			** PUBLIC DISCLOSURE COPY	* *	
	Ω	00	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047
Forr	n <b>J</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	(except private foundation	s <b>2014</b>
		of the Treasury	Do not enter social security numbers on this form as it may	-	Open to Public
		enue Service	▶ Information about Form 990 and its instructions is at www		Inspection
-				JÚN 30, 2015	
B C a	heck if pplicat		organization ETY OF THE ALUMNI OF THE COLLEGE OF	D Employer identifica	ation number
	Addr		IAM & MARY IN VIRGINIA, INC.		
	_chan _Name _chan			<u>-</u> 	54289
	Initial returr	ge Doing b	usiness as WILLIAM & MARY ALUMNI ASSOCIA'I' and street (or P.O. box if mail is not delivered to street address) Room/si		54209
	Final	P O	BOX 2100		221-1842
	⊥returr termi ated	n-	bown, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	4,421,876.
	Amer Amer returr		IAMSBURG, VA 23187	H(a) Is this a group ret	
	_Appli		nd address of principal officer: MARILYN W. MIDYETTE	for subordinates?	
	pend		LUMNI DRIVE PO BOX 2100, WILLIAMSBURG	, H(b) Are all subordinates inc	
ΙT	ax-ex	kempt status:		- ''	st. (see instructions)
			WMALUMNI.COM	H(c) Group exemption	,
KF	orm o	of organization:	X Corporation Trust Association Other ► L Y	'ear of formation: 1923 M	
	irt I	Summary		·	
۵	1	Briefly describ	e the organization's mission or most significant activities: ${{f TO}}$ ${f SUPPO}$	RT THE COLLEGE	OF W&M
anc		AND ITS	ALUMNI THROUGH ENGAGEMENT ACTIVITIES	AND COMMUNICA	TION.
Governance	2	Check this bo	$x \mathrel{\blacktriangleright}$ if the organization discontinued its operations or disposed of n	nore than 25% of its net ass	
Ň	3	Number of vo	ting members of the governing body (Part VI, line 1a)		17
ی م	4	Number of inc	ependent voting members of the governing body (Part VI, line 1b)		17
Activities &	5		of individuals employed in calendar year 2014 (Part V, line 2a)		47
iviti	6		of volunteers (estimate if necessary)		160
Act			d business revenue from Part VIII, column (C), line 12		70,403.
	b	Net unrelated	business taxable income from Form 990-T, line 34		0.
				Prior Year	Current Year
ne	8		and grants (Part VIII, line 1h)	2,105,395.	1,224,291.
Revenue	9	•	ce revenue (Part VIII, line 2g)	656,421. 394,747.	340,895. 1,141,907.
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)	1,927,117.	400,660.
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,083,680.	3,107,753.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,000.	60,500.
	13		nilar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)	02,000:	00,500.
	14		to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,784,965.	399,117.
Expenses			undraising fees (Part IX, column (A), line 11e)	0.	0.
ben			ng expenses (Part IX, column (D), line 25)  0.		
Ĕ			es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,751,075.	1,115,807.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,598,040.	1,575,424.
	19	-	expenses. Subtract line 18 from line 12	1,485,640.	1,532,329.
or				Beginning of Current Year	End of Year
sets llanc	20	Total assets (I	Part X, line 16)	12,194,865.	12,255,369.
Net Assets or Fund Balances	21		(Part X, line 26)	540,182.	194,788.
Fun	22		fund balances. Subtract line 21 from line 20	11,654,683.	12,060,581.
Pa	irt II				
Unde	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of my	knowledge and belief, it is
true	corre	ect, and complete	Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge	

Sign	Signature of officer		Date
Here	MARILYN W. MIDYETTE, E Type or print name and title	XECUTIVE DIRECTOR	
Paid	Print/Type preparer's name JAMES M. HAGGARD	Preparer's signature Dat	e Check PTIN if self-employed P00100566
Preparer	Firm's name DIXON HUGHES GOO	DMAN LLP	Firm's EIN 56-0747981
Use Only	Firm's address 701 TOWN CENTER NEWPORT NEWS, VA		Phone no. 757. 873.1033
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

2	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: THE MISSION OF THE ALUMNI ASSOCIATION OF THE COLLEGE OF WILLIAM AND MARY IS TO PROVIDE SERVICES AND AVENUES FOR ALUMNI AND FRIENDS TO DEVELOP LOYALTY TO, UNDERSTANDING OF, AND LIFELONG PARTICIPATION IN
2	THE MISSION OF THE ALUMNI ASSOCIATION OF THE COLLEGE OF WILLIAM AND MARY IS TO PROVIDE SERVICES AND AVENUES FOR ALUMNI AND FRIENDS TO
2	
2	DEVELOP LOVALTY TO LINDERSTANDING OF AND LIFTLONG DARTCIDATION IN
2	
	THE PRESENT AND FUTURE OF THE COLLEGE.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	the prior Form 990 or 990-EZ?
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 1,314,944. including grants of \$ ) (Revenue \$ 380,31
	(Code: ) (Expenses \$ 1,314,944. including grants of \$ ) (Revenue \$ 380,31 THE ALUMNI ASSOCIATION ACCOMPLISHES ITS MISSION THROUGH A VARIETY OF
	PROGRAMMING EFFORTS THAT INCLUDE:
-	
-	CHAPTER & REGIONAL ENGAGEMENT - WHICH FOCUSES ON INCREASING ALUMNI
	ACTIVITY AROUND THE COUNTRY AND INTERNATIONALLY, GROWING THE NUMBER O
	ALUMNI CHAPTERS, BROADENING COVERAGE IN KEY METRO AREAS, AND INCREASI
	THE NUMBER OF UNIVERSITY STAFF AND FACULTY TRAVELING TO MEET WITH
:	ALUMNI WHERE THEY LIVE AND WORK.
	SIGNATURE EVENTS - WHICH BRINGS FELLOW ALUMNI BACK TOGETHER WITH THEI
	ALMA MATER IN FAMILIAR AND NEW SPACES TO RECONNECT, GENERATE IMPACT A
	CELEBRATE EACH OTHER.
4b	(Code: ) (Expenses \$ 60, 500 • including grants of \$ 60, 500 • ) (Revenue \$
	ORDER OF THE WHITE JACKET FUNDS SCHOLARSHIPS FOR STUDENTS AT THE
	COLLEGE WORKING IN THE FOOD SERVICE INDUSTRY. THESE SCHOLARSHIPS ARE
	FUNDED THRU A SPECIAL ENDOWMENT.
-	
-	
•	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
•	
,	
44	Other program services (Describe in Schedule O)
	Other program services (Describe in Schedule O.)         (Expenses \$ including grants of \$ ) (Revenue \$ )
	Total program service expenses ► 1,375,444.
4e -	

SOCIETY	OF	THE	ALUMNI	OF	THE	COLLEGE	OF
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WILLIAM & MARY IN VIRGINIA, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	X	v
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
5	during the tax year? If "Yes," complete Schedule C, Part II	4		<u></u>
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		v	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		х
h	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u></u>
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		<u>X</u>
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			v
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		v
47	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u>X</u>
17	Column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2014)

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Form 990 (2014)

Part IV Checklist of Required Schedules

	990 (2014) WILLIAM & MARY IN VIRGINIA, INC. 54-605	64289	P	age <b>4</b>
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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		X
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	X	
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		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	_ 24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d		
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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	. 25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	. 26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	. 27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	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	. <b>28</b> a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	. 30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	. 32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	. 34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b		
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O		X	
		-	aan	001 1

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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.

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	990 (2014) WILLIAM & MARY IN VIRGINIA, INC.		54-6054	289	P	age 🕻
Pai						
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	64			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		4.77			
	filed for the calendar year ending with or within the year covered by this return	2a	47		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			37	
				3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			v
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country:					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-				v
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut		-			
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the executive a payment in evene of $C_{75}$ mode pathwas a contribution and pathwas a contribution and pathwas a section 170(c).	ninon r	rouidad to the neverO	7-		x
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set			7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	-		7-		x
ام	to file Form 8282?	7d		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year		×+0	7e		x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file.					- 23
g b	If the organization received a contribution of qualified intellectual property, did the organization file Fe If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		<u> </u>
-	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			711		
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	-		8		
٥	Sponsoring organizations maintaining donor advised funds.			0		
9 2	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
a b				9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	100				
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	114				
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		2	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		12u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
u	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
	Did the event instance reaction on the second for independencing contribution during the terrors			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		<u> </u>
					000	<u> </u>

Form 9	990	(2014)
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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.

Form 990 (2014)

54-6054289 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	Check if Schedule O contains a response or note to any line in this Part VI			Σ
Sect	tion A. Governing Body and Management			_
			Yes	1
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year 1a 17			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		t
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
		6		┢
	Did the organization have members or stockholders?	0		┢
<i>1</i> a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_	v	
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			T
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Sact	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	5		-
	ton D. Tonoico (mis section D requests information about policies not required by the internal nevenue code.)		Yes	Γ
		10	X	┝
	Did the organization have local chapters, branches, or affiliates?	10a	^	┝
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	L
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			T
	in Schedule O how this was done	12c	х	
	Did the organization have a written whistleblower policy?	13		┢
		14	x	┢
	Did the organization have a written document retention and destruction policy?	14		┝
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		Ľ
Soci	tion C. Disclosure	100		_
	List the states with which a copy of this Form 990 is required to be filed ►VA , UT , NY , KY , MD , MI , MA , NH , NJ	C 3		
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ivailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	ELAINE CAMPBELL - 757-221-1201			
	P.O. BOX 2100, WILLIAMSBURG, VA 23187			
	F.O. DON 2100, WIDDIAMSDONG, VN 2310/			
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	WILLIAM	&	MARY	IN	VIRGINIA,	INC
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Employees, and Independent Contractors	
Check if Schedule O contains a response or note to any line in this Part VII	
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.

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• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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.

	<u> </u>	I				npe	iout	· · · · · · · · · · · · · · · · · · ·	, ,	<i>(</i> <b>—</b> )
(A)	(B)			( <b>(</b>				(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per					is bot pr/trus		compensation	compensation	amount of
	week	<u> </u>					····,	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	l trustee		ee	npen		(00-2/1033-10100)		and related
	below	dual t	tiona		loldu	st col	-			organizations
	line)	Individual trustee or director	Institutional 1	Officer	Key employee	Highest compensated employee	Former			er gan inzanier ie
(1) CYNTHIA SATTERWHITE JARBOE	6.00	-	_		-					
PRESIDENT		x		x				0.	0.	0.
(2) GLENN W. CRAFFORD	2.00							•••	•••	
VICE PRESIDENT		x		x				0.	0.	0.
(3) KEVIN J. TURNER	2.00									
TREASURER		x		x				0.	0.	0.
(4) LYDIA R. PULLEY	1.00									
SECRETARY		x		x				0.	0.	0.
(5) DAVID NOEL KELLEY	1.00									
IMMEDIATE PAST PRESIDENT		x		x				0.	0.	0.
(6) MARILYN W. MIDYETTE	60.00									
EXECUTIVE DIRECTOR		X		X				0.	87,500.	21,875.
(7) CHRISTOPHER PAUL ADKINS	1.00									
MEMBER		X						0.	0.	0.
(8) MOLLY FRANCES ASHBY	1.00									
MEMBER		Х						0.	0.	0.
(9) SANDRA D. BOWEN	1.00									
MEMBER		Х						0.	0.	0.
(10) J. THOMAS FLESHER	1.00									
MEMBER		Х						0.	0.	0.
(11) KATHRYN HENNECY FLOYD	1.00									
MEMBER		X						0.	0.	0.
(12) SOPHIE LEE	1.00									
MEMBER		X						0.	0.	0.
(13) NICOLE LYNN LEWIS	1.00									
MEMBER		X						0.	0.	0.
(14) MARK J. LINAUGH	1.00									
MEMBER		X						0.	0.	0.
(15) SUSAN P. MANIX	1.00									
MEMBER		Х						0.	0.	0.
(16) DAVID TODD SCOTT	1.00									
MEMBER		Х						0.	0.	0.
(17) STEPHEN S. TANG	1.00									
MEMBER		Х						0.	0.	0.
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Form 990 (2014)

WILLIAM & MARY IN VIRGINIA, INC.

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Form 990 (2014) WILLIAM &	MARY 1	IN	V]	ERC	GII	NIA	Δ,	INC.	54-60	)54	289	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, an	d Hi	ghes	st C	Compensated Employe	es (continued)				
(A)	(B)				C)	-		(D)	(E)			(F)	
Name and title	Average			Pos	ition	1		Reportable	Reportable		Est	timate	d
	hours per					than o is both		compensation	compensatio	n		ount	
	week					or/trus		from	from related			other	
	(list any	ctor						the	organizations		com	oensa	tion
	hours for	- dire				eq		organization	(W-2/1099-MIS			om the	
	related	tee or	istee			ensat		(W-2/1099-MISC)			orga	anizati	ion
	organizations	l trus	nal tri		oyee	du o					and	l relat	ed
	below	Individual trustee or director	Institutional trustee	er	Key employee	lest c loyee	ner				orga	nizatio	ons
	line)	Indiv	Insti	Officer	Key (	Highest compensated employee	Former						
(18) G. WAYNE WOOLWINE	1.00							0		0			0
MEMBER	1 00	X						0.		0.			0.
(19) WILLIAM A. ARMBRUSTER	1.00							0		^			•
CHAIR OF OLDE GUARDE COUNCIL	1 00	X						0.		0.			0.
(20) ALYSSA WALLACE SCRUGGS	1.00									•			•
CHAIR OF YOUNG GUARDE COUNCIL		Х						0.		0.			0.
(21) MADELINE SCHULTZ	1.00												
VICE CHAIR, STUDENTS FOR UNIVERSITY		Х						0.		0.			0.
(22) ANGELA A. CASOLARO	1.00												
CHAIR OF CHAPTER PRESIDENTS COUNCIL		X						0.		0.			Ο.
(23) KAREN R. COTTRELL	40.00												
EXEC-VP		x		X				104,059.		0.	11	L,9	11.
1b Sub-total						I		104,059.	87,50		3:	3,7	86.
c Total from continuation sheets to Part V	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								104,059.	87,50	00.	3:	3,7	86.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wh	no re	eceived more than \$100	,000 of reportabl	е			
compensation from the organization													1
												Yes	No
3 Did the organization list any former officer,								•					
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su	im of reportab	le co	omp	ensa	atior	n anc	l otl	her compensation from	the organization				
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4		Х
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	unr	elat	ted organization or indiv	idual for services				
rendered to the organization? If "Yes," com	-				-						5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of com	pens	ation fi	rom	
the organization. Report compensation for	-												
(A)	,							(B)			(C	)	
Name and business	address	N	ONE	Ξ				Description of s	services	С	omper		n
							-						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se lis	stec	d above) who received n	nore than				
\$100,000 of compensation from the organi	zation 🕨				(	0							

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Form 990 (20	14
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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.

