DLN: 93493136024080 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable WASHINGTON AND LEE UNIVERSITY ☐ Address change 54-0505977 ☐ Name change % DEBORAH Z CAYLOR ☐ Initial return Doing business as ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite 204 W WASHINGTON STREET ☐ Application pending (540) 458-8400 City or town, state or province, country, and ZIP or foreign postal code LEXINGTON, VA  $\,$  24450  $\,$ G Gross receipts \$ 445,417,599 Name and address of principal officer H(a) Is this a group return for WILLIAM C DUDLEY □Yes ☑No subordinates? 204 W WASHINGTON STREET H(b) Are all subordinates LEXINGTON, VA 24450 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) ☐ 501(c)( ) **◄** (insert no ) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ **Website:** ▶ www wlu edu L Year of formation 1749 M State of legal domicile VA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities WASHINGTON AND LEE PROVIDES A LIBERAL ARTS COLLEGE EDUCATION TO ALMOST COLLEGE EDUCATION TO OVER 1,800 UNDERGRADUATE STUDENTS & OFFERS JD & LLM STUDIES TO OVER 390 LAW STUDENTS EACH YEAR Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 33 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 2,554 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 1,800 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a -1,954,490 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 73,001 **Prior Year Current Year** 36,167,038 28,847,238 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 133,266,321 137,585,778 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . 53,709,326 116,698,175 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 27,449 32,094 223,174,779 283,158,640 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 49,954,344 54,484,704 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 101,846,611 107,040,126 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶6,106,245 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 71,861,888 73,695,680 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 223,662,843 235,220,510 47,938,130 19 Revenue less expenses Subtract line 18 from line 12 . -488,064 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 2,074,715,366 2,161,435,497 278,695,277 21 Total liabilities (Part X, line 26) . 259,821,923 22 Net assets or fund balances Subtract line 21 from line 20 . 1,814,893,443 1,882,740,220 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-14 Signature of officer Sign Here STEVEN G MCALLISTER VP FOR FIN AND TREASURE Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | If 2020-05-11 P01205643 Paid self-employed Firm's name ► KPMG LLP Firm's EIN Preparer Use Only Firm's address ▶ 8350 Broad Street Suite 900 Phone no (703) 286-8000 McLean, VA 22102 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)						Page <b>2</b>		
Pa	rt III State	ement of Program Servi	ce Accomplis	hments					
	Check	if Schedule O contains a resp	onse or note to a	any line in this Part III .			. 🗸		
1		be the organization's mission							
2	Did the organ	nization undertake any signific	ant program ser	vices during the year wh	nich were not listed on		_		
	the prior Forr	n 990 or 990-EZ?				☐ Yes 🖸	✓ No		
	If "Yes," desc	ribe these new services on Sc	hedule O						
3	Did the organ	nization cease conducting, or r	make significant	changes in how it condu	icts, any program				
	services? .					☐ Yes	✓ No		
	If "Yes," desc	ribe these changes on Schedu	ıle O						
4	Section 501(d	organization's program servic c)(3) and 501(c)(4) organizati d revenue, if any, for each pro	ons are required	to report the amount o	largest program services, as meas f grants and allocations to others,	ured by expense the total	es		
4a	(Code	611,310 ) (Expenses \$	168,585,634	ıncludıng grants of \$	54,484,704 ) (Revenue \$	137,585,778 )			
	See Additional	Data							
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)			
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)			
4d	Other progra	m services (Describe in Sched	lule O )						
тu	(Expenses \$	,	cluding grants of	\$	) (Revenue \$	)			
4e		am service expenses >	168,585,6		, , , , , , , , , , , , , , , , , , , ,	,			
TC	. sta. p. sgrt	1100 OAPOII000 P	100,505,0	<del>-</del> ·					

Par	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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🗳	2	Yes	
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		No
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4	Yes	
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		No
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		No
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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	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	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 3	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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		No
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	Yes	
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 (see instructions)	17		No
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	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

	990 (2018)			Page 4
Pai	Checklist of Required Schedules (continued)			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	<b>Yes</b> Yes	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		No
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	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· ;		
1 >	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   4,042		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Yes	

If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7c Nο d If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d |

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h

No

No

12a

14a

14b

15

No

No

Form 990 (2018)

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a 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 Section 501(c)(7) organizations. Enter a 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

11a

11b

13b

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

**b** Gross income from other sources (Do not net amounts due or paid to other sources 

which the organization is licensed to issue qualified health plans . . . .

Note. See the instructions for additional information the organization must report on Schedule O 13a Enter the amount of reserves the organization is required to maintain by the states in

13c 14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? 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 investment income?

Form 990 (2018) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 34 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 33 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Yes Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Nο of officers, directors or trustees, or key employees to a management company or other person? . 4 Nο Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Nο Did the organization have members or stockholders? . . . . . . . . 6 Nο 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7a No Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b No Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . . . . . . 8a Yes 8b Yes Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . . . No Se 10a b 11a b 12a 13

ection B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
		Yes	No							
Did the organization have local chapters, branches, or affiliates?	10a		No							
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes								
Describe in Schedule O the process, if any, used by the organization to review this Form 990										
Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes								
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes								
Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes								
Did the organization have a written whistleblower policy?	13	Yes								
Did the organization have a written document retention and destruction policy?	14	Yes								
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?										
The organization's CEO, Executive Director, or top management official	15a	Yes								
Other officers or key employees of the organization	15b		No							
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)										
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No							
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt										
status with respect to such arrangements?	16b									
ection C. Disclosure										
List the States with which a copy of this Form 990 is required to be filed▶ VA										
Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply										
Own website Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)										
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										
State the name, address, and telephone number of the person who possesses the organization's books and records ►DEBORAH Z CAYLOR 204 W WASHINGTON STREET LEXINGTON, VA 244502116 (540) 458-8400										

16a b Se 17 19 20

Part VII

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

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
  - f 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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

compensated employees, and former such persons

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

(A)

(B)

(C)

(D)

(E)

(F)

(F)

Average

hours per

than one box, unless person

week (list

is both an officer and a

from the

compensation

from related

compensation

from related

Name and Title	hours per week (list any hours for related				on	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099-	amount of other compensation from the organization and		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2,1005-11150)	MISC)	related organizations
See Additional Data Table										
										Form <b>990</b> (2018)

6110 STONERIDGE MALL ROAD PLEASANTON, CA 94588

compensation from the organization ▶ 43

(B)

Part VII

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

Page 8

Name and Title	Average hours per week (list any hours for related	than d	ıs both an officer and a director/trustee) ord						table nsation the tion (W- -MISC)	Reportable compensatio from related organizations ( 2/1099-MISO	n I (W-	Estimated amount of other compensation from the organization and		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-1130	-)	rela organi:	ited	
See Additional Data Table														
											$\dashv$			
						-								
							_				_			
1b Sub-Total	 art VII <b>, Section</b>					<b>&gt;</b>					+			
d Total (add lines 1b and 1c)			<u></u>			<b>▶</b>		4,04	17,795		0		714,538	
2 Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rec	eived more	e than \$1	00,000				
											_	Yes	No	
3 Did the organization list any former line 1a? If "Yes," complete Schedule 3										employee on	3	Yes		
4 For any individual listed on line 1a, is										n the	-	165		
organization and related organization	s greater than \$	150,00	0? <i>If</i>	"Yes	," C	omple	te Sc	chedule J fo	or such					
5 Did any person listed on line 1a recei					•						4	Yes	+	
services rendered to the organization								_			5	.	No	
Section B. Independent Contract	ors													
Complete this table for your five high from the organization Report compet											mpe	nsation	_	
Name a	(A) and business addre								Desc	(B) ription of services			C) ensation	
THE WHITING-TURNER CONTRACTING CO, 3000 E JOPPA ROAD BALTIMORE, MD 21286								С	ONSTRUC				6,413,463	
MAKENA CAPITAL LP, 2755 SAND HILL ROAD SUITE 200 MENLO PARK, CA 94025								II	NVESTMEN	T MGMT			5,776,156	
KJELLSTROM AND LEE INC, 1607 OWNBY LANE RICHMOND, VA 23220								C	ONSTRUC	TION			4,402,070	
INCLINE ALCHEMY, 12647 ALCOSTA BLVD SUITE 240 SAN RAMON, CA 94583								c	ONSULTIN	G			1,138,025	
WORKDAY INC, 6110 STONERIDGE MALL ROAD								S	OFTWARE	DEVELOPMENT			776,985	

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

(C)

(D)

(E)

	Check if Schedul	e O contains	a respo	nse or note to any	line in t	his Part VIII		<u></u>	<u> </u>	<u> U</u>
						( <b>A)</b> revenue	Rela ex fur	(B) ited or empt iction	(C) Unrelated business revenue	Revenue excluded from tax under sections
	1a Federated campaig	nc	4-				rev	renue		512 - 514
रु इ			1a							
an	<b>b</b> Membership dues		1b							
جَ ق	<b>c</b> Fundraising events		1c							
fş, Z	<b>d</b> Related organizatio	ns	1d							
ತ :ੂ	e Government grants (co	ontributions)	1e	980,849						
Contributions, Gifts, Grants and Other Similar Amounts	<b>f</b> All other contributions and similar amounts n above		1f	27,866,389						
ntribu d Oth	g Noncash contribution	ons included	7,6	<u>01,476</u>						
Ē	h Total. Add lines 1a	-1f		▶		28,847,238				
				Business						
Service Revenue	2a TUITION AND FEES				611710	112,	270,630	111,748,	215	
۱۹۸۰	<b>b</b> AUXILIARY SERVICES				611710	24,	355,006	24,355,	006 522,4	115
oŽ 1.	C OTHER MISC INCOME				611710		960,142	905,	583 54,5	559
VI C	C OTHER MISC INCOME				611710			,		
Şe	d		_							
Ë	e ———		_							
Program	<b>f</b> All other program se	rvice revenue								
Ĕ	<b>gTotal.</b> Add lines 2a-2	9f		<b>1</b> 37,	585,778					
	3 Investment income (i	ncluding divid	ends, ır	·		836,57	/2			836,572
	4 Income from investme	ent of tax-exe	mpt bo	nd proceeds	•		0			
	<b>5</b> Royalties			•	•	27,44	.9			27,449
		(ı) Rea		(II) Personal						
	<b>6a</b> Gross rents									
	<b>b</b> Less rental expenses				-					
	c Rental income or (loss)		0		0					
	<b>d</b> Net rental income o	r (loss)		• • • •			0			
		(ı) Securit	ies	(II) Other						
	7a Gross amount from sales of assets other than inventory	278,1	20,562							
	<b>b</b> Less cost or other basis and sales expenses	162,2	58,959							
	<b>C</b> Gain or (loss)	115,8	61,603							
	<b>d</b> Net gaın or (loss) .			<b>•</b>		115,861,60	13		-2,531,464	118,393,067
Other Revenue	8a Gross income from f (not including \$ contributions reports	ed on line 1c)	of							
eVe	See Part IV, line 18		a	0	_					
ς.	<b>b</b> Less direct expense <b>c</b> Net income or (loss)		b L		<u>'</u>		0			
hе	9a Gross income from g			ents >			1			
ō	See Part IV, line 19									
			a	0						
	<b>b</b> Less direct expense		b	0						
	c Net income or (loss)		activitie	es · · •			0			
	10aGross sales of invent returns and allowand		a	O						
	<b>b</b> Less cost of goods s	sold	ь	C						
	<b>c</b> Net income or (loss)	from sales of	invento	ory ▶	_		0			
	Miscellaneous	Revenue		Business Code						
	11a									
	b		$\neg$							
	с		$\longrightarrow$		+		+			
	<b>d</b> All other revenue .									
	<b>e Total.</b> Add lines 11a	-11d					0			
	<b>12 Total revenue.</b> See	Instructions								
						283,158,64	-0	137,008,804	-1,954,490	119,257,088 Form <b>990</b> (2018)

