Code V UBI amount in box 20 of Schedule	Gene mana part	ral or aging ner?	Percentage ownership
		country)		sections 512-514)					K 1 (Form 1065)	Yes	Nο	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year

(a) Name address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end of year assets	(h) Percentage ownership	512(cont	(I) ection 2(b)(13) strolled ntily?	
		country)						Yes	No	
Charitable remainder trust (56) see Part VII note for Col C.F.G. Middlebury, VT 05753	Investment Support	VT		TRUST				x		
Charitable lead trust (2) see Part VII note	-									
for Col C.F.G. Middlebury, VT 05753	Investment Support	VT		TRUST				х		
Pooled income fund (1)	1			1						
Middlebury College	1							1		
Middlebury, VT 05753	Investment Support	VT		TRUST				х	<u> </u>	
Life income fund (1)										
Middlebury College]							•		
Middlebury, VT 05753	Investment Support	VT		TRUST				х	<u> </u>	
								1		
]									

61

Schedule R (Form 990) 2018

832162 10-02-18

President and Fellows of Middlebury Schedule R (Form 990) 2018 College 03-0179298 Page 3 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? х a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a **b** Gift, grant, or capital contribution to related organization(s) 1b х х c Gift, grant, or capital contribution from related organization(s) 1d d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) 1e f Dividends from related organization(s) x g Sale of assets to related organization(s) 1g x h Purchase of assets from related organization(s) 1h Exchange of assets with related organization(s) 1 Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) 1k I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) 1m n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n o Sharing of paid employees with related organization(s) 10 p Reimbursement paid to related organization(s) for expenses 1p Х q Reimbursement paid by related organization(s) for expenses 1q r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Name of related organization (c) Amount involved (d)
Method of determining amount involved type (a s) 898,745.PMV (1) Charitable Remainder Trusts (4) (2) Pooled Income Funds (5) 100,261.PMV 25,651,660.FMV (3) Delineation Corporation D 48,040 PMV (4) Delineation Corporation

o

62

(5) Delineation Corporation

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94,472.FMV

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 College

03-0179298

Page 4

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

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

(a) Name, address, and EIN	(b) Pnmary activity	(c) Legal domicile	(d) Predominant income	(c	9) (8 880	(f) Share of	(g) Share of	(h Dispro)	(ı) Code V-UBI	(j Gene) alor F	(k) Percentage
of entity	,,	(state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	501 ord Yes	(3) No	total income	end of year assets	allocat Yes	ons?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partr Yes	ging ier?	ownership
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Schedule R (Form 990) 2018

63

832164 10-02-18

Schedule R (Form 990) 2018 College	03-0179298	Page 5
Part VII Supplemental Information.		
Provide additional information for responses to questions on Schedule R. See instructions		
Part II, Identification of Related Tax-Exempt Organizations:		
Name of Related Organization:	`	
, ,		•
Delineation Corporation		
Direct Controlling Entity: President and Fellows of Middlebury College	<u>"</u>	
Schedule R; Part IV; Column C		
Legal Domicile:		
• • • • • • • • • • • • • • • • • • • •		
Charitable Remainder Trusts include Vermont and Massachusetts		
Charitable Lead Trusts include Vermont and District of Columbia		
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