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Pa	rt VII	I Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
our	b	Membership dues	1b	4,491.				
Am (	с	Fundraising events	1c	83,650.				
lar İar	d	Related organizations	1d					
ns,	е	Government grants (contributi	ions) <b>1e</b>					
er S	f	All other contributions, gifts, grant	ts, and					
ļ ģ		similar amounts not included abov	/e <b>1f</b>	1,136,150.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Noncash contributions included in lines		20,077.				
<u>ה</u> 0	h	Total. Add lines 1a-1f		····· •	1,224,291.			
				Business Code	240.005	240.005		
vice		ALUMNI PROGRAM REVENUE	<u>.</u>	900099	340,895.	340,895.		
ue j	b		<u> </u>					
с п К	C		<u> </u>					
gra Re	d							
Program Service Revenue	e f	All other program service reve						
	f	Total. Add lines 2a-2f			340,895.			
	3	Investment income (including			,			
		other similar amounts)			169,712.			169,712.
	4	Income from investment of tax						
	5	Royalties		🕨 🚺				
			(i) Real	(ii) Personal				
	6 a	Gross rents	108,681.	1,350.				
	b	Less: rental expenses	4,882.	0.				
	С	Rental income or (loss)	103,799.	1,350.				
	d	Net rental income or (loss)		▶	105,149.			105,149.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	2,080,769.					
	b	Less: cost or other basis	1 001 151	17 400				
		and sales expenses	1,091,151. 989,618.					
		Gain or (loss)			972,195.	<17,423.		989,618.
		Net gain or (loss) Gross income from fundraising			572,155.	<17,425.	·	505,010.
onu	0 a	including \$ 83						
Other Revenue		contributions reported on line						
Ř		Part IV, line 18		171,265.				
the	b	Less: direct expenses		109,346.				
0		Net income or (loss) from fund		►	61,919.			61,919.
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	а					
		Less: direct expenses						
		Net income or (loss) from gam	-	····· ►				
	10 a	Gross sales of inventory, less						
		and allowances		134,354.				
		Less: cost of goods sold		91,321.	42 022	42 022		
	С	Net income or (loss) from sale			43,033.	43,033.		
	11 🤉	Miscellaneous Revenu AFFINITY PROGRAM INCOM		Business Code 900099	106,343.			106,343.
	l i a b			561520	70,403.		70,403.	
	c			900099	13,813.	13,813.	,	
	d				, •	, •		
		Total. Add lines 11a-11d		• • • • • • • • • • • • • • • • • • •	190,559.			
	12	Total revenue. See instructions.			3,107,753.	380,318.	70,403.	1,432,741.
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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.

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ecu	on 501(c)(3) and 501(c)(4) organizations must comp		-		r
	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	60,500.	60,500.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	20 700		20 700	
_	trustees, and key employees	20,790.		20,790.	
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and				
-	persons described in section 4958(c)(3)(B)	239,956.	221,275.	18,681.	
7	Other salaries and wages	439,930.	441,413.	10,001.	
8	Pension plan accruals and contributions (include	21,902.	18,760.	3,142.	
~	section 401(k) and 403(b) employer contributions)	86,457.	76,112.	10,345.	
9	Other employee benefits	30,012.	25,706.	4,306.	
0	Payroll taxes	50,012.	23,700.	4,500.	
1	Fees for services (non-employees):				
а	Management				
		27,000.		27,000.	
	Accounting	27,000.		27,000.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	49,590.		49,590.	
f	Investment management fees	49,390.		49,390.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
~	column (A) amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion	58,934.	34,080.	24,854.	
3	Office expenses	3,942.	3,942.	24,034.	
4	Information technology	5,542.	5,542.		
5	Royalties	16,582.	16,582.		
6		8,388.	372.	8,016.	
7	Payments of travel or entertainment expenses	0,000.	572.	0,010.	
8	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	31,109.		31,109.	
		01,1000			
:0 :1	Payments to affiliates				
2	Depreciation, depletion, and amortization	27,850.	27,850.		
2 3		14,967.	12,820.	2,147.	
3 4	Other expenses. Itemize expenses not covered	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,020•	_,,	
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
-	amount, list line 24e expenses on Schedule 0.)	361,961.	361,961.		
a r	HOMECOMING	254,496.	254,496.		
a	50TH REUNION	109,258.	109,258.		
C لم	GIFTS	46,120.	46,120.		
d		105,610.	105,610.		
	All other expenses	1,575,424.	1,375,444.	199,980.	
	Total functional expenses. Add lines 1 through 24e	1,5/5,444.	<u>,,,,,,,,,,,,,,,</u>	• • • • • • •	
	loint coete (Complete this line only if the organization				
25 26	Joint costs. Complete this line only if the organization				
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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Form **990** (2014)

2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC. Part X | Balance Sheet

			. <b>.</b>			
		Check if Schedule O contains a response or note to any line in this Pa	π.ΧΠ			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		277,175.	1	661,204.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		72,188.	4	51,682.
	5	Loans and other receivables from current and former officers, director	s,			
		trustees, key employees, and highest compensated employees. Comp	olete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as define	ed under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and con	ntributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	,			
ŝts		employees' beneficiary organizations (see instr). Complete Part II of Se			6	
Assets	7	Notes and loans receivable, net			7	
<	8	Inventories for sale or use		49,884.	8	12,627.
	9	Prepaid expenses and deferred charges		65,085.	9	23,112.
	10a	Land, buildings, and equipment: cost or other				
			,705.			
	b		,954.	167,024.	10c	121,751.
	11	Investments - publicly traded securities	F	7,080,638.	11	6,830,052.
	12	Investments - other securities. See Part IV, line 11		4,482,871.	12	4,554,941.
	13	Investments - program-related. See Part IV, line 11	F		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		10 104 005	15	10 055 000
	16	Total assets. Add lines 1 through 15 (must equal line 34)		12,194,865.	16	12,255,369.
	17	Accounts payable and accrued expenses	F	284,282.	17	90,711.
	18	Grants payable		00 200	18	05 140
	19	Deferred revenue		92,328.	19	85,148.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
Liabilities	22	Loans and other payables to current and former officers, directors, tru				
bilid		key employees, highest compensated employees, and disqualified per				
Lia		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23 24	
	24 25	Unsecured notes and loans payable to unrelated third parties			24	
	25	parties, and other liabilities not included on lines 17-24). Complete Par	t V of			
		Schedule D		163,572.	25	18,929.
	26	Total liabilities. Add lines 17 through 25		540,182.	26	194,788.
	20	Organizations that follow SFAS 117 (ASC 958), check here ► X	and	,	20	
s		complete lines 27 through 29, and lines 33 and 34.				
JCe	27	Unrestricted net assets		6,772,834.	27	7,621,143.
Fund Balances	28	Temporarily restricted net assets		1,026,539.	28	972,910.
а В	29	Permanently restricted net assets		3,855,310.	29	3,466,528.
Ŭ.		Organizations that do not follow SFAS 117 (ASC 958), check here				, ,
ъ П		and complete lines 30 through 34.				
Net Assets or	30	Capital stock or trust principal, or current funds			30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
≱t A	32	Retained earnings, endowment, accumulated income, or other funds	F		32	
ž	33	Total net assets or fund balances		11,654,683.	33	12,060,581.
	34	Total liabilities and net assets/fund balances		12,194,865.	34	12,255,369.
_						Form <b>990</b> (2014)

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2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

	SOCIETY OF THE ALUMNI OF THE COLLEGE OF				
Form	WILLIAM & MARY IN VIRGINIA, INC.	54-6	054289	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,10		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,57		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,532		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,654		
5	Net unrealized gains (losses) on investments	5	<1,120	5,4	<u>31.</u> >
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		4.0.0.0		~ 1
	column (B))	10	12,060	),5	81.
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	-	-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				x
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
ь	Separate basis Consolidated basis Both consolidated and separate basis		2b	x	
D	Were the organization's financial statements audited by an independent accountant?		20	<u></u>	
	consolidated basis, or both:	le Dasis,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
~	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	a audit			
Ū	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		······		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
			Eorm		2014)

Form **990** (2014)

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(Form 990 or 990-EZ)     Control       Department of the Treasury     Information       Internal Revenue Service     ► Information			omplete if the organ 494 ► A	Public Charity Status and Public Support mplete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. on about Schedule A (Form 990 or 990-EZ) and its instructions is at <u>www.irs.gov/form990.</u> ETY OF THE ALUMNI OF THE COLLEGE OF Employee							
Name	-	WILL	IAM & MARY	IN VIRGINIA	, INC.			5	identification number 4 - 6 0 5 4 2 8 9		
Part	I Reason	for Public	Charity Status (A	All organizations must co	omplete this	s part.) Se	e instruction	S.			
1   2   3   4	A church, co A school des A hospital or A medical res city, and stat	nvention of ch cribed in <b>sect</b> i a cooperative search organiz	urches, or associatio i <b>on 170(b)(1)(A)(ii).</b> ( hospital service orga	For lines 1 through 11, c on of churches describer Attach Schedule E.) anization described in <b>s</b> e njunction with a hospita	d in section ection 170(I	b)(1)(A)(iii	).	)(iii). Enter t	the hospital's name,		
5 🗋				llege or university owne	d or operate	ed by a go	vernmental	unit describ	ed in		
6 [ 7 [ 8 [	A federal, sta An organizati section 170(	te, or local go on that norma <b>b)(1)(A)(vi).</b> (C	Ily receives a substa omplete Part II.)	nental unit described in ntial part of its support f	rom a gove		-	he general	public described in		
<ul> <li>A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> <li>An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)</li> </ul>											
10				ively to test for public sa	afety. See <b>se</b>	ection 50	9(a)(4).				
11 🗌		-	-	ively for the benefit of, to	-			arry out the	purposes of one or		
				ed in <b>section 509(a)(1)</b> o f supporting organizatio					heck the box in		
а				upervised, or controlled	•	-					
		-		gularly appoint or elect a	a majority of	f the direc	tors or truste	ees of the s	upporting		
h			complete Part IV, Se		tion with ito	aunnaita	doracnizati		vina		
b			-	l or controlled in connec anization vested in the s			•		-		
		-	t complete Part IV,		arrie persor	is that co		age the sup	ported		
с				g organization operated	in connecti	on with, a	nd functiona	Illy integrate	ed with,		
		-		). You must complete l				, ,			
d		-		orting organization oper				rted organiz	zation(s)		
	that is not	unctionally int	egrated. The organiz	ation generally must sa	tisfy a distril	bution rec	uirement an	d an attenti	veness		
	requiremer	t (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D, a	and Part \	1.				
е		0		written determination fro			Туре I, Туре	II, Type III			
				nally integrated support							
<u> </u>	(i) Name of supp	<u> </u>	n about the supporte (ii) EIN	(iii) Type of organization	(iv) Is the org	anization	(v) Amount of	fmonetary	(vi) Amount of		
	organizatior			(described on lines 1-9 above or IRC section (see instructions))	listed in governing do <b>Yes</b>	your	support Instruct	(see	other support (see Instructions)		
Total											
	or Paperwork Re 990 or 990-EZ.		lotice, see the Instr	uctions for			Sched	dule A (Forr	n 990 or 990-EZ) 2014		

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# Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC.