Partix	Statement of Functional Expenses
Costion FO	1(a)(3) and $E01(a)(4)$ organizations must som

15 Royalties .

**16** Occupancy

**20** Interest . . .

23 Insurance .

18 Payments of travel or entertainment expenses for any

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O ) a COST OF SALES FOR AUXILIARY

**b** POSTAGE AND PRINTING

d ALL OTHER EXPENSES

e All other expenses

c DUES AND SUBSCRIPTIONS

**17** Travel .

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all $cc$	-	inizations must comp	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	647,179	647,179		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	50,962,809	50,962,809		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	2,874,716	2,874,716		
4 Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	4,010,548	1,236,274	2,342,826	431,448
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	74,251,384	52,427,162	18,385,812	3,438,410
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,484,474	4,631,341	1,533,393	319,740
9 Other employee benefits	16,953,861	11,006,575	5,389,255	558,031
<b>10</b> Payroll taxes	5,339,859	3,660,916	1,421,056	257,887
11 Fees for services (non-employees)				_
a Management	896,017	609,487	286,530	
<b>b</b> Legal	254,788	173,311	81,477	
c Accounting	294,906	200,600	94,306	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	7,062,750	4,804,212	2,258,538	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,446,765	749,653	462,649	234,463
12 Advertising and promotion	138,526	63,940	74,413	173
13 Office expenses	3,022,553	2,028,145	942,792	51,616
14 Information technology	4,312,747	3,086,186	1,220,038	6,523

6,139,745

5,326,896

3,719,279

8,676,407

1,314,289

5,314,543

1,793,136

2,008,386

3,243,166

235,220,510

0

0 18,730,781 2,325,663

4,018,656

2,185,605

3,709,033

11,042,339

264,480

2,780

451,902

1,663,655

3,759,015

168,585,634

3,776,484

1,371,654

4,967,374

7,688,442

1,049,809

5,311,763

1,104,861

321,949

-535,369

60,528,631

978,579

37,598

329,661

162,020

236,373

22,782

19,520

6,106,245

Form 990 (2018)

Page **11** 

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278.695.277

374.212.370

449,900,728 1,058,627,122

1,882,740,220

2,161,435,497

Form **990** (2018)

Form 990 (2018)

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Net Assets or Fund Balances

		Check if Schedule O contains a response or not	e to an	ny line in this Part IX .			<u> ⊔</u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		·	27,662	1	18,577
	2	Savings and temporary cash investments .			15,634,650	2	18,456,610
	3	Pledges and grants receivable, net	rants receivable, net			3	41,656,795
	4	Accounts receivable, net	ounts receivable, net				3,083,815
	6	Loans and other receivables from current and for trustees, key employees, and highest compensations and other receivables from other disqualities section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations.	rsons (as defined under s(c)(3)(B), and of section 501(c)(9) structions) Complete	959,607		558,677	
ssets	7	Part II of Schedule L			56,113,626	7	56,074,133
88	8	Inventories for sale or use			1,672,068	8	1,615,537
Ø	9	Prepaid expenses and deferred charges			6,375,582	9	4,669,375
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	571,294,862			
	ь	Less accumulated depreciation	<b>10</b> b	237,657,009	320,591,295	10c	333,637,853
	مدا				004 000 007	4.4	407.040.704

Assets	7	Part II of Schedule L		56,113,626	7	56,074,133		
88	8	Inventories for sale or use	1,672,068	8	1,615,537			
4	9	Prepaid expenses and deferred charges			6,375,582	9	4,669,375	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	571,294,862				
	b	Less accumulated depreciation	<b>10</b> b	237,657,009	320,591,295	10c	333,637,853	
	11	Investments—publicly traded securities .	vestments—publicly traded securities .					
	12	Investments—other securities See Part IV, line	11 .		1,383,528,546	12	1,492,895,488	
	13	Investments—program-related See Part IV, line	14,065,378	13	14,875,061			
	14	Intangible assets			0	14	0	
	15	Other assets See Part IV, line 11			2,477,349	15	5,949,792	
	16	Total assets.Add lines 1 through 15 (must equ	2,074,715,366	16	2,161,435,497			
	17	Accounts payable and accrued expenses			16,287,501	17	17,633,402	
	18	Grants payable			0	18	0	
	10	Deferred revenue			1 478 144	10	1 554 658	

		investments—other securities. See Fait IV, line II.	1,000,020,040	+4	1,70
	13	Investments—program-related See Part IV, line 11	14,065,378	13	1
	14	Intangible assets	0	14	
	15	Other assets See Part IV, line 11	2,477,349	15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	2,074,715,366	16	2,16
	17	Accounts payable and accrued expenses	16,287,501	17	1
	18	Grants payable	0	18	
	19	Deferred revenue	1,478,144	19	
	20	Tax-exempt bond liabilities	186,301,327	20	20
S	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	
iabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge		persons Complete Part II of Schedule L	0	22	

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	2,477,349	15	5,949,792
	16	Total assets.Add lines 1 through 15 (must equal line 34)	2,074,715,366	16	2,161,435,497
	17	Accounts payable and accrued expenses	16,287,501	17	17,633,402
	18	Grants payable	0	18	0
	19	Deferred revenue	1,478,144	19	1,554,658
	20	Tax-exempt bond liabilities	186,301,327	20	203,765,983
ý	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
abilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge		persons Complete Part II of Schedule L	0	22	0

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55,754,951

259.821.923

375.409.017

455,261,872

984,222,554

1,814,893,443

2,074,715,366

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Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b Yes

### Additional Data

Software Version:

**EIN:** 54-0505977 Name: WASHINGTON AND LEE UNIVERSITY

Form 990 (2018)

Form 990, Part III, Line 4a:

PROVIDING A LIBERAL ARTS COLLEGE EDUCATION - SEE SCHEDULE O

Software ID:

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

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
J DONALD CHILDRESS RECTOR	6 0	×						0	0	0
WANGDALI C BACDAYAN TRUSTEE	4 0	×						0	0	0
JAMES L BALDWIN TRUSTEE	4 0	×						0	0	0
DANA J BOLDEN TRUSTEE	4 0	×						0	0	0
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TRUSTEE
DANA J BOLDEN
TRUSTEE
SCOTT B BOYD
TRUSTEE

JOHN P CASE III

MARY C CHOKSI

ROGERS L CRAIN

BLAIR H DAVIS

.......

J LAWRENCE CONNOLLY

TRUSTEE

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TRUSTEE

TRUSTEE

and Independent Contractors

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

	any hours	and	a dır	ecto	r/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JAMES E DUNN JR TRUSTEE	4 0	Х						0	0	0	
C CHRISTOPHER DYSON TRUSTEE	4 0	Х						0	0	0	
DWIGHT H EMANUELSON JR TRUSTEE	4 0	Х						0	0	0	

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C CHRISTOPHER DYSON	4 0
TRUSTEE	0 0
DWIGHT H EMANUELSON JR	4 0
TRUSTEE	0 0
CLIFFORD K HOLEKAMP	4 0

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TRUSTEE

TRUSTEE

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TRUSTEE

**TRUSTEE** 

TRUSTEE

CLAY T JACKSON

DAVID A LEHMAN

JOSEPH W LUTER IV

MICHAEL R MCALEVEY

MARSHALL B MILLER JR

GEORGE D JOHNSON III

and Independent Contractors

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

	any hours				ustee)		organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
B CRAIG OWENS TRUSTEE	4 0	Х					o	0	0
WILLIAM B PAYNE TRUSTEE	4 0	х					o	0	0
LAURIE A RACHFORD TRUSTEE	4 0	Х					0	0	0
BRODIE GREGORY RIORDAN TRUSTEE	4 0	X					0	0	0
	4 0							-	

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TRUSTEE
BRODIE GREGORY RIORDAN
TRUSTEE
ELLEN F ROGOWSKI
TRUSTEE

HELEN H SANDERS

JAMES R SMALL ......

TODD L SUTHERLAND

ROWAN GP TAYLOR

LIZANNE THOMAS

TRUSTEE

**TRUSTEE** 

TRUSTEE

TRUSTEE

TRUSTEE

and Independent Contractors

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

	famous lateral	L	u un	CCLC	217 61	usicc)		(14, 2/1000	(14/ 2/1000	evannization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
WILLIAM M TOLES TRUSTEE	4 0	×						0	0	0	
ANDREA K WAHLQUIST TRUSTEE	4 0	×						0	0	0	
CHRISTOPHER H WILLIAMS TRUSTEE	4 0	×						0	0	0	
WILLIAM C DUDLEY PRESIDENT AND TRUSTEE	40 0	×		х				531,640	0	143,338	

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182,763

332,603

282,945

380,542

359,964

261,827

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32,958

53,489

110,133

44,897

44,897

75,910

CHRISTOPHER H WILLIAMS	4 0	×				
TRUSTEE	0 0	^				
WILLIAM C DUDLEY	40 0	×		х		
PRESIDENT AND TRUSTEE	0 0	_ ^		^		
JAMES D FARRAR JR	40 0					
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and Independent Contractors

SECRETARY

**TREASURER** 

**PROVOST** 

DEAN

DEAN

MARC C CONNER

**DENNIS W CROSS** 

VICE PRESIDENT

BRANT J HELLWIG

ROBERT D STRAUGHAN

STEVEN G MCALLISTER

..........

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

and Independent Contractors

LAW PROFESSOR

ASSOCIATE DEAN

ELIZABETH G OLIVER

LEANNE M SHANK END 6302018

FORMER GENERAL COUNSEL

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

	any hours	and	a dır	ecto	r/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHANNA E BOND	40 0					x		250,546	0	42,107	
DEAN	0 0							230,310	•	12,107	
MARK A DRUMBL	40 0					×		268 192	0	27 600	

JOHANNA E BOND	40 0			<sub>v</sub>	250,546	0	
DEAN	0 0			^	230,340		
MARK A DRUMBL	40 0						
LAW PROFESSOR				×	268,192	0	
JAMES E MOLITERNO	40 0			v	286,200	0	
LAW PROFESSOR				l ^	200,200	U	

MARK A DRUMBL	40 0			_	268.192	0	
LAW PROFESSOR	0 0			^	200,192	0	
JAMES E MOLITERNO	40 0			Y	286,200	0	
LAW PROFESSOR	0 0			^	280,200	0	
BRIAN C MURCHISON	40 0						

0.0 40 0

0 0

	0.0						
MARK A DRUMBL	40 0	l .		×	268,192	0	
LAW PROFESSOR	0 0				200,132	•	
JAMES E MOLITERNO	40 0	l .		x	286,200	0	

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27,600

42,274

40,991

36.442

19,502

0

290,763

255,411

364,399

efil	e GK	APHIC prii	nt - DO NO	PROCESS	As Filed Data -			DLN: 9	3493136024080
SCHEDULE A (Form 990 or Cor 990EZ)			Com	plete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe  Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 0-EZ.	a section	2018
terns	1 Rever	f the Treasury		► Go to	www.irs.gov/Form	<u>990</u> for the late	st information	•	Open to Public Inspection
lam	e of tl	<b>he organiza</b> N AND LEE UNI	<b>tion</b> VERSITY					Employer identific	cation number
Dа	rt I	Peason	for Public C	harity Stat	<b>us</b> (All organization	s must comple	to this part ) 9	54-0505977	
					e it is (For lines 1 thro			dee man decions.	
1		A church, c	onvention of o	hurches, or as	ssociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).	
2	<b>✓</b>	A school de	scribed in <b>sec</b>	tion 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		A hospital o	or a cooperativ	e hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4		A medical r name, city,		iization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	inter the hospital's
5		-	ation operated (iv). (Complet		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	bed in <b>section 170</b>
6		,			governmental unit de				
7		section 17	'0(b)(1)(A)(	<b>vi).</b> (Complete				nit or from the gener	al public described in
8		A communi	ty trust descri	bed in <b>sectio</b> i	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				lege or university or a
0		from activit	cies related to cincome and u	its exempt fur inrelated busir	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III )	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
1					d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
2		more public	cly supported	organizātions (	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See section 509(a	
a		<b>Type I.</b> A so	supporting org n(s) the powe	anızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	nt of the supp		pervised or controlled in ation vested in the sare and C.				
С					supporting organizatio				ated with, its
d		Type III n	on-functiona integrated T	<b>ally integrate</b> he organizatio	ions) You must com d. A supporting organ n generally must satis rt IV, Sections A and	Ization operated fy a distribution	ın connection wi requirement and	th its supported orga	
e		Check this	box if the orga	nızatıon recei	ved a written determing integrated supporting	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported		zgracea supporting	o.gamzadon			
g	Provi	de the follow	ing informatio	n about the su	pported organization(				_
organization organization in your governing document? monetary sur		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)						
						Yes	No		
ota	1								
		work Reduc	tion Act Noti	ce, see the I	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 2018

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 64,119,681 19,777,347 32,919,342 36,167,038 28,847,238 181,830,646 membership fees received (Do not include any "unusual grant") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 64,119,681 19,777,347 32,919,342 36,167,038 28,847,238 181,830,646 The portion of total contributions by each person (other than a governmental unit or publicly 69,610,493 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 112,220,153

from line 4 Section B. Total Support Calendar year (a)2014 **(b)**2015 (c)2016 (d)2017 (e)2018 (f)Total (or fiscal year beginning in) ▶ 19,777,347 Amounts from line 4 64,119,681 32,919,342 36,167,038 28,847,238 Gross income from interest. dividends, payments received on 755,380 600,755 864,021 securities loans, rents, royalties 1,036,258 326,178 and income from similar sources Net income from unrelated business activities, whether or not 2,780,802 2,146,560 4,171,323 74,001 the business is regularly carried on Other income Do not include gain 10 or loss from the sale of capital assets (Explain in Part VI ) **Total support.** Add lines 7 through 11

181,830,646 3,582,592 9,172,686 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

194,585,924 14 57 671 % 15 63 460 % ▶Ⅵ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this ▶□ box and stop here. The organization qualifies as a publicly supported organization is 10% or 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

Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2017 Schedule A, Part II, line 14 16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 ▶□ organization h 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and 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

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.	)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
36	ection B. Total Support  Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(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						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI )						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and <b>stop here</b>	,	, ,	, ,	,	( ), ( )	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

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

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (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 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

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

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

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

provide detail in Part VI.

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

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

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

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

9с

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

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

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

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5	
Pa	rt IV Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the				
	governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c			
S	ection B. Type I Supporting Organizations				
			Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting				
	organization				
S	ection C. Type II Supporting Organizations				
			Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of				
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
_	<u> </u>				
	ection D. All Type III Supporting Organizations		Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140	
		1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3			
S	ection E. Type III Functionally-Integrated Supporting Organizations		l		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)			
	The organization satisfied the Activities Test Complete line 2 below	•			
	b				
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)		
2	Activities Test Answer (a) and (b) below.	į	Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement				
,		2b			
3	Parent of Supported Organizations Answer (a) and (b) below.	_			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI.</b>	3a			
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3h			

Sched	lule A (Form 990 or 990-EZ) 2018			Page <b>6</b>
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> 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, 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		
	Section 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

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

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
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

## **Additional Data**

### Software ID: Software Version:

**EIN:** 54-0505977

Name: WASHINGTON AND LEE UNIVERSITY

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

Facts And Circumstances Test

SCHEDULE C

## Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493136024080

☐ Yes

□ No

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Was a correction made?

If "Yes." describe in Part IV

(Form 990 or 990-

EZ)

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

(Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** WASHINGTON AND LEE UNIVERSITY 54-0505977 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

ar	t I-C	Complete if the organization is exempt under section 501(c), except section 501	(c)(3)	
L	Enter	the amount directly expended by the filing organization for section 527 exempt function activities	<b>&gt;</b>	\$
2		the amount of the filing organization's funds contributed to other organizations for section 527 exempt on activities	<b>&gt;</b>	\$

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? ☐ Yes

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received filing organization's funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2 5

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

2a Total lobbying expenditures

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

Schedule C (Form 990 or 990-EZ) 2018

	and "War" manages on lines to the suite to be a	do un Doub TI/ o data dad dagamento o of the latterns	(a	)	(b	)
-or e activi	each "Yes" response on lines 1a through 1: below, providuty	ie in Part IV a detailed description of the lobbying	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to including any attempt to influence public opinion on a					
а	Volunteers?			No		
b	Paid staff or management (include compensation in ex	xpenses reported on lines 1c through 1i)?		No	1	
c	Media advertisements?		İ	No	1	
d	Mailings to members, legislators, or the public?			No		
е	Publications, or published or broadcast statements?		Ī	No		
f	Grants to other organizations for lobbying purposes?		Ī	No		
g	Direct contact with legislators, their staffs, governmen	nt officials, or a legislative body?		No		
h	Rallies, demonstrations, seminars, conventions, speed	:hes, lectures, or any similar means?	Ī	No		
i	Other activities?		Yes			207,17
j	Total Add lines 1c through 1i					207,17
2a	Did the activities in line 1 cause the organization to be	e not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under s	section 4912				
c	If "Yes," enter the amount of any tax incurred by orga	anization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, or	did it file Form 4720 for this year?				
Par	rt III-A Complete if the organization is executed 501(c)(6).	empt under section 501(c)(4), section 501(c)	(5), oı	r sectio	Yes	No
1	Were substantially all (90% or more) dues received n	ondeductible by members?		Γ:	1	+***
- 2	Did the organization make only in-house lobbying exp	•			2	+-
3	Did the organization agree to carry over lobbying and	• •			3	+-
Par 1		empt under section 501(c)(4), section 501(c) lines 1 and 2, are answered "No" OR (b) Part	III-A,			c)(6) ——
1 2	Section 162(e) nondeductible lobbying and political ex		1			
_	expenses for which the section 527(f) tax was p					
а	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 exceed the organization agree to carryover to the reasonable expenditure next year?	ds the amount on line 3, what portion of the excess does estimate of nondeductible lobbying and political	4			
5	Taxable amount of lobbying and political expenditures	(see instructions)	5			
	art IV Supplemental Information	,				
Pro		-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), for any additional information	Part II-	A, lines 1	and 2 (s	ee
	Return Reference	Explanation				
SCHE	EDULE C, PART II-B, LINE 11 THE ORGANIZATION NACUBO (NATIONAL	N PAYS MEMBERSHIP DUES TO MEMBER EDUCATIONAL O ASSOCIATION OF COLLEGES AND UNIVERSITY BUSINES ATION OF INDEPENDENT COLLEGES AND LINEYERSTIES	SS OFFI	CERS), N.	AICU	1G

(NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES), CICV (COUNCIL OF INDEPENDENT COLLEGES IN VIRGINIA), AND ASC (ASSOCIATED COLLEGES OF THE SOUTH) THAT MAY ENGAGE IN LOBBYING ACTIVITIES THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO DE

MINIMIS LOBBYING ACTIVITIES

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

# **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 the latest information.

Open to Public

DLN: 93493136024080 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** WASHINGTON AND LEE UNIVERSITY 54-0505977 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☑ Protection of natural habitat Preservation of a certified historic structure ✓ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b 69 00 Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