54-6054289 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Gleadar year (of fixel year beginning in) ►         (g) 2010         (g) 2011         (g) 2012         (g) 2013         (g) 2014         (f) Total           1 offix, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')         1, 814, 706.         1, 741, 895.         1, 980, 986.         2, 105, 395.         1, 156, 291.         6, 799, 273.           2 Tax revenues levied for the organization without charge            6, 799, 273.           3 The value of services or facilities            1, 914, 706.         1, 741, 895.         1, 980, 986.         2, 105, 395.         1, 156, 291.         6, 799, 273.           5 The portion of total contributions by each person (fare than a grantation without charge            6, 799, 273.           6 Public support. starts the pointing in) ►         (g) 2010         (g) 2011         (g) 2012         (g) 2013         (g) 2014         (g) 7013           7 Amounts from mine 4         1, 814, 706.         1, 741, 895.         1, 980, 986.         2, 105, 395.         1, 156, 291.         8, 799, 273.           6 Gloss income from interest, diplining in) ►         (g) 2010         (g) 2011         (g) 2013.         (g) 2014         (g) 2014.         (g) 2014.         (g) 2014.         (g) 2014.         (g) 2014.	See	ction A. Public Support							
membership fees received. (Do not include any Pursusal grants)       1,814,706.       1,741,895.       1,980,966.       2,105,395.       1,156,291.       8,799,273.         2 Tax revenues levied for the organization is benefit and ether paid to or expended on its behalt       1       8,14,706.       1,741,895.       1,980,966.       2,105,395.       1,156,291.       8,799,273.         3 The value of services or facilities thursibed by a governmental unit to the organization without charge       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         5 The portion of total contributions by each penson of total contributions by each penson of total contributions by each penson of the 11, column (f)       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         5 Reportion of total contributions by each penson of the 11, column (f)       1       612,010.       (f) 2011.       (f) 2013.       (g) 2014.	Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
include any "unusual grants.")       1,814,706       1,741,895       1,980,986       2,105,395       1,156,291       8,799,273.         2 Tax revenues levied for the organization included on its behalf       1,814,706       1,741,895       1,980,986       2,105,395       1,156,291       8,799,273.         3 The value of services or facilities turnished by a governmental unit to the organization without charge included on its behalf       1,814,706       1,741,895       1,980,986       2,105,395       1,156,291       8,799,273.         5 The portion of total contributions by each person (ofter than a governmental unit or publicly supported organization included on line 1 that exceeds 2% of the amount shown on line 11, externeds 2% of the amount shown on line 14.       8,799,273.       8,799,273.         Calledar yrar (of field yrar beginning in) (b)       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         Of the support.         Calledar yrar (of field yrar beginning in) (b)       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         Of the support.         Calledar yrar (of field yrar beginning in) (b)       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         Of the issuprestimate support. <td co<="" td=""><td>1</td><td>Gifts, grants, contributions, and</td><td></td><td></td><td></td><td></td><td></td><td></td></td>	<td>1</td> <td>Gifts, grants, contributions, and</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	1	Gifts, grants, contributions, and						
2       Tare versues levied for the organization of the enganization without charge         3       The value of services or facilities furnished by a governmental unit to the organization without charge         4       Tatal. Add lines 1 through 3         5       The portion of total contributions by each person (then 1 threas and 1 threa		membership fees received. (Do not							
ior expended on its behalf       ior expended on its behalf         3 The value of services or facilities turnished by a governmental unit to the organization without charge and total. Add lines 1 through 3       i.814,706, i.741,895, i.980,986, 2,105,395, i.156,291, 8,799,273, 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       i.814,706, i.741,895, i.980,986, 2,105,395, i.156,291, 8,799,273, Section B. Total Support         Calendar year (or fiscal year beginning in) ► 2 Public support. Subvictive 5 sun text.       i.814,706, i.741,895, i.980,986, 2,105,395, i.156,291, 8,799,273, Section B. Total Support         Calendar year (or fiscal year beginning in) ► 3 Or Amounts from line 4 business is regularly carried on securities loans, rents, royatties and income from imitreset, dividends, symmetris received on securities loans, rents, royatties activities, whether or not the business is regularly carried on in closs from the sale of capital assets (Explain in Part VI).       i.91, 258, 157, 821, 239, 423, 296, 061, 279, 743, 1, 074, 306, i.12, 5, 439, 516, .         9 Net income from interest, dividends, program and on the sale of capital assets (Explain in Part VI).       j.9, 873, 575, i.12, Gross receipts from related activities, etc. (see instructions) in the sale of capital assets (Explain in Part VI).       j.9, 873, 575, i.12, Gross receipts from related activities, etc. (see instructions) in the sale of capital assets (Explain in Part VI).       j.9, 873, 575, i.12, Gross receipts from related activities, etc. (see instructions) in the sale of capital assets (Explain in Part VI).       j.9, 873, 575, i.12, Gross receipts from related activiti		include any "unusual grants.")	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.	
or expended on its behalf         3 The value of services or facilities turnished by a governmental unit to the organization without charge         4 Total. Add lines it through 3         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 28 of the amount shown on line 11, column (0)         6 Public support, bargate his trone hesi Section B. Total Support         2 Gross income from interest, dividends, paymetrs received on securities loans, rents, royatties and income from similar sources         9 Net income from similar sources         9 Net income from interest, dividends, paymetrs received on securities loans, rents, royatties and income from similar sources         9 Net income from interest, dividends, paymetrs activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI)         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)         11 Total support, Add lines 7 through 10         12 Section C. Computation of Public Support Percentage         14 Public support percentage for 2014 (If 0 Support Percentage         15 Public support percentage for 2014 (If 0 Support Percentage         14 Public support percentage for 2014 (If the organization's first, second, third, fourth, or fifth tax year as a section 501c(30) organization, check this box and stop here. The organization qualifies as a publicly supported organization in the organization dualifies as a publicly supported organization in the sale of capith	2	Tax revenues levied for the organ-							
3       The value of services or facilities furnished by a governmental unit to the organization without charge in the organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       6,799,273.         Section B. Total Support       0,00000       0,0000 </td <td></td> <td>ization's benefit and either paid to</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		ization's benefit and either paid to							
this       the organization without charge       1,814,706,1,741,895,1,980,986,2,105,395,1,156,291,6,799,273.         5       The portion of total contributions       1,814,706,1,741,895,1,980,986,2,105,395,1,156,291,6,799,273.         5       The portion of total contributions       9,873,973,000,000,000,000,000,000,000,000,000,0		or expended on its behalf							
the organization without charge       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         the portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         Section B. Total Support       8,799,273.       8,799,273.       8,799,273.       8,799,273.         Section B. Total Support       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7 Amounts from line 4       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         8 Gross income from line 4       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         10 J, 258.       157,821.       239,423.       296,061.       279,743.       1,074,306.         9 Net income from initerest, dividiads, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part V).       12       5,439,516.         11 Total support. Add lines 7 through 10       14       89-12.2       9       15       91.3       73         12 Arous for message fro	3	The value of services or facilities							
4       Total. Add lines 1 through 3       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         5       The portion of total contributions by each person (diter than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       8,799,273.         6       Public support. Support		furnished by a governmental unit to							
5 The portion of total contributions by each person (ofter than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       8, 799, 273.         6 Public support. Settract the 5 time het       8, 799, 273.         Section B. Total Support       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7 Anounts from line 4       1, 814, 706.       1, 741, 895.       1, 980, 986.       2, 105, 395.       1, 156, 291.       8, 799, 273.         8 Gross income from interest, dividends, payments received on securities cans, rents, royatiles and income from similar sources and income from unrelated business activities, whether or not the business is regularly carried on to Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       101, 258.       157, 821.       239, 423.       296, 061.       279, 743.       1, 074, 306.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       1       9, 873, 579.       12       5, 439, 516.       13         13 First five years. If the Form 900 its or the organization's first, second, third, fourth, or fifth tax year as a section 5010(s) organization, check this box and stop here.       1       9, 873, 579.         14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89, 12       5         15 Public support percentage for 2		the organization without charge $\dots$							
by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support. Subtrat line 3 time i.  Calendar year (or fiscal year beginning in)   Gal 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Support Calendar year (or fiscal year beginning in)  Gal 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total (f) Total (f) Total (f) Total Support Calendar year (or fiscal year beginning in)  Gal 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total (f) Total (f) Total (f) Total Support Calendar year (or fiscal year beginning in)  Gal 2010 (f) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total (f) Total (f) Total (f) Total Support (f)	4	Total. Add lines 1 through 3	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.	
governmental unit or publicly supported organization) included on line 11 acceeds 2% of the amount shown on line 11, colurm (f)       8,799,273.         6 Public support. Subtract line 5 thm line 4.       8,799,273.         Calendar year (or fiscal year beginning in) > Calendar year (or fiscal year (or fiscal year year (or fiscal year (or	5	The portion of total contributions							
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, columm (f)       8,799,273.         6 Public support. Subtract line 5 from line 4.       8,799,273.         7 Amounts from line 4.       1,814,706.         7 Amounts from line 4.       1,814,706.         8 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources and income from similar sources       101,258.         9 Net income from similar sources and income from similar sources       101,258.         10 Other income. Poon tinkude gain or loss from the sale of capital assets (Explain in Part V).       9,873,579.         12 Gross income late of the organization sints, second, third, fourth, or fifth tax years as a section S010(s) organization, check this box and stop here       9         14 Public support percentage from 2014 (line 6, column (f) divided by line 11, column (f)       14       89.12. %         15 Public support percentage from 2013 Schedule A, Part II, line 14       15       91.3.7 %         16 a 31 (3% support test - 2014. If the organization first, second, third, fourth, or fifth tax year as a section S010(s) organization, check this box and stop here       >         17 10% - facts-and-circumstances test - 2014. If the organization first, second, third, fourth, or fifth tax year as as atom S010(s) organization, check this box and stop here. The organization qualifies as a publicly supported organization       >         14 Public support percentage from 2014 (line 6, column (		by each person (other than a							
on line 1 that exceeds 2% of the amount shown on line 11, column (f)       Image: Structure 1 the str		governmental unit or publicly							
amount shown on line 11, column (f)       amount shown on line 11, column (f)       b       b       b       b       c       b       c       b       c       b       c       b       c       b       c       b       c       b       c       b       c       b       c       b       c       c       b       c       c       b       c		supported organization) included							
column (i)       6       Public support. Subtract live 5 hom live 4.       8,799,273.         Section B. Total Support       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7 Amounts from line 4       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources       101,258.       157,821.       239,423.       296,061.       279,743.       1,074,306.         9 Net income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       10       9,973,579.       12       5,439,516.         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, check this box and stop here       9       91.37.97         16 33 1/3% support percentage form 2013 Schedule A, Part II, line 14       19.1.37.96       11       14       89.9.12       %         17a 10% - facts-and-circumstances test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly support dorganization organization qualifies as a publicly support 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, check this box and stop here.		on line 1 that exceeds 2% of the							
6       Public support. Subtract time 5 from time 4.       8,799,273.         Section B. Total Support       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7       Amounts from time 4       1,814,706.       1,741,895.       1,980,986.       2,105,395.       1,156,291.       8,799,273.         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated business activities, whether or not the business is regularly carried on on tot include gain or loss from the sale of capital assets (Explain in Part NJ.)       101,258.       157,821.       239,423.       296,061.       279,743.       1,074,306.         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part NJ.)       12       5,439,517.       5,439,516.         11       Total support. Add lines 7 through 10       9,873,579.       12       5,439,516.         12       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, check this box and stop here         15       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37.57         16       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37.57         16       Public support percentage from 20		amount shown on line 11,							
Section B. Total Support       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7 Amounts from line 4       1, 814, 706.       1, 741, 895.       1, 980, 986.       2, 105, 395.       1, 156, 291.       8, 799, 273.         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated business activities, whether or not the business is regularly carried on       101, 258.       157, 821.       239, 423.       296, 061.       279, 743.       1, 074, 306.         9 Net income from interest, dividends, payments received on securities loans, rents, royalties and income from interest paint in Part VI.       101, 258.       157, 821.       239, 423.       296, 061.       279, 743.       1, 074, 306.         9 Net income from interest, dividends, bayments received form related activities, etc. (see instructions)       12       5, 439, 516.         11 Total support. Add lines 7 through 10       9, 873, 579.       12       5, 439, 516.         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, check this box and stop here       2         8 Cotion C. Computation of Public Support Percentage       15       91.37.7%       5         14 Public support percentage form 2013 Schedule A, Part II, line 14       15       91.37.7%       5		column (f)							
Calendar year (or fiscal year beginning in)       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) 2014       (f) Total         7 Amounts from line 4       1, 814, 706.       1, 741, 895.       1, 980, 986.       2, 105, 395.       1, 156, 291.       8, 799, 273.         8 Gross income from interest, dividends, payments received on securities loans, rents, royaties and income from similar sources       101, 258.       157, 821.       239, 423.       296, 061.       279, 743.       1, 074, 306.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       101, 258.       157, 821.       239, 423.       296, 061.       279, 743.       1, 074, 306.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       1       9, 073, 579.       12       5, 439, 516.         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, check this box and stop here								8,799,273.	
7       Amounts from line 4       1,814,706       1,741,895       1,980,986       2,105,395       1,156,291       8,799,273         8       Gross income from interest, dividends, payments received on securities loans, rents, royatiles and income from similar sources       101,258       157,821       239,423       296,061       279,743       1,074,306         9       Net income from unrelated business activities, whether or not the business is regularly carried on in or loss from the sale of capital assets (Explain in Part VI.)       100       9,873,579       12       5,439,516       12       5,439,516       12       5,439,516       15       15       16       17,3,579       12       5,439,516       12       5,439,516       12       5,439,516       12       5,439,516       13       13       14       89.12       %       14       89.12       %       14       89.12       %       13       13       14       83 1/3% or more, check this box and stop here       13       13       13       13       13       13       13       14       89.12       %       13       13       13       13       13       13       13       13       13       13       13       13       13       13       13       13       13       13       13       14	See	ction B. Total Support							
8       Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources       101, 258. 157, 821. 239, 423. 296, 061. 279, 743. 1, 074, 306.         9       Net income from unrelated business activities, whether or not the business is regularly carried on 10       101, 258. 157, 821. 239, 423. 296, 061. 279, 743. 1, 074, 306.         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       1         11       Total support. Add lines 7 through 10       1         12       5, 439, 516.         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, check this box and stop here         14       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 % 15         15       Public support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         17a       10% -facts-and-circumstances' test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances' test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances' test. The organization	Cale	ndar year (or fiscal year beginning in) 🕨		<b>(b)</b> 2011			(e) 2014	(f) Total	
dividends, payments received on securities loans, rents, royaties and income from similar sources       101,258.157,821.239,423.296,061.279,743.1.074,306.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       1.074,306.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       9,873,579.         11 Total support. Add lines 7 through 10       9,873,579.         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, check this box and stop here         24 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 % 15         16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 14 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 did not check a box on line 13, 16a, 16b, or 17a, and line 14 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, check this box on line 13, 16a, 16b, or 17a, and line	7	Amounts from line 4	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.	
securities loans, rents, royalties and income from similar sources       101,258.157,821.239,423.296,061.279,743.1,074,306.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       101,258.157,821.239,423.296,061.279,743.1,074,306.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       9,873,579.         11 Total support. Add lines 7 through 10       9,873,579.         12 Gross receipts from related activities, etc. (see instructions)       12       5,4339,516.         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, check this box and stop here       9         Section C. Computation of Public Support Percentage       14       89.12 % 15       91.37 %         14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 % 15       91.37 %         15 Public support percentage form 2013 Schedule A, Part II, line 14       15       91.37 %       103         16a 33 1/3% support test - 2013. If the organization did not check a box on line 13 and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization and stop here. The organization qualifies as a publicly supported 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, check this box and stop here. Explain in Part VI how the organiz	8	Gross income from interest,							
and income from similar sources       101,258.       157,821.       239,423.       296,061.       279,743.       1,074,306.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       10       1,074,306.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       9,873,579.         11 Total support. Add lines 7 through 10       9,873,579.         12 Gross receipts from related activities, etc. (see instructions)       12       5,439,516.         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, check this box and stop here       14         14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15 Public support percentage for 2013 Schedule A, Part II, line 14       15       91.37 %         16 33 1/3% support test - 2013. If the organization did not check the box on line 13 on 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17 10% - facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or mor		dividends, payments received on							
9 Net income from unrelated business activities, whether or not the business is regularly carried on       10         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       9,873,579.         11 Total support. Add lines 7 through 10       9,873,579.         12 Gross receipts from related activities, etc. (see instructions)       12 5,439,516.         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, check this box and stop here       9         14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15 Public support percentage form 2013 Schedule A, Part II, line 14       15       91.37 %         16 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17 a 10% - Facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, or 17a, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization meets the "facts-and-circums		securities loans, rents, royalties							
activities, whether or not the business is regularly carried on		and income from similar sources $\dots$	101,258.	157,821.	239,423.	296,061.	279,743.	1,074,306.	
business is regularly carried on         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)         11       Total support. Add lines 7 through 10         12       Gross receipts from related activities, etc. (see instructions)       12       5, 439, 516.         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, check this box and stop here         Section C. Computation of Public Support Percentage       14       89.12 %         14       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage for 2013 Schedule A, Part II, line 14       15       91.37 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a       10% -facts-and-circumstances test - 2014. 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 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, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organi	9	Net income from unrelated business							
10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       9,873,579.         11       Total support. Add lines 7 through 10       9,873,579.         12       Gross receipts from related activities, etc. (see instructions)       12       5,439,516.         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, check this box and stop here       >         2       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage form 2013 Schedule A, Part II, line 14       15       91.97 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. 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 dualifies as a publicly supported organization         b 10% -facts-and-circumstances te		activities, whether or not the							
or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 5, 439, 516. 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, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)). 14 89.12 % 15 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)). 14 89.12 % 15 Public support percentage for 2014 (line 6, column (f) divided by line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2013. 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 17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. 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, the 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 more, and 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		business is regularly carried on $\dots$							
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11 Total support. Add lines 7 through 10 9,873,579.   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, check this box and stop here Section C. Computation of Public Support Percentage   14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14   14 89.12   76 91.37   16 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization   17a 10% -facts-and-circumstances test - 2014. 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   17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization   17a 10% -facts-and-circumstances" test. The organization dual not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how 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, 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 organizati		or loss from the sale of capital							
12       Gross receipts from related activities, etc. (see instructions)       12       5,439,516.         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, check this box and stop here       Section C. Computation of Public Support Percentage         14       89.12 %         15       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a       10% -facts-and-circumstances test - 2014. 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       X         17a       10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this bo		assets (Explain in Part VI.)							
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organization, check this box and stop here       Image: Section C. Computation of Public Support Percentage         14       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Image: State S	12	Gross receipts from related activities,	etc. (see instructi	ons)			12 5	<u>,439,516.</u>	
Section C. Computation of Public Support Percentage         14       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         b 33 1/3% support test - 2013. 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       IX         17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization dualifies as a publicly supported organization         b 10% -facts-and-circumstances test - 2013. If the organization dualifies as a publicly supported organization       Image: second stop here. Explain in Part VI how 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         17a 10% -facts-and-circumstances test - 2013. If the organization dualifies as a publicly supported organization       Image: second stop here. Explain in Part VI how the organization meets t	13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)		
14       Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))       14       89.12 %         15       Public support percentage from 2013 Schedule A, Part II, line 14       15       91.37 %         16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       ▶ 🗶         17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13 or 16a, and line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how 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, 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         10% -facts-and-circumstances test - 2013. 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. The organization qualifies as a publicly supported organization <t< td=""><td><u></u></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	<u></u>								
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#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 per-						
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ						
	ization's benefit and either paid to						
	an average of an ite helpelf						
5	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5		+		+		
<i>i</i> a	Amounts included on lines 1, 2, and						
L-	3 received from disqualified persons						
G	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						
	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	(u) 2010	(0) 2011	(0) 2012	(4) 2010	(0) 2014	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties						
b	and income from similar sources						
b							
	and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
	and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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#### Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC.