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

Schedule D (Form 990) 2018

Cat No 52283D

Par	t III	Organizations Ma	aintaining Collections o	f Art, Histori	cal T	reası	ires, o	r Other	Similar As	sets (co	ntınued)	
3		the organization's acquicheck all that apply)	uisition, accession, and other	records, check	any of	the fo	llowing t	hat are a	significant us	se of its c	ollection	
а	<b>✓</b>	Public exhibition		d	✓	Loan	or exch	ange prog	ırams			
b	<b>✓</b>	Scholarly research		е	<b>✓</b>	Othe	r TEACH	HING				
c	<b>✓</b>	Preservation for future	e generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII											
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No											
Pa	rt IV		odial Arrangements. ganization answered "Yes	" on Form 990	, Part	IV, lı	ne 9, o	r reporte	ed an amoui	nt on Fo	rm 990,	Part
1a		e organization an agent ded on Form 990, Part X	, trustee, custodian or other </th <th>intermediary for</th> <th>contri</th> <th>bution</th> <th>s or oth</th> <th>er assets i</th> <th>not</th> <th>☐ Yes</th> <th>□ <b>N</b></th> <th>o</th>	intermediary for	contri	bution	s or oth	er assets i	not	☐ Yes	□ <b>N</b>	o
ь	If "Ye	es," explain the arrange	ment in Part XIII and comple	ete the following	table				An	nount		_
c	Begin	ining balance	'	-				1c				_
d	Addıtı	ions during the year						<b>1</b> d				_
е	Distri	butions during the year	-					1e				_
f	Endın	g balance						1f				_
2a	Did th	ne organization include	an amount on Form 990, Par	t X, line 21, for	escrov	or cu	istodial a	ccount lia	bility?	☐ Yes	<b>☑</b> N	o
b	If "Ye	s," explain the arrange	ment in Part XIII Check here	e if the explanat	on has	been	provide	d in Part )	KIII			
Pa	rt V	Endowment Fund	ds. Complete if the organ	ızatıon answei	ed "Y	es" oı	n Form	990, Par	t IV, line 10	).		
			(a)Currer		rıor yea	-		ears back	(d)Three year		<b>e)</b> Four yea	
	_	ing of year balance .	<u> </u>		069,842	_		95,373,361	1,047,7			155,485
		outions		,640,954	15,238			15,514,799		44,572		587,468
		estment earnings, gair	13, 4114 103363	,843,425	94,504			08,933,011	· ·	33,971		862,611
		or scholarships	- <u> </u>	,682,735	25,90	1,000	-	25,603,498	24,9	98,305	22,	693,864
е		expenditures for facilitie ograms	24	,181,390	23,865			23,275,461	·	64,842		732,434
f	Admını	strative expenses .		,286,594		L,564		1,110,020		50,975	· ·	392,384
g	End of	year balance	1,142	,350,304 1,	129,016	5,644	1,06	59,832,192	995,3	83,361	1,047,	786,882
2		•	ntage of the current year end	l balance (line 1	g, colu	mn (a	)) held a	S				
а		d designated or quasi-e										
b		anent endowment >	45 000 %									
С		orarily restricted endov		201								
3а	Are th	<u>-</u>	, 2b, and 2c should equal 100 not in the possession of the		t are h	eld an	d admın	ıstered foı	r the		Yes	No
	_	nrelated organizations								3a(		110
	(ii) re	elated organizations .								3a(i		No
b	If "Ye	es" on 3a(II), are the rel	ated organizations listed as r	equired on Sche	dule R	? .				3 b	,	
4	Descr		ended uses of the organizatio	n's endowment	unds							_ <del>-</del>
Pa	rt VI	Land, Buildings,	<b>and Equipment.</b> ganization answered "Yes	" on Earn 000	Davi	T\/ 1.	no 11-	Coo For	-m 000 D	+ V l.n	10	
	Descri	ption of property	(a) Cost or other basis (investment)	(b) Cost or other					lepreciation		Book valu	e
1	1		0		C 1	23 664						123 664
	Land	ŀ	0			23,664 49,119			177,095,097			3,354,022
	Buildin	gs	0			31,288		•	8,718,820			1,012,468
		nent	0			51,008			43,271,338			9,579,670
u	-quipii		۳۱		,	_,,,,,	1		-,-: -,			, ,

24,139,783

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

15,568,029

333,637,853

8,571,754

Part VII	<b>Investments—Other Securities.</b> Complete if See Form 990, Part X, line 12.	f the organization answere	ed "Yes" on Form 990, Part IV, line 11b.	
	(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) Financia	Il derivatives		Cost of end-of-year market value	
(2) Closely-	held equity interests			
(3) Other _ (A) LIMITED	PARTNERSHIP INTERESTS	958,937,241	F	
(B) FUNDS H	HELD IN TRUST BY OTHERS	533,958,247	F	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)	1,492,895,488		
Part VIII	<b>Investments—Program Related.</b> Complete if the organization answered 'Yes' o	n 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)			cost of end of year market value	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(1) (5 000 0 1) (40) (70)			
Part IX	on (b) must equal Form 990, Part X, col (B) line 13 )  Other Assets. Complete if the organization answe	red 'Yes' on Form 990, Part I'	V, line 11d See Form 990, Part X, line 15	
	(a) Descript		(b) Book va	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
•	mn (b) must equal Form 990, Part X, col (B) line 15 )			
Part X	<b>Other Liabilities.</b> Complete if the organization See Form 990, Part X, line 25.	n answered 'Yes' on Form	990, Part IV, line 11e or 11f.	
1.	(a) Description of liability	(b) Book	value	
` ,	Income taxes		0	
	REST AGREEMENT OBLIG  MENT BENEFIT OBLIGAT		31,507,805 22,079,896	
	NMENT GRANTS REFUNDA		1,178,673	
	REMENT OBLIGATIONS		465,334	
	ASE OBLIGATIONS  ND OTHER DEPOSITS		254,773 254,753	
(7)				
(8)				
(9)				
		<u> </u>		
•	n (b) must equal Form 990, Part X, col (B) line 25 ) or uncertain tax positions In Part XIII, provide the tex		55,741,234	
•	or uncertain tax positions in Part XIII, provide the tex 's liability for uncertain tax positions under FIN 48 (AS	<del>-</del>	·	

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Reve zation answered 'Yes' on Form 990, Part IV, line 12a.	nue per Return				
1		upport per audited financial statements	. 1				
2		ot on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) on i	nvestments   2a					
b	Donated services and use of facil	Donated services and use of facilities					
С	Recoveries of prior year grants	2c					
d							
е	Add lines 2a through 2d		2e				
3	Subtract line <b>2e</b> from line <b>1</b> .		3				
4	Amounts included on Form 990, I	Part VIII, line 12, but not on line <b>1</b>					
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a					
b	Other (Describe in Part XIII ) .	4b					
c	Add lines 4a and 4b	<del></del>	4c				
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	. 5				
Par		penses per Audited Financial Statements With Expersation answered 'Yes' on Form 990, Part IV, line 12a.	enses per Return				
1	Total expenses and losses per au	dited financial statements	. 1				
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25					
а	Donated services and use of facil	ties					
b	Prior year adjustments						
С	Other losses	2c					
d	Other (Describe in Part XIII ) $\ .$	2d					
е	Add lines 2a through 2d	<del></del>	. 2e				
3	Subtract line ${f 2e}$ from line ${f 1}$ .		. 3				
4	Amounts included on Form 990, I	Part IX, line 25, but not on line 1:		_			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a					
b	Other (Describe in Part XIII ) $\ .$	4b					
С	Add lines 4a and 4b	<del></del>	. 4с				
5	Total expenses Add lines 3 and 4	1c. (This must equal Form 990, Part I, line 18)	5				
Pai	t XIII Supplemental Info	ormation					
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b s 2d and 4b  Also complete this part to provide any additional info		4, Part X, line 2, Part			
	Return Reference	Explanation					
See /	Addıtıonal Data Table						

Page **4** 

chedule D (Form 990) 2018		
Part XIII Supplemental Info	mation (continued)	
Return Reference	Explanation	

Schedule D (Form 990) 2018

## **Additional Data**

Software ID: Software Version:

**EIN:** 54-0505977

WASHINGTON AND LEE UNIVERSITY Name:

HE BOOKS OF THE UNIVERSITY AND THUS NOT DEPRECIATED NO REVENUE IS EARNED FROM THE PROPERT

Y MAINTENANCE COSTS ARE INCURRED AS NORMAL OPERATING EXPENSES OF THE UNIVERSITY

**QUESTION 9** 

## Explanation

Return Reference

Supplemental Information

THE SINGLE CONSERVATION EASEMENT HELD BY THE UNIVERSITY WAS ACQUIRED THROUGH THE PURCHASE OF PROPERTY ADJACENT TO THE UNIVERSITY IN DECEMBER 2010. THE PROPERTY IS HELD AS LAND ON T

SCHEDULE D, PART II,

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART III, QUESTION 4	PROVIDE A DESCRIPTION OF THE ORGANIZATION'S COLLECTIONS AND EXPLAIN HOW THEY FURTHER THE O RGANIZATION'S EXEMPT PURPOSE THE MUSEUMS AT WASHINGTON AND LEE UNIVERSITY, WHICH REPORTS TO THE DIRECTOR OF INSTITUTIONAL HISTORY, SUPPORTS THE UNIVERSITY AS AN INTERDISCIPLINARY TEACHING RESOURCE THROUGH THE PRESERVATION, STUDY, INTERPRETATION, AND EXHIBITION OF ITS C OLLECTIONS THE MUSEUMS AT WLU IS COMPOSED OF THREE AREAS THAT ARE ADMINISTERED COLLECTIVE LY BY THE DIRECTOR THE LEE CHAPEL & MUSEUM (LC&M) WAS CREATED IN 1928 IN THE LOWER LEVEL OF THE ORIGINAL COLLEGE CHAPEL, WHICH WAS DESIGNATED A NATIONAL HISTORIC LANDMARK IN 1963 THE LEE CHAPEL COLLECTION IS A UNIQUE AND NATIONALLY SIGNIFICANT LEGACY COLLECTION (FORME D EARLY, WITHOUT PLANNING) THAT WAS GIVEN AND BEQUEATHED TO WASHINGTON AND LEE UNIVERSITY BY LEE FAMILY AND FRIENDS, MUCH OF WHICH WAS ACQUIRED BETWEEN 1897 AND 1928 IT INCLUDES THE WASHINGTON-CUSTIS-LEE COLLECTION OF EARLY AMERICAN PORTRAITS, AS WELL AS HISTORICAL OBJECTS (PERSONAL ARTIFACTS, MILITARY EQUIPMENT, MATERIAL CULTURE, AND FURNISHINGS) RELATED TO THESE IMPORTANT VIRGINIA FAMILIES, AND ESPECIALLY TO GEORGE WASHINGTON, BENEFACTOR OF WASHINGTON ACADEMY, AND ROBERT E LEE, 11 FURNISHINGS AND CONTENTS OF LEE'S OFFICE AS PRESID ENT (1868-1870), AS WELL AS A SMALL COLLECTION OF HISTORICAL OBJECTS RELATED TO THE HISTOR Y OF WASHINGTON AND LEE UNIVERSITY THE REEVES MUSEUM CARES FOR, DISPLAYS AND INTERPRETS WAL'S CERAMIC COLLECTION THE REEVES THE REEVES MUSEUM CARES FOR, DISPLAYS AND INTERPRETS WAL'S CERAMIC COLLECTION THE REEVES COLLECTION OF CERAMICS CONTAINS OVER 3,000 PIECES OF CERAMICS MADE IN ASIA, EUROPE, AND THE REEVES MUSEUM CARES FOR, DISPLAYS AND INTERPRETS WAL'S CERAMIC COLLECTION THE REEVES COLLECTION OF CERAMICS CONTAINS OVER 3,000 PIECES OF CERAMICS MADE IN ASIA, EUROPE, AND THE REEVES MUSEUM CARES FOR, DISPLAYS AND INTERPRETS WAL'S CERAMIC ASIAN ART, AS WELL AS HOUSES THE GOTTWALD GALLEY, DISPLAYING THE PAINTINGS OF LOUISE HER NATION, AND THE COLLECTION OF DISPLAYING THE PAINTINGS OF LOUI