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

432024 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

54-6054289 Page 4

1

2

3a

3b

Yes

No

3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

17130204 781789 2018590000

16

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# Schedule A (Form 990 or 990 EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC.

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11				
14			Yes	N
••	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		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	N
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			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
ec	tion C. Type II Supporting Organizations			_
			Yes	N
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
ec	tion D. Type III Supporting Organizations			
			Yes	1
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, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		L
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.			
		3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
ect 1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions)		I	
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below.		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.	:		<u> </u>
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)	:		
1 b c 2	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below.	:	). Yes	
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	:		•
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	:		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	:		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined	:		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify how these activities directly furthered their exempt purposes,	:		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined	: tructions		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these activities constituted substantially all of its activities.	: tructions		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	: tructions		1
1 b c 2 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	: tructions		
1 b c 2 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization determined that these activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	: tructions		1
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1 b c 2 a b 3 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions)         The organization satisfied the Activities Test. Complete line 2 below.         The organization is the parent of each of its supported organizations. Complete line 3 below.         The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)         Activities Test. Answer (a) and (b) below.         Did substantially all of the organization's activities during the tax year directly further the exempt purposes of         the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify         those supported organizations and explain       how these activities directly furthered their exempt purposes,         how the organization was responsive to those supported organizations, and how the organization determined         that these activities constituted substantially all of its activities.         Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more         of the organization's position that its supported organization(s) would have been engaged in? If "Yes," explain in Part VI the         reasons for the organization's involvement.         Parent of Supported Organizations. Answer (a) and (b) below.         Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	: tructions		
1 b c 2 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	2a 2b		
1 b c 2 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions)         The organization satisfied the Activities Test. Complete line 2 below.         The organization is the parent of each of its supported organizations. Complete line 3 below.         The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)         Activities Test. Answer (a) and (b) below.         Did substantially all of the organization's activities during the tax year directly further the exempt purposes of         the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify         those supported organizations and explain       how these activities directly furthered their exempt purposes,         how the organization was responsive to those supported organizations, and how the organization determined         that these activities constituted substantially all of its activities.         Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more         of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the         reasons for the organization's involvement.         Parent of Supported Organizations. Answer (a) and (b) below.         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 Part VI.	2a 2b		

#### Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2

_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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-integra	ated Type III supporting orga	anization (see
		- <b>-</b>		

instructions).

Schedule A (Form 990 or 990-EZ) 2014

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Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions		(continuou)	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemption			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	i		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
-	Applied to underdistributions of prior years			
-	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
_	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>				
<u>c</u>	Excess from 2013			
	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

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Also complete this part for any addition	Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. ional information. (See instructions).
2028 09-17-14	Schedule A (Form 990 or 990-EZ)
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SCHEDULE D (Form 990)	► Com	plete if the org	anization answer	I Statements ed "Yes" to Form 990		2014
Department of the Treasury	Part IV, li	ne 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11 Attach to Form 99	d, 11e, 11f, 12a, or 12 0.	b.	Open to Pub
nternal Revenue Service	Information about S	Schedule D (For	m 990) and its ins	structions is at www.ir		Inspection
Name of the organizat				E COLLEGE OF	F Empl	loyer identification nu
Dout L Organia	WILLIAM & 1 ations Maintaining D					54-6054289
	•			ner Similar Fund:	s of Accour	<b>ILS.</b> Complete if the
organizatio	on answered "Yes" to Form	990, Part IV, IIN		advised funds	(b) Eurod	Is and other accounts
1 Total number at a	and of yoor					
	end of year of contributions to (during ye					
	of grants from (during year)					
	at end of year ion inform all donors and do			ots hold in donor advis	od funds	
-	ion's property, subject to the		-			Yes
	ion inform all grantees, donc					
•	•		•	•		
	poses and not for the benef				•	Yes
impermissible pri Part II Conserv	vation Easements. Co	mploto if the or		d "Voc" to Form 990		Yes 📖
	nservation easements held b					
	on of land for public use (e.g.			1	orically import	ant land area
	of natural habitat	., recreation or e		Preservation of a hist Preservation of a cert		
	on of open space			Freservation of a cen	lined historic s	liuciure
	a through 2d if the organizat	tion hold a quali	find consorvation of	ontribution in the form	of a consonual	tion assemant on the l
day of the tax yea	8 8	lion neiù a quali	neu conservation d		or a conserva	
day of the tax yea	ar.					Held at the End of the Ta
a Total number of o	conservation easements					
	stricted by conservation ease					
	ervation easements on a cert					
	ervation easements included					
	onal Register	., .				
	ervation easements modified					during the tax
year ►	a valion easements moulled	, transferred, re	leased, extinguising	ed, of terminated by the	eorganization	during the tax
· · ·	where property subject to a	conservation ea	sement is located			
	ation have a written policy re					
•	nforcement of the conservation	• • ·	•			Yes
	er hours devoted to monitor					
	ises incurred in monitoring, i	0, I 0,	0		0,	-
-	ervation easement reported of		-	-	•	
	•	. ,	, ,			Yes
	h)(4)(B)(ii)? ribe how the organization rep					
	able, the text of the footnote			•	-	
conservation eas		to the organiza			the organization	on a accounting for
	ations Maintaining C	ollections o	f Art. Historica	al Treasures, or O	ther Simila	ar Assets.
	if the organization answered		•	•		
	n elected, as permitted unde				ment and bala	nce sheet works of art.
	es, or other similar assets he					
	otnote to its financial statem					,,
	n elected, as permitted unde			n its revenue statemen	t and balance	sheet works of art, hist
	er similar assets held for pub					
relating to these i		, -	,,			
-	uded in Form 990, Part VIII,	line 1			▶ \$	
	led in Form 990, Part X					
	n received or held works of a					
	ounts required to be reported					
-	d in Form 990, Part VIII, line			-	¢ 🛋	
	in Form 990, Part X					
					► Ψ	
HA For Paperwork F	Reduction Act Notice, see	the Instruction	s for Form 990.		S	chedule D (Form 990)
32051 0-01-14	,				-	,
			21			
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		OF THE AL			EGE (	OF							
	1 /	& MARY IN		-				054289					
Par	rt III   Organizations Maintaining C	ollections of A	rt, Historical T	reasures, c	or Oth	er Si	milar Ass	ets(continu	ied)				
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of the	e following tha	t are a s	signific	ant use of i	s collection	items				
	(check all that apply):												
а	Public exhibition	c	Loan or exe	change progra	ams								
b	Scholarly research	e	• Other										
с	c Preservation for future generations												
4													
5													
	to be sold to raise funds rather than to be ma						_	Yes	🗌 No				
Par	rt IV Escrow and Custodial Arran							, line 9, or					
	reported an amount on Form 990, Par		5				,	, ,					
1a	Is the organization an agent, trustee, custod	ian or other intermed	diarv for contributio	ns or other as	sets not	t inclu	ded						
	on Form 990, Part X?							Yes	X No				
b	If "Yes," explain the arrangement in Part XIII												
~			liotning table.					Amount					
c	Beginning balance						lc	7 thount					
	Additions during the year						ld						
							le						
e f	Distributions during the year						le 1f						
20	Ending balance Did the organization include an amount on Fe					··· 🖵	<u> </u>	Yes	No				
	If "Yes," explain the arrangement in Part XIII.					inty :	L	165					
	<b>t V</b> Endowment Funds. Complete in					10							
i ui				(c) Two year			raa vaare had		are back				
4	Designing of year balance	(a) Current year 4,482,871.	(b) Prior year		5,275.		3,677,25	k (e) Four y	303,392.				
	Beginning of year balance	4,402,071.	4,023,207		· ·								
	Contributions	212 200	29,761	_	L,749.		222,62		43,683.				
	Net investment earnings, gains, and losses	213,300.	573,148	. 3/8	3,980.		<60,360	·•• 4	172,543.				
	Grants or scholarships			_				_					
е	Other expenditures for facilities												
	and programs	141,230.	143,245	. 142	2,797.		134,240	· ·	142,366.				
	Administrative expenses							_					
g	End of year balance	4,554,941.	, ,	,	3,207.		3,705,27	5. 3,6	577,252.				
2	Provide the estimated percentage of the curr		e (line 1g, column	(a)) held as:									
а	Board designated or quasi-endowment	24.51	_%										
b	Permanent endowment  75.49	%											
с	Temporarily restricted endowment	%											
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.											
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administe	red for t	the org	ganization	_					
	by:							<u> </u>	es No				
	(i) unrelated organizations							3a(i)	X				
	(ii) related organizations							3a(ii)	X				
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?					3b	X				
4	Describe in Part XIII the intended uses of the	organization's endo	owment funds.										
Par	rt VI Land, Buildings, and Equipm	nent.											
	Complete if the organization answere	d "Yes" to Form 990	), Part IV, line 11a. S	See Form 990	, Part X,	line 1	D.						
	Description of property	(a) Cost or c	ther (b) Cos	t or other	(c) A	ccum	ulated	(d) Book	value				
		basis (investr	• •	(other)	. ,	precia							
1a	Land												
	Buildings												
	Leasehold improvements		38	34,914.		301	,226.	83	,688.				
	Equipment			35,541.			,478.		,063.				
	Other			14,250.			,250.	- •	0.				
	I. Add lines 1a through 1e. (Column (d) must e			-			<u>,</u>	121	,751.				
1010		quari onn 000, i alt					Schedu	le D (Form					

SOCIETY OF	THE ALUMNI	OF THE COLLEGI	
	MARY IN VIRG	INIA, INC.	54-6054289 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes			
(a) Description of security or Category (including name of security)	(b) Book value	(c) Method of valu	ation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) ENDOWMENT FUNDS HELD BY (B) OTHERS	4,554,94		AR MARKET VALUE
	4,554,94		AK MARKEI VALUE
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	4,554,94	1.	
Part VIII Investments - Program Related.	· · ·		
Complete if the organization answered "Yes	" to Form 990, Part IV,	line 11c. See Form 990, Pa	t X, line 13.
(a) Description of investment	(b) Book value		ation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.	•		
		line 11d See Form 000 De	t V line 15
Complete if the organization answered "Yes	Description	ine 110. See Form 990, Pa	(b) Book value
·			
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) I	ne 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes	" to Form 990, Part IV,		90, Part X, line 25.
1.(a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DUE TO COLLEGE		18,929.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		10.000	
Total. (Column (b) must equal Form 990, Part X, col. (B) I	ne 25.) 🕨	18,929.	