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, Q4	DESCRIBE THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUND ENDOWMENT IS A TERM USED COMMONLY TO REFER TO THE RESOURCES THAT HAVE BEEN RESTRICTED BY THE DONOR OR DESIGNATED BY THE BOARD OF TRUSTEES THAT WILL BE INVESTED TO PROVIDE FUTURE REVENUE TO SUPPORT THE UNIV ERSITY'S ACTIVITIES BECAUSE TUITION AND FEES REVENUE DOES NOT COVER THE ENTIRE COST OF ED UCATION FOR A STUDENT, ENDOWMENT FUNDS SUPPLEMENT THE COST OF FACULTY SALARIES AND EDUCATI ONAL PROGRAMS THE ENDOWMENT AND CURRENT CONTRIBUTIONS SUPPORT SCHOLARSHIPS AND FINANCIAL ASSISTANCE TO STUDENTS THE UNIVERSITY ENDOWMENT ALSO PROVIDES FUNDS FOR THE FOLLOWING ARE AS > LIBRARY MAINTENANCE AND ACQUISITIONS > FACULTY RESEARCH > PROGRAM COSTS FOR AREAS SUCH AS - ENVIRONMENTAL STUDIES PROGRAM - THE SHEPHERD POVERTY PROGRAM > ATHLETIC PROGRAMS > BUILDINGS AND GROUNDS MAINTENANCE AND IMPROVEMENTS

Return Reference	Explanation
SCHEDULE D, PART X, FIN 48 FOOTNOTE FROM AUDITED FINANCIAL STATEMENTS	THE WASHINGTON AND LEE UNIVERSITY HAS BEEN CLASSIFIED AS AN ORGANIZATION DESCRIBED UNDER S ECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND THUS EXEMPT FROM FEDERAL INCOME TAXES ON ACTIVITIES RELATED TO ITS EXEMPT PURPOSE THE UNIVERSITY DOES NOT BELIEVE THAT THERE ARE ANY UNRECOGNIZED TAX BENEFITS OR COSTS THAT SHOULD BE RECORDED IN THE CONSOLIDATED FINANCI AL STATEMENTS ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN REFLECTED IN THE CONSOL IDATED FINANCIAL STATEMENTS THE INTERNAL REVENUE SERVICE HAS HELD THAT A VIRGINIA LIMITED LIABILITY COMPANY, TREATED AS A PARTNERSHIP FOR STATE INCOME TAX PURPOSES, WOULD ALSO BE TREATED AS A PARTNERSHIP FOR FEDERAL INCOME TAX PURPOSES THEREFORE, INCOME TAXES ARE NOT PROVIDED WITH RESPECT TO THE OPERATIONS OF COLONNADE RESTORATION, LLC SINCE EACH MEMBER IS

CH OPERATIONS

RESPONSIBLE FOR THE INCOME TAX CONSEQUENCES ASSOCIATED WITH ITS PROPORTIONATE SHARE OF SU

**Supplemental Information** 

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493136024080 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** WASHINGTON AND LEE UNIVERSITY 54-0505977 Part I YES NO 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 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5c c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e No f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο 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 Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2018)

	3					
<b>Supplemental Information.</b> Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)						
Return Reference	Explanation					
SCHEDULE E, PART I, Q3	ALL POLICIES, INCLUDING THE UNIVERSITY'S NONDISCRIMINATION / EEO STATEMENT ARE POSTED TO THE UNIVERSITY WEBSITE ALL PROSPECTIVE STUDENTS RECEIVE SOLICITATION MATERIALS THAT OUTLINE THE UNIVERSITY'S NONDISCRIMINATION POLICIES, INCLUDING BUT NOT LIMITED TO DISCRIMINATION ON THE BASIS OF RACE ANNUALLY, THE UNIVERSITY BROADCASTS THE NONDISCRIMINATION POLICY AND REINFORCES SUPPORT FOR THE UNIVERSITY COMMUNITY					

Page 2

Schedule E (Form 990 or 990EZ) (2018)

	ANNUALLY, THE UNIVERSITY BROADCASTS THE NONDISCRIMINATION POLICY AND REINFORCES SUPPORT FOR THE UNIVERSITY COMMUNITY TO FOLLOW POLICY THERE IS ALSO ONGOING CAMPUS-WIDE ORIENTATION AND TRAINING OCCURS ON WHERE ONE CAN FIND POLICIES AND RESOURCES
SCHEDULE E, PART I, Q6	THE UNIVERSITY ADMINISTERS FEDERAL LOAN AND GRANTS TO STUDENTS THROUGH PROGRAMS SUCH AS PELL AND PERKINS DURING

THE TAX YEAR ENDED JUNE 30. 2019. THE UNIVERSITY HOLDS FEDERAL GRANTS WITH DEPARTMENTS SUCH AS NATIONAL SCIENCE FOUNDATION.

DEPARTMENT OF HEALTH AND HUMAN SERVICES. AND THE NATIONAL **ENDOWMENT FOR THE HUMANITIES** 

Schedule F (Form 990 or 990-F7) (2018)

efile GRAPHIC prin	t - DO NOT I	PROCESS	As Filed Data -	•		DLN:	9349313602	24080
SCHEDULE F (Form 990)	State	ement of	Activities (	Outside the Uni	ited S	tates	OMB No 1545	-0047
(1 01111 390)	► Compl	lete if the organ	iization answered "\ ▶ Attach t	15, or 16. <b>2018</b>				
Department of the Treasury Internal Revenue Service	•	► Go to www.irs	gov/Form990 for II	nstructions and the latest ii	nformatio	n.	Open to Pu Inspection	blic
Name of the organization WASHINGTON AND LEE U						<b>Employer iden</b> 54-0505977	tification num	ber
	I <b>nformation</b> Part IV, line		s Outside the U	<b>Inited States.</b> Comple	te If the	organization a	nswered "Yes"	to
=		=		substantiate the amount	_			
other assistance, to award the grar			the grants or assis	stance, and the selection	criteria	used	✓ Yes	□ No
2 For grantmaker outside the United		Part V the org	ganization's proce	dures for monitoring the	use of i	ts grants and oth		_ 140
3 Activites per Regio	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed	)		
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program sp	vity listed in (d) is a n service, describe ecific type of ce(s) in region	(f) Total expen for and invest in regior	ments
See Add'l Data								
3a Sub-total b Total from continua Part I	tion sheets to						4	<u>,293,289</u>
c Totals (add lines 3	a and 3b)						4	,293,289
For Panerwork Reduction	Act Notice see	a tha Instructio	ns for Form 990	Cat	No 5008	.2W Schadul	le F (Form 990) :	2018

Page **3** Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Type of grant or assistance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of cash	(f) Amount of	(g) Description	(h) Method of
, ,, ,	<b>,</b>	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
See Add'l Data							

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>✓</b> 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	<b>✓</b> 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)	<b>☑</b> 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)	<b>✓</b> 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)	<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	□Yes	<b>☑</b> No

Schedule F (Form	ກ 990) 2018	Page <b>5</b>							
Pro am me	Part V Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).								
990 Schedule Return Refer	e F, Supplemental Information  Trence Explanation								
SCHEDULE F - SUPPLEMENT INFO		D TO THE STUDENT'S COSTS OF EDUCATION IN ID TO SUPPORT 1,348							

## **Additional Data**

East Asia and the Pacific

## Software ID: Software Version:

**EIN:** 54-0505977

Name: WASHINGTON AND LEE UNIVERSITY

693,245

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
Central America and the Caribbean			Grantmakıng		70,500					

Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 253.672 Europe l Grantmakındı Middle East and North Africa Grantmaking 333,893

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) North America 85,656 l Grantmakındı Russia and Neighboring States Grantmaking 143,251

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America 161.162 l Grantmakındı South Asia Grantmaking 751,450

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 381.887 l Grantmakındı Middle East and North Africa Program Services Study Abroad 33,621

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific Study Abroad 203.839 Program Services Europe Program Services Study Abroad 671,142

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa Study Abroad 142.800 Program Services South Asia Program Services Study Abroad 89,373

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Central America and the 277,798 lInvestments Carıbbean

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement valuation (book. of non-cash non-cash recipients FMV, appraisal, assistance assistance other) 70.500 Stdnt Acc Cr SCHOLARSHIP Central America land the Carıbbean

693,245 Stdnt Acc Cr

19

East Asia and the Pacific

SCHOLARSHIP

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (c)Number assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIP 253,672 Stdnt Acc Cr lEurope (Including Iceland and (Greenland SCHOLARSHIP 333.893 Stdnt Acc Cr Middle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (d) Amount of (e) Manner of (q) Description of (h) Method of (b) Region (c)Number (f) Amount of assistance cash grant cash disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) SCHOLARSHIP 85,656 Stdnt Acc Cr North America SCHOLARSHIP 143.251 Stdnt Acc Cr Russia and the lNewlv Independent States

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) SCHOLARSHIP 161,162 Stdnt Acc Cr South America SCHOLARSHIP 751,450 Stdnt Acc Cr South Asia

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) SCHOLARSHIP 381.887 Stdnt Acc Cr Sub-Saharan Africa

DLN: 93493136024080 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number WASHINGTON AND LEE UNIVERSITY 54-0505977 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page <b>2</b>
Part III Grants and Other As Part III can be duplica			als. Complete if the orga	nızatıon answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assist		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Student Financial Aid		1292	50,962,809			
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental	Informatio	on. Provide the inf	formation required in F	Part I, line 2; Part III	, column (b); and any other a	additional information.
Return Reference	Explanation	on				
SCHEDULE I -Supplemental Info	ARE CREDIT	ED TO THE STUDEN		ACCOUNT AND APPLIE	D TO TUITION, FEES, AND OTHER	TS TO FURTHER THEIR EDUCATION GRANTED FUNDS COSTS OF EDUCATION IN THE FISCAL YEAR 2018-

Schedule I (Form 990) 2018

## **Additional Data**

224 MCLAUGHLIN ST LEXINGTON, VA 24450

Kendal at Lexington 160 Kendal Drive LEXINGTON, VA 24450

		Software ID					
		Software Version	:				
		EIN	<b>:</b> 54-0505977				
		Name	: WASHINGTON AND	LEE UNIVERSITY			
Farms 000 Cab adula I. Barris	II Constant	Oth 4:-t	D	tions and Bourse	:-		
Form 990, Schedule I, Part	11, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	1)
	I			1		i	ı

10,000

20,000

## OMICRON DELTA KAPPA 61-1216165 501(C)(3) SOCIETY INC

54-1795871

501(C)(3)

Caffeeran ID.