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

	SOCIETY OF THE ALUMNI OF T			- 4	COF 4000
	dule D (Form 990) 2014 WILLIAM & MARY IN VIRGINIA				6054289 <sub>Page</sub> 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem		h Revenue per F	Returr	า.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				2 21 2 2 2 2
1	Total revenue, gains, and other support per audited financial statements			1	3,318,302.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments				
b	Donated services and use of facilities	. 2b	5,000.	<u> </u>	
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	2d	4,882.	•	
е	Add lines 2a through 2d			2e	9,882.
3	Subtract line 2e from line 1			3	3,308,420.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b	<200,667.	• >	
с	Add lines <b>4a</b> and <b>4b</b>			4c	<200,667.>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,107,753.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents Wi	ith Expenses per	r Retu	ırn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	•			
1	Total expenses and losses per audited financial statements			1	2,912,404.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	5,000.		
b	Prior year adjustments	2b			
с	Other losses				
d			1,331,980.	•	
е	Add lines 2a through 2d			2e	1,336,980. 1,575,424.
3	Subtract line 2e from line 1			3	1,575,424.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines <b>4a</b> and <b>4b</b>	-		4c	0.
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )			5	1,575,424.
Pa	rt XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART V, LINE 4:

#### TO SUPPORT THE MISSION AND PROGRAMS OF THE ALUMNI ASSOCIATION.

PART X, LINE 2:

THE ALUMNI ASSOCIATION IS A NONSTOCK CORPORATION THAT HAS BEEN DETERMINED

BY THE INTERNAL REVENUE SERVICE TO BE EXEMPT FROM TAXES ON INCOME DERIVED

FROM ACTIVITIES RELATED TO ITS TAX-EXEMPT PURPOSE UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE. CERTAIN ACTIVITIES OF THE ALUMNI

ASSOCIATION ARE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. NO SUCH

TAXES WERE DUE FOR THIS YEAR. THE ASSOCIATION HAS DETERMINED THAT IT DOES

NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE

30, 2015. TAX YEARS ENDING ON OR AFTER JUNE 30, 2012, REMAIN SUBJECT TO 432054
10-01-14
Schedule D (Form 990) 2014
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RENTAL EXPENSES	4,882
RENTAL EXPENSES	4,002
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD - NETTED WITH REVENUE ON TAX RETURN	-91,321
FUNDRAISING EXPENSES	-109,346
TOTAL TO SCHEDULE D, PART XI, LINE 4B	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD NETTED WITH REVENUE ON TAX RETURN	91,321
RENTAL EXPENSES	4,882
UNREALIZED LOSS	
FUNDRAISING EXPENSES	
TOTAL TO SCHEDULE D, PART XII, LINE 2D	

WILLIAM & MARY IN VIRGINIA, INC.

Schedule D (Form 990) 2014

54-6054289 Page 5

432055 10-01-14

Schedule D (Form 990) 2014

Part XIII | Supplemental Information (continued)

EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES

Department of the Treasury	Complete if the	e organization organization er bout Schedule G OF THE	ation Regarding answered "Yes" to tered more than \$1 Attach to Form 990 (Form 990 or 990-EZ) ALUMNI OF	Form 9 5,000 ) or Fo <u>and its</u> THE	990, P on Fo rm 99 instru CO	art IV, lines 17, 18, c rm 990-EZ, line 6a. i0-EZ. i <u>ctions is at www.irs.g</u> ILLEGE OF	or 19,	or if the r <u>m 990.</u> Employer i	OMB No. 1545-0047 <b>2014</b> Open to Public Inspection dentification numb
Eundraisin			IN VIRGINI				ing 17	54-605	
	mplete this par		e organization answe	erea ~ r	es" to	Form 990, Part IV, I	ine 17	. Form 990-	EZ filers are not
<ol> <li>Indicate whether the c</li> <li>a Mail solicitation</li> <li>b Internet and en</li> <li>c Phone solicitat</li> <li>d In-person solici</li> <li>2 a Did the organization I key employees listed</li> <li>b If "Yes," list the ten h compensated at leas</li> </ol>	nail solicitations ions tations nave a written c in Form 990, P ighest paid indi	or oral agreeme art VII) or entity ividuals or entit	e Solicita f Solicita g Special nt with any individual in connection with p	tion of tion of fundra l (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees	<u>г</u>	f <b>es No</b> to be
(i) Name and address of or entity (fundra		(ii)	Activity	have c	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paio r retained b undraiser ed in col. <b>(i)</b>	y) to (or retained b
				Yes	No				
Total									
3 List all states in which or licensing.	the organizatio	n is registered	or licensed to solicit	contrib	oution	s or has been notified	d it is	exempt fror	n registration
LHA For Paperwork Red	uction Act Not	ice, see the In	structions for Form	990 or	990-	EZ. S	Scher	lule G (Forn	n 990 or 990-EZ) 20
432081 08-28-14		,						- (	, <b></b> ,

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Sch	edu	SOCIETY le G (Form 990 or 990-EZ) 2014 WILLIAM		F THE ALUM MARY IN V				-6054289 Page 2
	art							
		of fundraising event contributions and g	ross ir	ncome on Form 990	D-EZ, lines 1 and 6	b. List e	vents with gross recei	ots greater than \$5,000.
				(a) Event #1	(b) Event #2	2	(c) Other events	(d) Total events
				3.110 <b></b>			NONE	(add col. (a) through
			NY	AUCTION	(	<u>,                                     </u>	(t - t - 1	- col. <b>(c)</b> )
ne				(event type)	(event type)	)	(total number)	
Revenue	1	Gross receipts		254,915.				254,915.
£	2			83,650.				83,650.
	2	Less: Contributions						
	3	Gross income (line 1 minus line 2)	-	171,265.				171,265.
	4	Cash prizes						
	5	Noncash prizes						
ses		Noncash prizes						
Direct Expenses	6	Rent/facility costs		73,135.				73,135.
ect	7	Food and beverages						
Ē		Entertainment						
	8	Entertainment Other direct expenses		36,211.				36,211.
	10			column (d)				109,346.
		Net income summary. Subtract line 10 from						61,919.
Pa	art I	<b>3</b>	answ	ered "Yes" to Form	990, Part IV, line	19, or re	ported more than	
	-	\$15,000 on Form 990-EZ, line 6a.			( ) Dull to be (in al	40 m4		
IUe				<b>(a)</b> Bingo	(b) Pull tabs/inst bingo/progressive		(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue						2go		
Å	1	Gross revenue						
SS	2	Cash prizes						
Expenses								
	3	Noncash prizes						
Direct	4	Rent/facility costs						
_	5	Other direct expenses						
	Ť			Yes %	Yes	%	Yes %	-
	6	Volunteer labor		No	□ No		No	
	7	Direct expense summary. Add lines 2 throug	ıh 5 in	column (d)			Þ	
		, , , ,	,	( )				
	8	Net gaming income summary. Subtract line	7 from	l line 1, column (d)			►	
•	<b>5</b> -2-2	ter the state(s) is which the ergenization cond	luoto a	aming activition				
		ter the state(s) in which the organization cond he organization licensed to conduct gaming a		-	states?			Yes No
		No," explain:						
		· · ·						
		ere any of the organization's gaming licenses r				he tax ye	ear?	Yes No
k	) If "	Yes," explain:						
4000		2 29 14					Schodula C (Ca	rm 990 or 990-EZ) 2014
4320	o2 U	3-28-14					Schedule G (FO	1111 330 01 330-EZ) 20 14
					27			

<u> </u>	SOCIETY OF THE ALUMNI OF THE COLLEGE OF edule G (Form 990 or 990-FZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. 54-6	505 <i>1</i>	200	
	edule G (Form 990 or 990 EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. 54-6 Does the organization conduct gaming activities with nonmembers?		Yes	Page 3
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		res	
	to administer charitable gaming?		Yes	
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount			
	of gaming revenue retained by the third party $\blacktriangleright$ \$			
с	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation <b>&gt;</b> \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
47				
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	🗌 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
_	organization's own exempt activities during the tax year 🕨 \$			
Pa	<b>rt IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I	ines 9,	9b, 1	0b, <b>1</b> 5b,
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).			
43208	33 08-28-14 Schedule G (Forr	n 990 -	or 990	)-EZ) 2014
31	28 2014.05060 SOCIETY OF THE ALUMNI OF	тн	201	85902

17130204 781789 2018590000

Schedule G (Form 990 or 990-EZ)	ALUMNI OF THE COLLEGE IN VIRGINIA, INC.	OF 54-6054289 Page 4
432084 05-01-14		Schedule G (Form 990 or 990-EZ)
UD-U I-14	29	

SCHEDULE I			irants and Oth					OMB No. 1545-0047	7
(Form 990)			vernments, ar ete if the organizatio					2014	
Department of the Treasury Internal Revenue Service		-	-	Attach to For	m 990.			Open to Public	;
						at <u>www.irs.gov/form99</u>	00.	Inspection	
Name of the organizati			MNI OF THE VIRGINIA, I		)E <sup>r</sup>			Employer identification num 54-605428	
Part I General Ir	nformation on Grants a	Ind Assistance							
1 Does the organiz	zation maintain records	to substantiate the	e amount of the grants	s or assistance, the	e grantees' eligibilit	ty for the grants or ass	sistance, and the seled	ction	
criteria used to a	ward the grants or assi	stance?	-					Yes X	No
2 Describe in Part	IV the organization's pro	ocedures for monit	oring the use of grant	funds in the Unite	d States.				
	d Other Assistance to nat received more than	•			1 0	anization answered "	Yes" to Form 990, Par	t IV, line 21, for any	
·	Idress of organization	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant	
. ,	vernment		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance		
0 Entontatal arms	rat of a action = E01(-1/0) =		appirations listed in th	l line 1 tabla		I		└	
	er of section 501(c)(3) a			ie line i tadle				······ 【	
	er of other organization Reduction Act Notice							Schedule I (Form 990) (2	014
	A CLINDING ACLINDING	,							

Schedule I (Form 990) (2014)

Part III

# 4) WILLIAM & MARY IN VIRGINIA, INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CHOLARSHIPS	20	60,500.	0.	CASH	

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

PART I, LINE 2:

AMOUNTS WERE UNDER \$5,000 FOR EACH PARTICIPANT. NO REQUIREMENTS FOR

DISCLOSURE.

54-6054289

Page 2

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. 2014 Open to Public Inspection

OMB No. 1545-0047

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 SOCIETY OF THE ALUMNI OF THE COLLEGE OF Emplo WILLIAM & MARY IN VIRGINIA, INC. 54

Employer identification number 54-6054289

FORM 990, PART I, DOING BUSINESS AS:

WILLIAM & MARY ALUMNI ASSOCIATION

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES: THE WILLIAM & MARY ALUMNI ASSOCIATION (WMAA) OF THE COLLEGE OF WILLIAM & MARY ENTERED INTO A MEMORANDUM OF UNDERSTANDING WITH THE COLLEGE OF WILLIAM & MARY (COLLEGE) DATED JUNE 26, 2014. WHILE REMAINING THE INDEPENDENT VOICE AND ADVOCATE OF THE ALUMNI AS IT HAS FOR GENERATIONS AND AN ENTITY SEPARATE AND INDEPENDENT FROM THE COLLEGE, THE MEMORANDUM EXPRESSES THE INTENTION TO WORK TOGETHER AS TRUE PARTNERS WITH THE COLLEGE TO INTEGRATE THE STAFF OF THE WMAA AND STAFF FROM DEVELOPMENT TO FORM THE COLLEGE'S NEW OFFICE OF UNIVERSITY ADVANCEMENT (OUA) AND TO CONTINUE TO EXPAND PROGRAMS AND SERVICES TO BE FAITHFUL TO THE MISSION. NOTWITHSTANDING, THE WMAA RETAINS ITS 501(C)(3) STATUS AND CONTINUES TO BE MANAGED BY ITS BOARD OF DIRECTORS. ALL EMPLOYEES WERE TRANSFERRED FROM THE ALUMNI ASSOCIATION TO THE OUA EFFECTIVE OCTOBER 10, 2014. THE OUA WILL PROVIDE SUFFICIENT STAFFING AND OTHER RESOURCES TO CARRY OUT THE WMAA MISSION. NO ASSETS OF WMAA WILL BE TRANSFERRED AS PART OF THE MEMORANDUM.

 WHILE NO CHANGES TO THE WMAA BALANCE SHEET ARE DUE TO THE MEMORANDUM,

 NOTABLE PERMANENT CHANGES IN THE FINANCIAL STATEMENTS ARE THE REMOVAL

 OF SALARY AND BENEFIT OBLIGATIONS FOR THE WMAA AND THE EXPENSES FOR

 PUBLICATION OF THE ALUMNI MAGAZINE, FOR WHICH THE BOARD MAINTAINS

 EDITORIAL INPUT. THE BOARD REMAINS COMMITTED TO THE COST-EFFECTIVE

 APPLICATION OF FUNDS AND RESOURCES IN PROVIDING WORLD CLASS ALUMNI

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

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 17130204 781789 2018590000
 2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>				
Name of the organization SOCIETY OF THE ALUMNI OF THE COLLEGE OF	Employer identification number				
WILLIAM & MARY IN VIRGINIA, INC.	54-6054289				
ENGAGEMENT, AND TO THE PRUDENT INVESTMENT AND MANAGEMENT OF INVESTED					
RESOURCES TO ACHIEVE GROWTH. THE BOARD OF WMAA WILL CONTI	NUE TO BE				
POLICYMAKERS, STRONG REPRESENTATIVES AND ADVOCATES OF THE	ALUMNI				
POPULATION INTO THE LIFE OF THE COLLEGE, AND WILL CONTINU	E FIDUCIARY				
MANAGEMENT OF WMAA ASSETS AND OVERSIGHT OF THE COLLEGE'S	ALUMNI				
ENGAGEMENT AND RELATED ACTIVITIES CONSISTENT WITH THE WMAA ARTICLES OF					
INCORPORATION AND BY-LAWS. THE PORTION OF THE OUA BUDGET	THAT RELATES				
TO ALUMNI ENGAGEMENT ACTIVITIES AND ALUMNI SERVICES WILL BE PRESENTED					
TO THE WMAA BOARD AND THE BOARD'S CONSENT WILL BE SOUGHT,	CONCURRENT				
WITH THE BOARD OF THE WMAA ESTABLISHING ITS OWN FISCAL YEAR OPERATING					
BUDGET FOR PROGRAMMING AND SERVICES. THE WMAA WILL RETAIN AUTHORITY					
OVER AND APPROVE ANNUAL BUDGETS IN SUPPORT OF ALUMNI ENGAGEMENT FROM					
THE FOLLOWING SOURCES: INCOME FROM ENDOWMENTS OR QUASI-EN	DOWMENTS,				
ANNUAL RESTRICTED GIFTS, REVENUE FROM AFFINITY PROGRAMS,	ALUMNI HOUSE				
OPERATIONS, MERCHANDISING ALUMNI RELATED PRODUCTS AND NET	REVENUE FROM				
MISSION RELATED ACTIVITIES.					

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ALUMNI CAREER MANAGEMENT - PROVIDING NETWORKING COMMUNITIES, WEBINARS, ONLINE GROUP PROGRAMMING, CAREER EVENTS AND OTHER IMPACTFUL PROFESSIONAL RESOURCES TO AID ALUMNI THROUGHOUT THEIR CAREER DEEPENING THE LIFELONG RELATIONSHIP BETWEEN WILLIAM & MARY AND ITS ALUMNI.

ALUMNAE & AFFINITY GROUP INITIATIVES - THAT UNITE ALUMNI AROUND SHARED INTERESTS, EXPERIENCES AND IDENTITIES CREATING STRONGER VALUE DRIVEN NETWORKS THAT BENEFIT EACH OTHER AND THE UNIVERSITY.

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Schedule O (Form 990 or 990-EZ) (2014)

17130204 781789 2018590000 2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

432212 08-27-14

Schedule O (Form 990 or 990 EZ) (2014)           Name of the organization         SOCIETY OF THE ALUMNI OF THE COLLEGE OF           WILLIAM & MARY IN VIRGINIA, INC.	Page 2 Employer identification number 54-6054289
VOLUNTEER MANAGEMENT - PROVIDING VOLUNTEERS WITH THE HIGH	EST QUALITY OF
LEADERSHIP, TRAINING AND SUPPORT TO AID IN THE ENGAGEMENT	EFFORT.
STUDENT OUTREACH - ENGAGING NEW MEMBERS OF THE TRIBE EARL	Y TO EDUCATE
AND TO PROMOTE A DYNAMIC, LONG-LASTING RELATIONSHIP FOR A	LIFETIME.
ALUMNI ADMISSION AND LEGACY OUTREACH - SPOUSES, PARENTS,	CHILDREN AND
SIBLINGS SHARE A COMMON IDENTITY THROUGH THE TRIBE AND TH	E ALUMNI
ASSOCIATION WORKS TO FOSTER THESE CONNECTIONS AND HONOR T	HE POWER OF
LEGACY NETWORKS.	
AWARDS AND HONORS - ACTIVELY RECOGNIZING OUTSTANDING AND	DEDICATED
ALUMNI, FACULTY, COACHES AND STUDENTS THROUGH ROBUST AWAR	DS PROGRAMS
THAT RECOGNIZE THE BEST OF THE BEST IN PERPETUITY.	
FORM 990, PART VI, SECTION A, LINE 7A:	
ALL MEMBERS OF THE ASSOCIATION CAST A BALLOT FOR ALL PERS	ONS ACCEPTED FOR
NOMINATION TO THE GOVERNING BODY UPON THEIR CONSENT TO BE	PLACED ON THE
BALLOT.	
FORM 990, PART VI, SECTION A, LINE 7B:	
CHANGES IN GOVERANCE AFFECTING ASSOCIATION MEMBERSHIP, NO.	MINATIONS AND
ELECTIONS, DISSOLUTION, OR PURPOSES OF THE ASSOCIATION MA	Y ONLY BE AMENDED
BY MEMBERSHIP VOTE.	

FORM 990, PART VI, SECTION B, LINE 11:

A COPY OF THE 990 IS PROVIDED TO THE MEMBERS OF THE BOARD FOR THEIR

APPROVAL PRIOR TO FILING.

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014) Page 2 Name of the organization SOCIETY OF THE ALUMNI OF THE COLLEGE OF Employer identification number WILLIAM & MARY IN VIRGINIA, INC. 54-6054289 FORM 990, PART VI, SECTION B, LINE 12C: AT BOARD OF DIRECTORS MEETINGS, MEMBERS ARE REMINDED OF THE ORGANIZATION'S POLICY. PER ORGANIZATION'S BYLAWS, MEMBERS ARE PROHIBITED FROM VOTING ON A MATTER WHERE THE MEMBER HAS A CONFLICT OF INTEREST. ANY OUESTIONABLE INTERESTS ARE COMMUNICATED, DOCUMENTED AND VOTED ON AT THE MEETING IN WHICH

THEY ARISE.

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

COMPENSATION OF KEY EMPLOYEES IS APPROVED BY THE BOARD THROUGH THE ANNUAL

BUDGET PROCESS. EXECUTIVE DIRECTOR'S COMPENSATION IS APPROVED BY THE

COLLEGE OF WILLIAM & MARY'S BOARD OF VISITORS.

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

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE

ORGANIZATION'S WEBSITE, WWW.WMALUMNI.COM. THE FINANCIAL STATEMENTS ARE

AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S BOARD OF DIRECTORS INCLUDES A FINANCE COMMITTEE THAT

IS RESPONSIBLE FOR THE OVERSIGHT OF THE INDEPENDENT AUDIT.

SCHEDULE R	SCHEDULE R Polated Organizations and Unrelated Partnerships						OMB No. 1545-0047			
(Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.						201			-	
Department of the Treasury	Attach to Form 990. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.							pen to P Inspecti		
Internal Revenue Service		E ALUMNI OF THE COI	LLEGE OF	at www.irs.gov/forr	n990.	Employ	ver identifi	•		
Nume of the organize		Y IN VIRGINIA, INC.					-6054			
Part I Identifica	tion of Disregarded Entities Complet	te if the organization answered "Yes"	on Form 990, Part IV, line 3	3.						
	(a)	(b)	(c) (d		(e)			(f)		
Name, address, and EIN (if applicable) of disregarded entity		Primary activity Legal domicile (state of foreign country)		or Total inco	me End-of-year	End-of-year assets		Direct controlling entity		
		_								
		_								
		-								
		_								
Part II Identifica organizati	tion of Related Tax-Exempt Organiz	l ations Complete if the organization a	answered "Yes" on Form 990	), Part IV, line 34 b	ecause it had one o	or more relat	ted tax-exe	mpt		
	(a)	(b)	(c)	(d)	(e)	(1	(f)		(g) Section 512(b)(13)	
Name, address, and EIN of related organization		Primary activity	Legal domicile (state or	Exempt Code	Public charity		Direct controlling		controlled	
			foreign country)	section	status (if section 501(c)(3))	en	tity		ity?	
	ATTITIN & NADY ROUNDARTON				301(0)(3))			Yes	No	
THE COLLEGE OF WILLIAM & MARY FOUNDATION -		ADMINISTER ENDOWMENT ASSETS OF THE COLLEGE OF								
54-0734117, 5300 DISCOVERY PARK BLVD, WILLIAMSBURG, VA 23188		WILLIAM AND MARY VIRGINIA		501(C)3		THE COLLEGE OF WILLIAM & MARY			x	
/	NILLIAM & MARY - 54-6001718									
102 RICHMOND ROP		-								
WILLIAMSBURG, VA	A 23186	EDUCATION	VIRGINIA	115					x	
		4								
		4								

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

Schedule R (Form 990) 2014

#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF Schedule R (Form 990) 2014 WILLIAM & MARY IN VIRGINIA, INC.

54-6054289 Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate ttions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener manag partn	<sup>Il or</sup> Percentage <sup>ing</sup> ownership er?
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No
	1										
	1										

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512(1 contri ent	(i) ction (b)(13) trolled tity?
		country)				400010			No

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

Schedule R (Form 990) 2014 WILLIAM & MARY IN VIRGINIA, INC.

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
с	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
0	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q	Х	
r	Other transfer of cash or property to related organization(s)	1r		X
S	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)	20		

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF Schedule R (Form 990) 2014 WILLIAM & MARY IN VIRGINIA, INC.

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

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

(a)	(b)	(c)	(d)		)	(f)	(g)	0	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	e Are partners 501(c orgs	all	Share of	Share of	Dispr	opor-	Code V-UBI	General c	Percentage
of entity	· · · · · · · · · · · · · · · · · · ·	(state or foreign	(related, unrelated,	501(c	s)(3)	total	end-of-year	tior alloca	nate tions?	amount in box 20	managing partner?	ownership
		country)		Yes		income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes NO	
												<u> </u>
				$\left  \right $								

Schedule R (Form 990) 2014

## Part VII Supplemental Information

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

432165	08-14-14	

## TAX RETURN FILING INSTRUCTIONS

## FORM 990-T

## FOR THE YEAR ENDING

JUNE 30, 2015

SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC. P.O. BOX 2100 WILLIAMSBURG, VA 23187
DIXON HUGHES GOODMAN LLP 701 TOWN CENTER DRIVE, SUITE 700 NEWPORT NEWS, VA 23606-4295
NO AMOUNT IS DUE. THE ORGANIZATION WILL RECEIVE A REFUND IN THE AMOUNT OF \$4,000
NO AMOUNT IS DUE.
DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027
MAY 16, 2016
THE RETURN SHOULD BE SIGNED AND DATED.

	EXTENDED TO M	AY	16, 2016		_				
Form <b>990-T</b>	Exempt Organization Bus	sine	ss Income Ta	ax Returr	ו L	OMB No. 1545-0687			
	(and proxy tax und	er se	ction 6033(e))						
	For calendar year 2014 or other tax year beginning $egin{array}{cccccccccccccccccccccccccccccccccccc$				5.	2014			
Department of the Treasury	Information about Form 990-T and its instruct				L				
Internal Revenue Service	Do not enter SSN numbers on this form as it may			tion is a 501(c)(3)		501(c)(3) Organizations Only			
A Check box if address changed	Name of organization ( Check box if name cl	•	,	<b>O</b> E	(Empl	oyer identification number oyees' trust, see			
<b>B</b> Exempt under section $\mathbf{X}$ 501( <b>c</b> )( <b>3</b> )									
	(See instructions.)								
	529(a) WILLIAMSBURG, VA 23187 531190 541800								
Book value of all assets									
12,255,369.	G Check organization type ► 🛛 🗶 501(c) corporation	ı [	501(c) trust	401(a) trust		Other trust			
H Describe the organizatio	n's primary unrelated business activity. ► COMMISS	ION	S FROM TRAVE	EL PROGRA	М				
	the corporation a subsidiary in an affiliated group or a parer	ıt-subsi	diary controlled group?	►	Ye	s X No			
If "Yes," enter the name	and identifying number of the parent corporation.								
	► ELAINE CAMPBELL			ne number <b>&gt;</b> 7					
	d Trade or Business Income		(A) Income	(B) Expenses	5	(C) Net			
1a Gross receipts or sal		4.							
<b>b</b> Less returns and allo		1c 2							
<ul><li>2 Cost of goods sold (\$</li><li>3 Gross profit. Subtrac</li></ul>	Schedule A, line 7) t line 2 from line 1c	2							
	ne (attach Schedule D)	4a							
<ul> <li>b Net gain (loss) (Form</li> </ul>	4797, Part II, line 17) (attach Form 4797)	4b							
	n for trusts	4c							
	artnerships and S corporations (attach statement)	5							
6 Rent income (Schedu		6							
	ced income (Schedule E)	7							
	valties, and rents from controlled organizations (Sch. F) $_{\cdots}$	8							
	f a section $501(c)(7)$ , (9), or (17) organization (Schedule G)	9							
	ivity income (Schedule I)	10							
<ol> <li>Advertising income (</li> <li>Other income (See in</li> </ol>	Schedule J) structions; attach schedule) <b>STATEMENT</b> 1	11 12	70,403.			70,403.			
	s 3 through 12	13	70,403.			70,403.			
	ons Not Taken Elsewhere (See instructions for								
(Except for	contributions, deductions must be directly connected	d with	the unrelated business	income.)					
14 Compensation of of	ficers, directors, and trustees (Schedule K)				14				
					15	20,456.			
	папсе				16				
					17				
	edule)				18 19				
<ul><li>19 Taxes and licenses</li><li>20 Charitable contribut</li></ul>	ions (See instructions for limitation rules)				20				
	Form 4562)				20				
	aimed on Schedule A and elsewhere on return				22b				
					23				
	erred compensation plans				24				
25 Employee benefit pr	ograms				25	8,771.			
26 Excess exempt expe	enses (Schedule I)				26				
27 Excess readership of	osts (Schedule J)				27	10 000			
	ttach schedule)				28	12,263. 41,490.			
29 Total deductions	s. Add lines 14 through 28 taxable income before net operating loss deduction. Subtrac	t line 90	) from line 12		29 30	28,913.			
	laxable income before net operating loss deduction. Subtraction (limited to the amount on line 30)				30 31	28,913.			
	taxable income before specific deduction. Subtract line 31 fr				32	0.			
	Generally \$1,000, but see line 33 instructions for exceptions				33	1,000.			
	s taxable income. Subtract line 33 from line 32. If line 33 is (					-			
	·	<u></u>			34	0.			
423701 01-13-15 LHA For Pa	perwork Reduction Act Notice, see instructions.					Form <b>990-T</b> (2014)			
		42							

17130204 781789 2018590000 2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