(h) Purpose of grant or assistance

Program Services

PROGRAM SERVICE

(a) Name and address of (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 556.374 PILOT CITY OF LEXINGTON VA 54-6001392

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

300E WASHINGTON ST LEXINGTON, VA 24450

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	19313	36024	080
Sch	edule J	Co	ompensat	tion Information	40	1B No	1545-0	0047
(Forr	n 990)	For certain Office	ers, Directors, 1	Trustees, Key Employees, and Hig	jhest			
		Complete if the ord		ated Employees wered "Yes" on Form 990, Part IV	. line 23.	20	18	}
	21 =	-	► Attach	h to Form 990. r instructions and the latest infor			to Pul	
•	ment of the Treasury al Revenue Service	▶ Go to <u>www.irs.qc</u>	101	r instructions and the latest infor	mation.		ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
WAS	SHINGTON AND LEE	ONIVERSITT			54-0505977			
Pa	rt I Questio	ons Regarding Compensa	tion					
							Yes	No
1a				of the following to or for a person listency ny relevant information regarding the y				
		or charter travel	lacksquare	Housing allowance or residence for	•			
		companions		Payments for business use of perso				
		nification and gross-up payment	s 🔽	Health or social club dues or initiati				
	□ Discretion	ary spending account	Ш	Personal services (e g , maid, chau	rreur, cher)			
b		kes in line 1a are checked, did t ill of the expenses described abo		follow a written policy regarding payr nplete Part III to explain	nent or reimbursement	1b	Yes	
2	Did the organiza	ation require substantiation prio	r to reimbursing	or allowing expenses incurred by all or, regarding the items checked in lin-	0.102	2	Yes	
	directors, truste	es, officers, including the CEO/	executive Directo	or, regarding the items checked in lin	e lar			
3				ed to establish the compensation of t not check any boxes for methods	he			
	_	•		CEO/Executive Director, but explain	ın Part III			
	✓ Compensa	ation committee		Written employment contract				
		ent compensation consultant		Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensation	ation committee			
4			990, Part VII, Se	ection A, line 1a, with respect to the i	filing organization or a			
	related organiza							
a		ance payment or change-of-con		lead actions on the land		4a	Yes	
b c	•	r receive payment from, a suppl r receive payment from, an equ	•	· ·		4b 4c	Yes	No
·	•			plicable amounts for each item in Par	t III	70		INC
		), <b>501</b> (c)(4), and 501(c)(29)	=	-				
5		ed on Form 990, Part VII, Section Contingent on the revenues of		the organization pay or accrue any				
а	The organization					5a		No
b	Any related orga	anızatıon? 5a or 5b, describe in Part III				5b		No
_	•	·	التلجية مصلا مسا	the eventuation have as account and				
6		ontingent on the net earnings of		the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga	anization? 6a or 6b, describe in Part III				6b		No
7	•	•	on A line to did	the organization provide any nonfixe	.d			
	payments not de	escribed in lines 5 and 6? If "Ye	s," describe in Pa	art III	eu	7		No
8				ured pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe			
9		3, did the organization also follo	w the rebuttable	e presumption procedure described in	Regulations section	8		No
F F	``	ction Act Notice, see the Ins	turations for E	Cat No.	50053T <b>Schedule 1</b>	9 (Earn	- 000)	2018

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting								
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII							
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual	
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other		columns	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table						•		
	1	1	1		1	I	1	
							!	
				+				
	+			+				
				+				
				+				
1								
			1					

Schedule J (Form 990) 2018	Page <b>3</b>			
Part III Supplemental Inform	nation			
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				
Return Reference	Explanation			

JUSED PREDOMINANTLY FOR UNIVERSITY BUSINESS THE ABOVE BENEFITS WERE TREATED AS TAXABLE INCOME WHEN APPROPRIATE

LESS THAN \$250 PER MONTH FOR THE PRESIDENT AND FOR THE VICE PRESIDENT OF ADVANCEMENT AND COMMUNICATIONS THE CLUB MEMBERSHIPS ARE

Return Reference	Explanation
, ,	THE FORMER GENERAL COUNSEL RECEIVED A PAYMENT OF \$243,000 UNDER A SEPARATION AGREEMENT DUE TO RETIREMENT FROM THE UNIVERSITY, WHICH AMOUNT IS INCLUDED IN PART II, COLUMN B ABOVE

Return Reference	Explanation
	THE UNIVERSITY PRESIDENT PARTICIPATES IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN SPONSORED BY THE UNIVERSITY FOR THE CALENDAR YEAR 2018, \$53,318 WAS CONTRIBUTED TO THIS PLAN AND IS INCLUDED ABOVE IN PART II, COLUMN C

--

BRANT J HELLWIG

JAMES E MOLITERNO

BRIAN C MURCHISON

ELIZABETH G OLIVER

LEANNE M SHANK END

ROBERT D STRAUGHAN

LAW PROFESSOR

LAW PROFESSOR

ASSOCIATE DEAN

6302018 FORMER GENERAL COUNSEL

DEAN

DEAN

(ı)

(11)

(ı)

(ı)

(11)

(ı)

(11)

(1)

(1)

(i) Base Compensation

359,964

286,200

290,763

255,411

121,399

261,827

Software ID:

**Software Version:** 

(ii)

Bonus & incentive

compensation

**EIN:** 54-0505977

Name: WASHINGTON AND LEE UNIVERSITY

(iii)

Other reportable

compensation

Form 990, Schedule J,	Part II - Officers, Directors, Trustees, Key Employees, and	Highest Compensate	ed Employees
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable

WILLIAM C DUDLEY PRESIDENT AND TRUSTEE	(1)	531,640	0	0	80,818	62,520	674,978	0
	(11)	0	0	0	0	0	0	0
JAMES D FARRAR JR SECRETARY	(1)	182,763	0	0	18,575	14,383	215,721	0
	(11)	0	0	0	0	0	0	0
STEVEN G MCALLISTER TREASURER	(1)	332,603	0	0	27,500	25,989	386,092	0
	(11)	0	0	0	0	0	0	0
JOHANNA E BOND DEAN	(1)	250,546	0	0	25,420	16,687	292,653	0
	(11)	0	0	0	0	0	0	0
MARC C CONNER PROVOST	(1)	282,945	0	0	27,500	82,633	393,078	0
	(11)	0	0	0	0	0	0	0
DENNIS W CROSS VICE PRESIDENT	(1)	380,542	0	0	27,500	17,397	425,439	0

other deferred

compensation

27,500

27,500

27,500

25,656

12,150

26,725

benefits

17,397

14,774

13,491

10,786

7,352

49,185

(E) Total of columns

(B)(ı)-(D)

404,861

328,474

331,754

291,853

383,901

337,737

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

PROVOST	(.,		l	۲	27,300	62,633	393,076	0
	(II)	0	0	0	0	0	0	0
DENNIS W CROSS VICE PRESIDENT	(1)	380,542	l	0	27,500	17,397	425,439	0
	(II)	0	0	0	0	0	0	0
MARK A DRUMBL LAW PROFESSOR	(1)	268,192	0	0	26,706	894	295,792	0
	(n)	0			]	0	0	

243,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493136024080 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule K Supplemental Information on Tax-Exempt Bonds (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. 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 Employer identification number WASHINGTON AND LEE UNIVERSITY 54-0505977 Part I **Bond Issues** (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (h) On (i) Pool (a) Issuer name (e) Issue price (g) Defeased behalf of financing ıssuer Yes No Yes No Yes No Industrial Development Authority 52976TBG1 08-07-2018 36,076,396 Capital projects, Refunding 2010 Х Χ Х 54-6001392 - Lexington City Industrial Development Authority 54-6001392 52976TAH0 07-10-2013 35,309,019 Renovate dorms and capital project Х Χ Х - Lexington City 15,110,000 Refunding 2015B Industrial Development Authority 54-6001392 000000000 08-07-2018 Χ Х Х - Lexington City 36,897,502 Build dorms, cap projects, refundi Virginia College Building 54-1249154 9277817B4 04-22-2015 Х Χ Х Authority Part  ${f II}$ **Proceeds** С 0 22,356,396 35,309,019 105,685 30,459,673 4 5 6 13,720,000 15.004.315 6,437,829 7 338,078 299,959 105,685 308,692 8 9 10 16,901,290 35,080,546 30,234,883 11 12 5,117,029 13 2016 2018 2017 Yes No Yes No Yes Yes Nο No Were the bonds issued as part of a current refunding issue? . . . . Χ Χ Χ Χ 14 Were the bonds issued as part of an advance refunding issue? . . . . . Χ Χ Χ Χ 15 Has the final allocation of proceeds been made? . . . . . . . . . . . Χ Χ Х Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Χ Χ **Private Business Use** Part 🏻

Α

No

Χ

Χ

Cat No 50193E

Yes

В

No

Χ

Х

Yes

C

No

Χ

Χ

Yes

D

No

Χ

Yes

Schedule K (Form 990) 2018

Was the organization a partner in a partnership, or a member of an LLC, which owned property

Are there any lease arrangements that may result in private business use of bond-financed

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

1

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

Rebate not due yet? . . . . . . .

Exception to rebate? . . . . . . . . . . . .

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

Term of hedge . . . . . . . . . Was the hedge superintegrated? . . . . . 

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

b

C

d

6

8a

Part IV

b

C

Arbitrage

Yes

C

No

X

Χ

Χ

0 %

0 %

0 %

0 %

Х

Yes

Х

Χ

Χ

Schedule K (Form 990) 2018

D

Χ

Х

Х

Yes

Page 2

Χ

Χ

Χ

0 %

0 %

0 %

0 %

Χ

Χ

Χ

No

Х

Χ

Χ

Yes Are there any management or service contracts that may result in private business use of If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside

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

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

counsel to review any research agreements relating to the financed property?

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

organization, or a state or local government

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

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

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

Has the organization or the governmental issuer entered into a qualified

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

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

If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

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

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

Χ

No

Χ

Χ

Χ

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Yes

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Χ

Χ

Nο

Χ

Χ

Х

0 %

0 %

0 %

0 %

В

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No

Χ

Χ

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Χ

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Yes

Χ

Χ

Χ

Yes

No

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Χ

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0 %

0 %

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0 %

Yes

Х

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Χ

No

Χ

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Χ

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Χ

Х

Yes

Χ

CITY BONDS THE REBATE COMPUTATION WAS LAST PERFORMED ON MAY 24, 2017 FOR VIRGINIA COLLEGE BUILDING AUTHORITY BOND

Nο

Explanation THE REBATE COMPUTATION WAS LAST PERFORMED ON AUGUST 16, 2016 AND NOVEMBER 7, 2019 FOR THE INDUSTRIAL DEVELOPMENT AUTHORITY-LEXINGTON

Х

Yes

Χ

No

Yes

Х

Page 3

Nο

Х

Yes

No

5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		Х	
ь	Name of provider	0		О		О		0

Χ

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

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Return Reference

SCHEDULE K, PART IV, LINE 2C

Schedule K (Form 990) 2018

Term of GIC.

period?