SOCIETY OF THE ALUMNI OF THE COLLEGE	0	F
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	Tax Computation								
35 Org	Tax Computation								
	janizations Taxable as Corpora	tions. See instru	uctions for tax co	omputation.					
Con	ntrolled group members (sectior	is 1561 and 156	63) check here 🕨	See instruction	ctions and:				
<b>a</b> Ente	er your share of the \$50,000, \$2	25,000, and \$9,9	925,000 taxable i	income brackets (in t	that order):				
(1)	\$	(2) \$		(3) \$					
<b>b</b> Ente	er organization's share of: (1) A	dditional 5% tax	x (not more than	\$11,750) \$			_		
	Additional 3% tax (not more that						_		
	ome tax on the amount on line 3						►	- 35c	
	sts Taxable at Trust Rates. See								
	Tax rate schedule or		•					36	
37 Pro	xy tax. See instructions								
	ernative minimum tax								
39 Tota	al. Add lines 37 and 38 to line 3	5c or 36 which	ever annlies					39	
Part IV	Tax and Payments								
	eign tax credit (corporations atta	ach Form 1118	trusts attach For	rm 1116)		40a			
	er credits (see instructions)					40b		-	
	neral business credit. Attach For							-	
	dit for prior year minimum tax (a							-	
								40e	
	al credits. Add lines 40a throug								
41 Jub 40 Oth	otract line 40e from line 39 er taxes. Check if from: Fo	4055	Form 0611		Form 0066		Other ( )	41	
								43	
	vments: A 2013 overpayment cr					44a	4,000	_	
	14 estimated tax payments					44b	4,000	<u>·</u>	
	deposited with Form 8868					44c		_	
<b>d</b> Fore	eign organizations: Tax paid or v	vithheld at sour	ce (see instructio	ons)	····· _	44d		_	
	kup withholding (see instruction					44e		_	
	dit for small employer health ins					44f		_	
g Oth	er credits and payments:		orm 2439	T					
	Form 4136	[ ] 01	ther	I (	otal 🕨 📘	44g			4 0 0
45 Tot	al payments. Add lines 44a thro	ugh 44g						45	4,00
	imated tax penalty (see instruction								
	<b>due.</b> If line 45 is less than the t								4 0 0
48 Ove	erpayment. If line 45 is larger th	an the total of li			id		1	48	4,00
							Refunded 🕨		1 00
<b>49</b> Ente	er the amount of line 48 you wa				ormatio	0 (000		49	4,00
49 Ente Part V	Statements Regarding	ng Certain	Activities a	and Other Info			instructions)		
49 Ente Part V 1 At any ti	Statements Regardin ime during the 2014 calendar ye	ng Certain ar, did the orgai	Activities a	and Other Info	ature or othe	er autho	instructions) ority over a financial a	account (bank,	
49 Ente Part V I At any ti securitie	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country	n <b>g Certain</b> ar, did the orgai ? If YES, the org	Activities a nization have an i ganization may ha	and Other Info interest in or a signa ave to file Form FinC	ature or othe CEN Form 1	er autho 14, Rep	instructions) ority over a financial a	account (bank,	Yes
49 Ente Part V I At any ti securitie	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country	n <b>g Certain</b> ar, did the orgai ? If YES, the org	Activities a nization have an i ganization may ha	and Other Info interest in or a signa ave to file Form FinC	ature or othe CEN Form 1	er autho 14, Rep	instructions) ority over a financial a	account (bank,	Yes
49 Enter Part V At any the securitie Account During the If YES, security	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country is. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the orga	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution from unization may have	Activities a nization have an ganization may he here m, or was it the gran	and Other Info interest in or a signa ave to file Form FinC ntor of, or transferor to, a	ature or othe CEN Form 1	er autho 14, Rep	instructions) ority over a financial a	account (bank, Ind Financial	Yes
49 Enter Part V At any the securitie Account During the If YES, sec B Enter the	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the organ e amount of tax-exempt interest	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution fror inization may have received or accc	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Info interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year \$	ature or othe CEN Form 1 a toreign trust	er autho 14, Rep	instructions) ority over a financial a port of Foreign Bank a	account (bank, Ind Financial	Yes
49 Ente Part V At any ti securitie Account During the if YES, se B Enter the Schedule	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receiv- te instructions for other forms the orga e amount of tax-exempt interest of A - Cost of Goods S	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution fror nization may have received or acc old. Enter me	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Info interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶	ature or othe CEN Form 1 a toreign trust	er autho 14, Rep ?	instructions) ority over a financial a port of Foreign Bank a	account (bank, Ind Financial	Yes
49 Ente Part V At any til securitie Account During the if YES, se Enter the ichedule Inventor	Statements Regardin ime during the 2014 calendar ye as, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the orga e amount of tax-exempt interest <b>a</b> A - Cost of Goods S ry at beginning of year	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution fror nization may have received or acc old. Enter me	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Infc interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at 6	ature or othe CEN Form 1 a toreign trust <b>N/A</b> end of year	er autho 14, Rep ?	instructions) ority over a financial a port of Foreign Bank a	account (bank, Ind Financial	Yes
49 Entr Part V At any til securitie Account bright f YES, se B Enter the chedule I Inventor Purchas	Statements Regarding ime during the 2014 calendar ye as, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the orga e amount of tax-exempt interest <b>E A - Cost of Goods S</b> ry at beginning of year ses	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution fror nization may have received or acc old. Enter me 1 2	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Infc interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good	ature or othe CEN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub	er autho 14, Rep ? tract lir	instructions) ority over a financial a oort of Foreign Bank a ne 6	account (bank, Ind Financial	Yes
49 Entr Part V At any til securitie Account bright f YES, se B Enter the chedule I Inventor Purchas	Statements Regardin ime during the 2014 calendar ye es, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receivu e instructions for other forms the orga e amount of tax-exempt interest of A - Cost of Goods S ry at beginning of year	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror mization may have received or acc Old. Enter me 1 2 3	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Infc interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good	ature or othe CEN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub	er autho 14, Rep ? tract lir	instructions) ority over a financial a port of Foreign Bank a	account (bank, Ind Financial	Yes
49 Enter Part V At any ti securitie Account frYES, se Enter the checkles Cost of I Additional	Statements Regarding ime during the 2014 calendar ye as, or other) in a foreign country its. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the organization e amount of tax-exempt interest <b>A - Cost of Goods S</b> ry at beginning of year labor	ng Certain ar, did the organ ? If YES, the org foreign country e a distribution fror nization may have received or acc old. Enter me 1 2	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Infc interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good	ature or othe EN Form 1 a toreign trust <b>N/A</b> end of year Is sold. Sub Enter here a	er autho 14, Rep ? tract lir nd in Pa	instructions) ority over a financial a oort of Foreign Bank a ne 6 art I, line 2	account (bank, Ind Financial	Yes
49 Ente Part V At any ti securitie Account During the if YES, see Enter the ichedule Inventor Purchas Cost of I Additiona b Other co	Statements Regardia ime during the 2014 calendar ye es, or other) in a foreign country ts. If YES, enter the name of the e tax year, did the organization receive e instructions for other forms the orga e amount of tax-exempt interest <b>E A - Cost of Goods S</b> ry at beginning of year labor al section 263A costs (att. schedule) osts (attach schedule)	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror mization may have received or acc Old. Enter me 1 2 3	Activities a nization have an ganization may ha here m, or was it the gran to file. trued during the t	and Other Info interest in or a signa ave to file Form FinC hter of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of	ature or othe CEN Form 1 a toreign trust <b>N/A</b> end of year <b>Is sold.</b> Sub Enter here an of section 2	er autho 14, Rep ? tract lir nd in Pa 63A (w	instructions) ority over a financial a oort of Foreign Bank a ne 6 art I, line 2	account (bank, Ind Financial	Yes
49 Ente Part V 1 At any ti securitie Account 1 YES, se 3 Enter the 6 Chedule 1 Inventor 2 Purchas 3 Cost of I 4 a Additiona b Other co 5 Total. A	Statements Regarding ime during the 2014 calendar ye as, or other) in a foreign country its. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the organization e amount of tax-exempt interest <b>A - Cost of Goods S</b> ry at beginning of year ases labor disection 263A costs (att. schedule) osts (attach schedule) add lines 1 through 4b	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror inization may have received or acc Old. Enter me 1 2 3 4a 4b 5	Activities a nization have an ganization may have here m, or was it the gran- to file. crued during the t ethod of invent	and Other Infc interest in or a signa ave to file Form FinC htor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of property proo the organizati	Ature or othe EN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub Enter here an of section 2 duced or ac ion?	er autho 14, Rep ? tract lir nd in Pa 63A (w quired	instructions) ority over a financial a oort of Foreign Bank a ne 6 art I, line 2 /ith respect to for resale) apply to	6 7	Yes
49 Ente Part V At any ti securitie Account During the if YES, se B Enter the Schedule I Inventor Purchas Cost of I A dditiona b Other co Total. A	Statements Regardia ime during the 2014 calendar ye es, or other) in a foreign country is. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the orga e amount of tax-exempt interest <b>A - Cost of Goods S</b> ry at beginning of year also costs (att. schedule) osts (attach schedule) udd lines 1 through 4b Under penalties of perjury. I declare the	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror mization may have received or acc Old. Enter me 1 2 3 4a 4b 5 nat I have examined	Activities a nization have an ganization may have m, or was it the gran to file. crued during the t ethod of invent	and Other Infc interest in or a signa ave to file Form FinC htor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of property proo the organizati	Ature or othe EN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub Enter here an of section 2 duced or ac ion?	er autho 14, Rep ? tract lir nd in Pa 63A (w quired	instructions) ority over a financial a oort of Foreign Bank a port of Foreign Bank a ne 6 art I, line 2 vith respect to for resale) apply to	6 7	Yes
49 Enter Part V At any ti securitie Account During the fr YES, see B Enter the Schedule I Inventor Purchas B Cost of I A ditional b Other co 5 Total. A (	Statements Regarding ime during the 2014 calendar ye as, or other) in a foreign country its. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the organization e amount of tax-exempt interest <b>A - Cost of Goods S</b> ry at beginning of year ases labor disection 263A costs (att. schedule) osts (attach schedule) add lines 1 through 4b	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror mization may have received or acc Old. Enter me 1 2 3 4a 4b 5 nat I have examined	Activities a nization have an ganization may have m, or was it the gran to file. crued during the t ethod of invent	and Other Infc interest in or a signa ave to file Form FinC htor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of property proo the organizati	Ature or othe EN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub Enter here an of section 2 duced or ac ion?	er autho 14, Rep ? tract lir nd in Pa 63A (w quired	instructions) ority over a financial a ort of Foreign Bank a port of Foreign Bank a ne 6 art I, line 2 vith respect to for resale) apply to	6 7	Yes Yes Yes
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49 Enter Part V 1 At any ti securitie Account During the If YES, see 3 Enter the <b>Schedule</b> 1 Inventor 2 Purchas 3 Cost of I 4 Additional b Other co 5 Total. A 4	Statements Regardia ime during the 2014 calendar ye es, or other) in a foreign country is. If YES, enter the name of the e tax year, did the organization receive instructions for other forms the orga e amount of tax-exempt interest <b>A - Cost of Goods S</b> ry at beginning of year also costs (att. schedule) osts (attach schedule) udd lines 1 through 4b Under penalties of perjury. I declare the	ng Certain ar, did the orgai ? If YES, the org foreign country e a distribution fror mization may have received or acc Old. Enter me 1 2 3 4a 4b 5 nat I have examined	Activities a nization have an ganization may have m, or was it the gran to file. crued during the t ethod of invent	and Other Infc interest in or a signa ave to file Form FinC ntor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules o property proo the organizati	Ature or othe CEN Form 1 a toreign trust <b>N/A</b> end of year is sold. Sub Enter here an of section 2 duced or ac cion? dules and sta hich preparer	er autho 14, Rep ? tract lir nd in Pa 63A (w quired tements has any	instructions) ority over a financial a port of Foreign Bank a ne 6 art I, line 2 vith respect to for resale) apply to , and to the best of my kin knowledge.	account (bank, Ind Financial	Yes Yes Yes of, it is true, ss this return wi n below (see
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49 Entr Part V At any ti securitie Account 2 During the If YES, se 3 Enter the Gchedule 1 Inventor 2 Purchas 3 Cost of I 4 Additional b Other co 5 Total. A ign lere	Statements Regardia         ime during the 2014 calendar ye         es, or other) in a foreign country         ts. If YES, enter the name of the         e tax year, did the organization receive         is of the organization receive         e amount of tax-exempt interest         e A - Cost of Goods S         ry at beginning of year         al section 263A costs (att. schedule)         osts (attach schedule)         udd lines 1 through 4b         Under penalties of perjury, I declare the correct, and complete. Declaration of         Signature of officer         Print/Type preparer's name         JAMES M. HAGG         Firm's name ► DIXON         701	ARD ARD ARD Ar, did the organ	Activities a nization have an ganization may have here m, or was it the gran- to file. rrued during the t ethod of invent d this return, includin n taxpayer) is based Date Preparer's sign S GOODMA CENTER D	and Other Infc interest in or a signa ave to file Form FinC intor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of property proof the organizati ing accompanying schead d on all information of with EXE Title nature N LLP RIVE, SUI	Ature or othe EN Form 1 a toreign trust N/A end of year Is sold. Sub Enter here an of section 2 duced or ac ion? CUTIV Date TE 70	er autho 14, Rep 7 tract lir nd in Pa 63A (w quired tements has any <b>7E</b> D	instructions) prity over a financial a port of Foreign Bank a port of Foreign Bank a the 6 art I, line 2 rith respect to for resale) apply to and to the best of my kind knowledge. DIRECTOR Check Self- employe Firm's EIN	account (bank, and Financial 6 7 howledge and belie May the IRS discu the preparer show instructions)? $X$ if PTIN d P001 56-0	Yes Yes Yes of, it is true, ss this return with n below (see Yes Yes 00566 747981
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49 Entr Part V At any ti securitie Account During the If YES, se Enter the Chedule Inventor Purchas Cost of I A Additiona b Other co Total. A ign ere	Statements Regardia         ime during the 2014 calendar ye         es, or other) in a foreign country         is. If YES, enter the name of the         e tax year, did the organization receive         e tax year, did the organization receive         e amount of tax-exempt interest         e A - Cost of Goods S         ry at beginning of year         eses         labor         al section 263A costs (att. schedule)         osts (attach schedule)         osts (attach schedule)         Under penalties of perjury, I declare th         correct, and complete. Declaration of         Signature of officer         Print/Type preparer's name         JAMES M. HAGG         Firm's name ▶ DIXON         701         Firm's address ▶ NEW	ARD ARD ARD Ar, did the organ	Activities a nization have an ganization may have here m, or was it the gran- to file. rrued during the t ethod of invent d this return, includin n taxpayer) is based Date Preparer's sign S GOODMA CENTER D	and Other Infc interest in or a signa ave to file Form FinC intor of, or transferor to, a tax year ▶\$ cory valuation ▶ 6 Inventory at e 7 Cost of good from line 5. E 8 Do the rules of property proof the organizati ing accompanying schead d on all information of with EXE Title nature N LLP RIVE, SUI	Ature or othe EN Form 1 a toreign trust N/A end of year Is sold. Sub Enter here an of section 2 duced or ac ion? CUTIV Date TE 70	er autho 14, Rep 7 tract lir nd in Pa 63A (w quired tements has any <b>7E</b> D	instructions) prity over a financial a port of Foreign Bank a port of Foreign Bank a the 6 art I, line 2 rith respect to for resale) apply to and to the best of my kind knowledge. DIRECTOR Check Self- employe Firm's EIN	account (bank, ind Financial 6 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes Yes Yes of, it is true, ss this return wi n below (see Yes Yes 00566 747981