Part V

Part VI

efile GRAPH	IC print - DO N	OT PROCES	S As F	iled Data -				DL	N: 93	34931	360240	
Schedule I (Form 990 or 99	\^ = <del>-</del> -\	ete if the orga	nization a 28b, or 28	ns with Ir	s" on Form 99 0-EZ, Part V,	90, Part IV, li , line 38a or 4	nes 25a,	25b, 20			1545-004	
		<b>⊳</b> Go to		ch to Form 990 .gov/Form990			۱.			<b>Z</b> U	10	
Department of the T	I										o Public	
Internal Revenue Se Name of the or	ganization						Empl	oyer ide	entifica			
WASHINGTON AN	ND LEE UNIVERSITY						54-05	05977				
	ess Benefit Tra											
	plete if the organize  a) Name of disqual			Relationship be				Descript			) Correcte	
					organization	· .		transacti	ion	Ϋ́		
							+					
(a) Name of	(b) Relationship with organization			5, 6, or 22 to or from the anization?	(e)Original principal amount	8a, or Form 99  (f)Balance due	(g) In default?	Appro	proved by agreem board or		)Written reement?	
			То	From			Yes No		No	Yes	No	
(1) JAMES D FARRAR JR	Employee	Home Mortgage	10	X	240,000	146,025			No	Yes	110	
(2) JOHANNA E BOND	Employee	Home Mortgage		X	450,000	368,216	No		No	Yes		
(3) DENNIS W CROSS	Employee	Home Mortgage		Х	57,525	41,482	No		No	Yes		
(4) BRANT J HELLWIG	Employee	Home Mortgage		X	450,000	371,170	No		No	Yes		
Total	•	•		•	<b>\$</b>	926,893			•			
	ants or Assista					line 27						
(a) Name of interested person (b)		<del></del>				of assistar	assistance (e)			) Purpose of assistance		
or Paperwork R	eduction Act Notice,	see the Instruc	tions for Fo	rm 990 or 990-l	<b>Z.</b> Ca	t No 50056A	S	chedule	L (Forn	990 or	990-EZ) 2	

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shorganiz	f ation's
				Yes	No
Part V Supplemental Information	า				

Part V Supplemental Information								
Provide additional informa	ation for responses to questions on	Schedule L (see instruction	ons)					
Return Reference	Explanation							
PART II - LOANS TO AND/OR FROM INTERESTED PERSONS	TO PURCHASE, BUILD, OR IMPRO	OVE A PRINCIPAL RESIDEN	JLL-TIME EMPLOYEES SUCH LOANS NCE IN THE LEXINGTON ROCKBRIDG THAN THE INTEREST RATE CHARGE	E COUN	ITY			

FINANCIAL INSTITUTIONS FOR RESIDENTIAL MORTGAGE LOANS. IMPUTED INTEREST INCOME RELATED TO

A UNIVERSITY-PROVIDED HOUSING LOAN IS INCLUDED IN EMPLOYEE W-2S, AS APPLICABLE, EACH YEAR AS OF 6/30/19, THE UNIVERSITY HAD 282 EMPLOYEES WITH HOME LOANS OUTSTANDING THE LOAN

PROGRAM IS APPROVED BY THE BOARD OF TRUSTEES AND REVIEWED AS PART OF THE INVESTMENT PORTFOLIO OF THE UNIVERSITY BY THE INVESTMENT COMMITTEE Schedule L (Form 990 or 990-EZ) 2018

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493136024080 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number WASHINGTON AND LEE UNIVERSITY 54-0505977 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 111,000 APPRAISAL 1 Art-Works of art . . Х 13 Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 195 7,490,476 SELLING PRICE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ ( \_\_\_ 26 Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 6 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2									
	Supplemental Information.									
	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete itional information.									
Return Reference	Explanation									
	Schedule M (Form 990) (2018)									

efile GRAPH	IC prir	nt - DO NOT PROCESS As Filed Data -		DLN:	93493136024080					
SCHEDUL (Form 990 or EZ)	990-	Supplemental Information  Complete to provide information for Form 990 or 990-EZ or to provice Attach to Form Go to <a href="https://www.irs.gov/form999">www.irs.gov/form999</a>	responses to specific questic de any additional information 1990 or 990-EZ.	ons on	OMB No 1545-0047  2018  Open to Public Inspection					
<b>Name</b> l <b>Brthe</b> rofg WASHINGTON AND	) LEE UNI	VERSITY		Employer identi 54-0505977	tification number					
990 Schedul	e O, Su	pplemental Information								
Return Reference		Explanation								
FORM 990, PART III	A LIBE D HUM E PRE O OTH E 4A P ED FO OUS E CADEN UNIVE RTS U IS THE OMPO CONO URCE	ON STATEMENT OF WASHINGTON AND LEE UNITED ARTS EDUCATION THAT DEVELOPS STUD MANELY AND TO CONDUCT THEMSELVES WITH PARED FOR LIFE-LONG LEARNING, PERSONALIERS, AND ENGAGED CITIZENSHIP IN A GLOBAR OF THE MOST INFLUENTIAL MEN IN AMINDOWMENT OF \$20,000 IN 1796 HELPED THE FAY) SURVIVE, AND ROBERT E LEE, WHOSE PRESITY INTO THE NATIONAL LIMELIGHT WASHINIVERSITY NESTLED BETWEEN THE BLUE RIDE NITH OLDEST INSTITUTION OF HIGHER LEAF SED OF TWO UNDERGRADUATE DIVISIONS, THE MICS, AND POLITICS, AND A GRADUATE SCHOFOR STUDENTS AND FACULTY AT ALL THREE LAW AND HISTORY, THE FRANCIS LEWIS LAW	ENTS CAPACITY TO THINK FF HONOR, INTEGRITY, AND CIV. ACHIEVEMENT, RESPONSIBL LAND DIVERSE SOCIETY FOR DED IN 1749, WASHINGTON A ERICAN HISTORY GEORGE WELEDGLING SCHOOL (THEN KNIESIDENCY AND INNOVATIVE INGTON AND LEE IS A SMALL, GE AND ALLEGHENY MOUNTARNING IN THE NATION WASHINE COLLEGE AND THE WILLIAM OL OF LAW THE MUDD CENTESCHOOLS THE SCHOOL OF L	REELY, CRITICAL (ILITY GRADUAT LE LEADERSHIP, M 990, PART III, L ND LEE UNIVERS (ASHINGTON, WI NOWN AS LIBERT LEADERSHIP BRO PRIVATE, LIBER (NINS IN LEXINGTON NGTON AND LEE MS SCHOOL OF CER FOR ETHICS AW IS HOME TO	LY, AN ES WILL B SERVICE T IN BITY IS NAM HOSE GENER TY HALL A OUGHT THE AL A DN, VA IT IS C COMMERCE, E IS A RESO THE CENTE					

Return Reference	Explanation
FORM 990, PART VI, QUESTION 2	FAMILY OR BUSINESS RELATIONSHIPS A TRUSTEE HAS DISCLOSED THAT SHE IS A DIRECTOR OF A CAR R ENTAL COMPANY WASHINGTON AND LEE UNIVERSITY DOES HAVE A CONTRACTUAL BUSINESS RELATIONSHIP WITH THIS CAR RENTAL COMPANY HOWEVER, EMPLOYEES MAY RENT FROM THIS COMPANY AT THEIR TRAV EL DESTINATIONS IF THE ARRANGEMENT IS THE MOST ECONOMICAL AVAILABLE BUT THERE IS NO REQUIR EMENT A TRUSTEE HAS DISCLOSED THAT SHE IS A GENERAL COUNSEL AND EXECUTIVE VICE PRESIDENT AT THE CORPORATE OFFICES OF ONE OF THE LOCAL LEXINGTON BANKS THE UNIVERSITY HAS A RELATIO NSHIP WITH THIS BANK THROUGH THE SERIES 2003 BONDS HOWEVER, THE TRUSTEE WAS NOT ON THE BO ARD AT THE TIME THE SERIES 2003 BONDS WERE ISSUED IN ADDITION, THE SERIES 2003 BONDS WERE PAID IN FULL DURING THE UNIVERSITY'S 2017-2018 FISCAL YEAR THIS BANK ALONG WITH ANOTHER LOCAL BANK (BANK2) HAVE ANNOUNCED THEIR MERGER FOR THE FUTURE ALTHOUGH, THIS TRUSTEE MAY PARTICIPATE IN THIS MERGER PROCESS AND BECOME AN OFFICER OF THE NEW MERGED BANKING INSTITU TION, THE UNIVERSITY USE OF BANK2 WAS DONE THROUGH A COMPETITIVE RFP PROCESS A TRUSTEE HA S DISCLOSED THAT HE WORKS FOR AN INSURANCE COMPANY WHICH IS A SUBSIDARY OF THE UNIVERSITY'S MAIN BANKING RELATIONSHIP AT ONE TIME THE UNIVERSITY USED THE INSURANCE PORTION OF THIS COMPANY BUT IN 2010 THROUGH A COMPETITIVE RFP PROCESS, THE INSURANCE PORTION OF THIS INSURANCE COMPANY IN EARLY 2018 FOR A COMPETITIVE RFP PROCESS, THE INSURANCE RELATIONSHIP WAS SEVERED AT THE NAMING OF A NEW INSURANCE BROKERAGE THIS TRUSTEE LEFT THE EMPLOY OF THIS INSURANCE COMPANY IN EARLY 2018 FOR A COMPANY THAT HAS NO ASSOCIATION WITH THE UNIVERSITY

Return Explanation
Reference

Form 990,	990 REVIEW THE 990 IS PREPARED BY THE UNIVERSITY BUSINESS OFFICE AND REVIEWED BY MANAGEMEN
PART VI,	T AN OUTSIDE ACCOUNTING AND TAX FIRM COMPILES THE 990 FORMS AND PROVIDES ADDITIONAL CLARI
QUESTION	FICATION THE AUDIT COMMITTEE REVIEWS AND APPROVES THE FORM 990, AFTER WHICH A COPY IS DIS
11	TRIBUTED THROUGH A CONFIDENTIAL WEB PORTAL TO THE ENTIRE BOARD OF TRUSTEES

Return Reference	Explanation
Form 990, PART VI, QUESTION 12	CONFLICT OF INTEREST POLICY THE CONFLICT OF INTEREST AND TRANSACTIONS WITH INTERESTED PERS ONS POLICY IMPOSES A CONTINUING OBLIGATION TO DISCLOSE POTENTIAL CONFLICTS TO THE OFFICE O F GENERAL COUNSEL OF THE UNIVERSITY THE CONTROLLER WILL ADVISE THE CHAIR OF THE TRUSTEESH IP COMMITTEE (FOR TRUSTEE AND INTERESTED PERSON DISCLOSURES) AND CHAIR OF THE AUDIT COMMITTEE (FOR EMPLOYEE DISCLOSURES) REGARDING ANY POTENTIAL CONFLICTS OF INTEREST AMONG THESE P ERSONS THE TRUSTEESHIP COMMITTEE FOR TRUSTEES AND INTERESTED PERSONS AND THE AUDIT COMMITTEE FOR EMPLOYEES, HAVE THE AUTHORITY TO OVERSEE AND DECIDE WHETHER AN INDIVIDUAL COVERED UNDER THE POLICY SHOULD DISCLOSE HIS OR HER INTEREST TO THE BOARD AND RECUSE HIM OR HERSEL F IN MATTERS WHERE A POTENTIAL CONFLICT MAY EXIST THEY ALSO DECIDE WHETHER ANY DISCLOSED POTENTIAL CONFLICTS RISE TO THE LEVEL OF EXCESS BENEFIT TRANSACTIONS OR UNMANAGEABLE CONFLICTS THE GENERAL COUNSEL WILL MAKE A PERMANENT RECORD OF DISCLOSED POTENTIAL CONFLICTS, WHICH IS AVAILABLE TO ANY TRUSTEE OR OTHER PERSONS AUTHORIZED BY THE CHAIR OF THE TRUSTEESH IP COMMITTEE AND AUDIT COMMITTEE THE POLICY DEFINES THE MEANS TO DISCLOSE, RESOLVE AND MA NAGE REAL, APPARENT OR POTENTIAL CONFLICTS A CONFLICT OF INTEREST POLICY IS IN PLACE FOR ALL OTHER EMPLOYEES AND FINANCIAL AND FINANCIAL AID PERSONNEL REVIEW THEIR RESPECTIVE CODE S OF CONDUCT/ETHICS ANNUALLY

Return

Reference	
Form 990,	EXECUTIVE COMPENSATION THE POLICY ON GUIDELINES FOR REVIEWING EXECUTIVE COMPENSATION OUTLI
PART VI,	NES THE PROCESS TO BE FOLLOWED THE BOARD OF TRUSTEES, OR ITS EXECUTIVE COMMITTEE, IS CHAR
QUESTION	GED WITH THOROUGHLY REVIEWING THE PRESIDENT'S COMPENSATION, AS WELL AS ASSESSING AND APPRO
15	VING THE REASONABLENESS OF THE COMPENSATION THE REVIEW OF PRESIDENTIAL COMPENSATION INCLU
	DES EVALUATION OF MARKET DATA AND COMPARISON TO PEER SCHOOLS THE FULL BOARD OF TRUSTEES A
	PPROVES COMPENSATION FOR THE PRESIDENT THE BOARD ALSO CONDUCTS A THOROUGH REVIEW OF THE P
	RESIDENT'S PERFORMANCE FROM THE PRIOR YEAR AT THIS TIME THE UNIVERSITY GENERAL COUNSEL RE
	CORDS MINUTES OF THE MEETINGS REGARDING THE PRESIDENT'S COMPENSATION, AND RETAINS COPIES O
	F THE PERFORMANCE REVIEWS FOR OTHER EXECUTIVES AND OFFICERS, THE PRESIDENT AND EXECUTIVE
	DIRECTOR OF HUMAN RESOURCES REVIEW FINANCIAL BUDGETS, EMPLOYEE PERFORMANCE, AND BENCHMARK
	DATA FOR SIMILAR POSITIONS AT PEER SCHOOLS TO DETERMINE REASONABLENESS OF COMPENSATION

Explanation

Return Reference	Explanation
Form 990, PART VI, QUESTION 19 - AVAILABILITY OF DOCUMENTS	AL STATEMENTS ARE AVAILABLE UPON REQUEST FROM THE UNIVERSITY TREASURER THE UNIVERSITY WEB

Return Reference	Explanation
Form 990, PART XII - FINANCIAL STATEMENTS AND REPORTING	IN YEARS PRIOR TO TAX YEAR 2010, THE FINANCIAL STATEMENTS OF THE UNIVERSITY HAVE BEEN REPO RTED ON A SEPARATE BASIS, AS NO OTHER AFFILIATES EXISTED ON NOVEMBER 15, 2010, COLONNADE RESTORATION, LLC, A VIRGINIA LIMITED LIABILITY COMPANY AND CONTROLLED AFFILIATE OF THE UNI VERSITY, WAS FORMED FOR THE PURPOSE OF RESTORING, REHABILITATING, CONSTRUCTING AND DEVELOP ING THE HISTORIC BUILDINGS ON THE UNIVERSITY GROUNDS KNOWN COLLECTIVELY AS THE COLONNADE COLONNADE RESTORATION, LLC WAS FORMED SO THAT THE RENOVATION EXPENDITURES INCURRED ON THE REHABILITATION PROJECTS DESIGNATED BY THE VIRGINIA DEPARTMENT OF HISTORIC RESOURCES WILL S UPPORT VIRGINIA HISTORIC TAX CREDITS CERTIFIED TO COLONNADE RESTORATION, LLC FOR ALLOCATION TO ITS MEMBERS THE UNIVERSITY HAS NO MEMBERSHIP INTEREST IN COLONNADE RESTORATION, LLC BUT RATHER CONTROLS THE AFFILIATE THROUGH VARIOUS LEASING ARRANGEMENTS THOSE VARIOUS LEAS ING ARRANGEMENTS WERE SATISFIED AND TERMINATED IN MARCH 2018

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	136024	080
SCHEDULE R (Form 990)	<b>&gt;</b> (	swered "Yes ▶ Attach to	s" on Form Form 990.	Unrelated Partnerships Form 990, Part IV, line 33, 34, 35b, 36, or 37.					OMB No 1545-0047 2018					
Department of the Treasury Internal Revenue Service		► Go to <u>www</u>	v.irs.gov/	<i>Form</i> 990 for	instructio	ns and the	e latest info	rmation.				Open to	o Public ection	С
Name of the organization WASHINGTON AND LEE UNIVERSITY	,									loyer identif	ication	number		
Part I Identification	of Disregarded E	ntities Complete If	the organ	ization ancu	ored "Vec	" on Form	990 Part	TV line 3		505977				
	(a) EIN (if applicable) of disr	<u> </u>	ure organ	(b)	 	( Legal dom	c) nicile (state	(d)		<b>(e)</b> End-of-year as	ssets	( <b>f</b> Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Ex npt organizations di		<b>is</b> Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
Name, address, an	<b>(a)</b> d EIN of related organizati	ion	Prima	<b>(b)</b> ary activity	Legal dom	<b>c)</b> nicile (state n country)	(d) Exempt Cod		Public cl	(e) harity status on 501(c)(3))	Dır	<b>(f)</b> rect controlling entity	Section (13) cor enti	512(b) ntrolled
For Paperwork Reduction Ac	t Notice, see the In	structions for Form 9	90.		Ca	nt No 5013	<u> </u> 35Y				Sche	edule R (Form	990) 20	18

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

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predomin income(rel unrelate excluded f tax und sections 5 514)	ated, total inconduction to the conduction to th	e of Share end-of-asset	of Dispi year allo	(h) roprtionat ocations?	(i) e Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene mana part	aging o	<b>(k)</b> Percentage ownership	tage
			<u> </u>		<u> </u>			Ye	s No		Yes	No		ļ
														—
Part IV Identification of Related Organ because it had one or more related							answered "	Yes" on	Form 9	990, Part IV	, line	34		—
(a)  Name, address, and EIN of related organization	( <b>b)</b> Primary activity	Lee dom (state oi	(c) egal micile or foreign intry)		(d) t controlling entity	(e) Type of entit (C corp, S col or trust)			(g) are of end year assets	l-of- Perce	<b>h)</b> entage ership	(13	(i) ection 512 3) contro entity? Yes N	rolled
(1)CHARITABLE REMAINDER TRUSTS (51)	CRUT	V	A	W&L U	JNIVERSITY	Trust							'es	
C/O BNY MELLON NA PO BOX 185 Pittsburgh, PA 15230		i												
(2)CHARITABLE LEAD TRUSTS (2)	CLAT	V	A	W&L U	JNIVERSITY	Trust						Ye	'es	
C/0 BNY MELLON NA PO BOX 186 Pittsburgh, PA 15230		,												
(3)POOLED INCOME FUND	CRAT	V	/A	W&L U	JNIVERSITY	Trust						Yr	'es	

Part IV Identification of Related Organization of Related Organization of Related Organization (Related Organization)						on Form 990,	, Part IV, line 3	34	
(a) Name, address, and EIN of related organization	Name, address, and EIN of Primary activity		(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	<b>(h)</b> Percentage ownership	Section (13) co	
(1)CHARITABLE REMAINDER TRUSTS (51)	CRUT	VA	W&L UNIVERSITY	Trust				Yes	100
C/O BNY MELLON NA PO BOX 185 Pittsburgh, PA 15230									
(2)CHARITABLE LEAD TRUSTS (2)	CLAT	VA	W&L UNIVERSITY	Trust				Yes	
C/0 BNY MELLON NA PO BOX 186 Pittsburgh, PA 15230									
(3)POOLED INCOME FUND	CRAT	VA	W&L UNIVERSITY	Trust				Yes	
C/0 BNY MELLON NA PO BOX 187 Pittsburgh, PA 152300185 54-6123755									
(4)ANNUITIES (5)	CRAT	VA	W&L UNIVERSITY	Trust				Yes	
C/0 BNY MELLON NA PO BOX 188 Pittsburgh, PA 152300185 58-6291330									
			•	•		Sc	hedule R (Form	990) 20	018

Loans or loan guarantees by related organization(s) . .

No No

No

No

No

No

No

No

No

No

No

No

No

No No

No

No

1e

1g 1h

11

1m

1n

10

**1**q

1r 1s

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.					
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity					
h. Cift grant or capital contribution to related organization(s)					

Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a
Gift, grant, or capital contribution to related organization(s)	<b>1</b> b
Gift, grant, or capital contribution from related organization(s)	1a 1b 1c
Loans or loan guarantees to or for related organization(s)	1d

(a)

Name of related organization

(b)

Transaction

type (a-s)

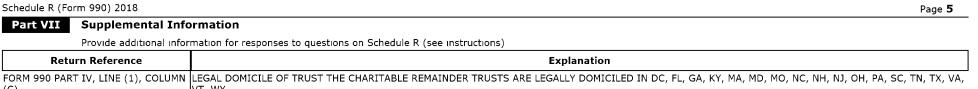
(c)

Amount involved

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

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		ganizations?	(f) Share of total Income	of Share of end-of-year assets	(h) of Disproprtiona year allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	n 99	0) 2018



Schedule R (Form 990) 2018