Schedule C - Rent Inc	AM & MARY come (From Re				Proper	ty Lease	54-60 d With Real P	-	
. Description of property									
(1)									
(2)									
(3)									
(4)									
		eceived or ac					3(a) Deductions dire	ctly cor	nnected with the income in
(a) From personal property rent for personal proper 10% but not more	rty is more than	(	` of rent for p	nd personal proper ersonal property ex t is based on profit	ceeds 50%	centage or if	columns 2(a	and 2	(b) (attach schedule)
(1)									
2)									
3)									
4)									
otal •) <b>Total income</b> . Add totals of c	olumns 2(a) and 2(b					0.	(b) Total deductions		
ere and on page 1, Part I, line 6 chedule E - Unrelate			ome (see	instructions)		0.	Part I, line 6, column (B)	', ►	0
				2. Gross ind			3. Deductions directly to debt-fin		
1. Description	of debt-financed proper	ty		or allocable financed	e to debt-	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
1)						_		-+	
<u>2)</u>									
(3)									
(4)									
<ol> <li>Amount of average acquisiti debt on or allocable to debt-finan property (attach schedule)</li> </ol>	nced deb	erage adjuste of or allocable t-financed pri attach schedi	e to operty	6. Column 4 divided by column 5			7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
1)					9	6			
2)					9	6			
3)					9	6			
4)					9	6			
							nter here and on page 1, art I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Fotals						▶		0.	0
Total dividends-received dedu	ctions included in co	lumn 8	and D-		a materica IV				0
chedule F - Interest,	Annuities, Ro	yaities,				-	nizations (see in	nstruc	tions)
1		0	Exemp	ot Controlled O	ganizatio		6		
1. Name of controlled organiz	ation Employ	<b>2.</b> ver identificati number		<b>3.</b> nrelated income see instructions)	4. Total of specified payments made 5. Part of column 4 that is included in the controlling organization's gross income		connected with income		
1)									
2)									
3)									
(4)									
onexempt Controlled Orga	nizations								
7. Taxable Income	8. Net unrelated i (see instruc		<b>9</b> . To	tal of specified pay made	ments	in the con	olumn 9 that is included rolling organization's ross income		Deductions directly connected with income in column 10
1)									
2)	1								
	1							<u> </u>	
(3)					1				

Add columns 5 and 10.	Add columns 6 and 11.
Enter here and on page 1, Part I,	Enter here and on page 1, Part I,
line 8, column (A).	line 8, column (B).
0.	0.

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17130204 781789 2018590000

Totals .

Form 990-T (2014)

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Page 4

## Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	<ol> <li>Deductions directly connected (attach schedule)</li> </ol>	<b>4.</b> Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).
Totals	0.			0.

## Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	<b>3.</b> Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	<b>6.</b> Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).			
(1)									
(2)									
(3)									
(4)									
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.			
Totals ►	0.	0.				0.			
Schedule J - Advertising Income (coolingstructions)									

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	<b>3.</b> Direct advertising costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ►	0.	0.				0

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	<b>2.</b> Gross advertising income		Direct sing costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		culation <b>6.</b> Readership costs			7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals from Part I	0.		0.						0.
	Enter here and on page 1, Part I, line 11, col. (A).	page	ere and on 1, Part I, I, col. (B).						Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	0.		0.						0.
Schedule K - Compensatio	n of Officers,	Direct	ors, and	<b>d Trustees</b> (see ir	nstructic	ons)			
1. Name				2. Title		3. Percer time devot busines	ed to		ensation attributable related business
(1)							%		
(2)							%		
(3)							%		
(4)							%		
Total. Enter here and on page 1, Part II, I	ine 14						►		0.

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#### 54-6054289

FORM 990-T		OTHER	INCOME		STATEMENT	1
DESCRIPTION					AMOUNT	
TRAVEL PROGRAM	М				70,4	03.
TOTAL TO FORM	990-T, PAGE 1,	LINE 12			70,4	03.
FORM 990-T		OTHER	DEDUCTI	ONS	STATEMENT	2
DESCRIPTION					AMOUNT	
TRAVEL PROGRAM	M COSTS				12,2	63.
TOTAL TO FORM	990-T, PAGE 1,	LINE 28			12,2	63.
FORM 990-T	NET	OPERATING	G LOSS D	EDUCTION	STATEMENT	3
TAX YEAR L	OSS SUSTAINED	LOSS PREVIOU APPLI	JSLY	LOSS REMAINING	AVAILABLE THIS YEAR	
06/30/12         226,814.         3,644.           06/30/13         25,951.         0.				223,170. 25,951.	223,17 25,95	
NOL CARRYOVER	AVAILABLE THIS	YEAR		249,121.	249,12	1.

(Rev. January 2014)

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

X

0 | 7

Department of the Treasury
Internal Revenue Service

#### File a separate application for each return.

► Information about Form 8868 and its instructions is at *www.irs.gov/form8868* ·

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing** (*e-file*) • You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

## Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Acorporati	on required to the form 350 f and requesting an automatic officiniti extension f check this box and complete
Part I only	

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.
Enter filer's identifying number

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.	54-6054289
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2100	Social security number (SSN)
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return)

Code	Is For	
	13 F 01	Code
01	Form 990-T (corporation)	07
02	Form 1041-A	08
03	Form 4720 (other than individual)	09
04	Form 5227	10
05	Form 6069	11
06	Form 8870	12
BELL		
	01 02 03 04 05	01         Form 990-T (corporation)           02         Form 1041-A           03         Form 4720 (other than individual)           04         Form 5227           05         Form 6069           06         Form 8870

•	The books are in the care of $\blacktriangleright$		2100	-	WILLIAMSBURG,	VA	23187

Telephone No. 🕨	/5/-221-1201	Fax No.
		-

٠	If the organization does not have an office or place of business in the United States, check this box	< ► L	
٠	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is for the whole group, chec	ck this

box 
If it is for part of the group, check this box 
In and attach a list with the names and EINs of all members the extension is for.

1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

MAY 15, 2016	, to file the exempt organization return for the organization named above. The extension
is for the organization's return for:	

▶ all calendar year or
 ▶ X tax year beginning JUL 1,

and ending	JUN	30,	

2015

return

2	If the tax year entered in line 1 is for less than 12 months, check reason:	Initial return	E Final
	Change in accounting period		

2014

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	nonrefundable credits. See instructions.	3a	\$
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		

	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 4,000
с	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,		
	by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0
-			

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA	For Privacy Act and Paperwork Reduction Act Notice, see instructions.
423841	
05-01-14	

Ο.

47 2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

17130204 781789 2018590000

**Caution:** Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

STATE COPY

## TAX RETURN FILING INSTRUCTIONS

VIRGINIA FORM 500

## FOR THE YEAR ENDING

JUNE 30, 2015

Prepared for	SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC. P.O. BOX 2100 WILLIAMSBURG, VA 23187
Prepared by	DIXON HUGHES GOODMAN LLP 701 TOWN CENTER DRIVE, SUITE 700 NEWPORT NEWS, VA 23606-4295
Amount due or refund	REFUND OF \$1,600
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	VIRGINIA DEPT. OF TAXATION P.O. BOX 1500 RICHMOND, VA 23218-1500
Return must be mailed on or before	JUNE 15, 2016
Special Instructions	THE RETURN SHOULD BE SIGNED AND DATED BY AN AUTHORIZED INDIVIDUAL.

FC	DRM 500	2014 Virgi	nia Corporation				
PO	partment of Taxation Box 1500 chmond, VA 23218-1500	•	e Tax Return				
		JULY 1, 2	ve been granted a waiver from the electronic filing 014; Ending Date <u>JUNE 30</u> Period			-	Official Use Only
By	checking the box to the righ	nt, I (we) authorize th	ne Department to discuss this return with the	undersigned pr	eparer.	$\rightarrow$	X
FE	IN						at apply:
Na	54-6054289					-	
			THE COLLEGE OF			⊥ Initial	
	VILLIAM & MARY						e Change
	ailing Address	IN VINCIN	IN, INC.		┥╞	_	ng Address Change cal Address Change
E	P.O. BOX 2100						
	y or Town					State	ZIP Code
	VILLIAMSBURG				-	VA	23187
Ph	ysical Address (if different from Mailin	ng Address)				Type Code	;
Dh	ysical City or Town			State ZIP Coo			NAICS
Ph	vsical City of Town			State ZIP Co	Je		
Da	te Incorporated State or	Country of Incorporation	Description of Business Activity				531190
			COMMISSIONS FROM		ססס	Срум	r
					FRO	GIAM	
	Check Applicable Boxes	;	Final Return	Corpor	ate Tel	ecomm	unications Company
	Consolidated - Sch.	500AC Attached	Final Return - Check here and applicab	le Enter am	nount fro	om Form	n 500T, Line 7:
	Combined - Sch. 50	-	boxes below.				.00
	Change in Filing Sta	atus	Withdrawn	Noncor	porate	Telecor	mmunications
	Multistate Sch. 500	A Attached	Dissolved - No longer liable for tax.	Compa	ny C	heck bo	x and enter
	Schedule 500AB Att		Dissolved Date	amount	from F	orm 500	T, Line 10:
	X Nonprofit Corporati	on	Merged	_			.00
			Merger Date			ier Com	
			Merged FEIN #	Enter an	nount fro	om Sch.	500EL, Line 7 or 14:
			S Corp Effective	-			.00
	Amended Return		Amended Return - Check here ar		nrefun	dable or	r Refundable
	Complete Form 500 and So	chedule 500ADJ.	other applicable boxes.		edit Ch		Tierundubie
	Attach an explanation of ch		<b>Federal Audit</b> - Attach			•	Changes
	and modifications.		copy of IRS final determination.			oss Carr	
	DO NOT FILE THIS FORM			🗌 Ot	her - At	tach exp	planation.
	NET OPERATING LOSS. F	File Form 500NOLD	D. Schedule 500ADJ Changes				
	Questions and Related In	nformation					
A			corporation, a related individual, or other relate			•	·
	related to intangible proper	rty (patents, tradema	arks, copyrights and similar intangible propert			d attach	
Б	Coolfield Employment Fr	honooment T O-	Enter Exception amount from Sch	iedule 500AB,			.00
			edit earned from Form 306, Line 11.	(1) Year o			.00
			the requested information. If a NOL resulted	(1) Year o (2) Federa			.00
	•		generating the NOL prior to the merger date.	(3) Percer			
	FEIN	company	SEE STATEMENT		sed this		%
		an one year, attach a sc	chedule for each year with the information requested				
D			enter the number of Schedule				
	VK-1s and complete and at	ttach Schedule 500/	ADJ, Page 2.				D
E			termined with the IRS and finalized for any pri-	or year(s) that		Ye	ear E
			tment? If Yes, provide the year(s).		0 1 O F		ear
F	Location of Corporation's b	pooks P.O.	BOX 2100, WILLIAMSBURG	i, VA 2	3187	Ye	ear
482	Contact for Corporation's b			Phone Number		757-	221-1201
	401 1019 VAL	DEPT OF TAXATION 26010					



## Page 2

#### INCOME

1	Federal taxable income (from attached federal return)	1	0.00
2	Total additions from Schedule 500ADJ, Section A, Line 7	2	.00
3	Total (add Lines 1 and 2)	3	.00
4	Total subtractions from Schedule 500ADJ, Section B, Line 10	4	.00
5	Balance (subtract Line 4 from Line 3)	5	.00
	Savings and Loan Association's Bad Debt Deduction (see Instructions)	6	.00
7	Virginia taxable income (subtract Line 6 from Line 5)	7	.00

#### TAX COMPUTATION

8 Multistate Corporation - If business conducted within and without Virginia (Multistate Corporation), attach Schedule 500A and complete Lines 8(a) through 8(d). If entire business conducted in Virginia, skip to Line 9.		
(a) Income subject to Virginia tax from Schedule 500A, Section B, Line 3(j)	8(a)	.00
(b) Apportionment factor percentage from Schedule 500A, Section B, Line 1 or Line 2(h)		%
(c) Nonapportionable investment function income from Schedule 500A, Section B, Line 3(c)		.00
(d) Nonapportionable investment function loss from Schedule 500A, Section B, Line 3(e)		.00
9 Income tax (6% of Line 7 or 6% of Line 8(a))	9	0.00
PAYMENTS AND CREDITS		
10 Nonrefundable tax credits: Enter the amount from Schedule 500CR, Part XXXI, Line 139	10	.00
11 Adjusted corporate tax (subtract Line 10 from Line 9)	11	.00
12 2014 estimated Virginia income tax payments including overpayment credit from 2013		
13 Extension payment		.00
14 Refundable tax credits from Schedule 500CR, Part XXXV, Line 147	14	.00
15 Pass-Through Entity total withholding from Schedule 500ADJ, Section D	15	.00
16 Total payments and credits (add Lines 12 through 15)	16	1600.00
REFUND OR TAX DUE		
17 Tax owed (if Line 11 is greater than Line 16, subtract Line 16 from Line 11)	17	.00
18 Penalty (see Instructions)		.00
19 Interest (see Instructions)	19	.00
20 Additional charge from Form 500C, Line 17 (attach Form 500C)	20	.00
21 Total due (add Lines 17 through 20)	21	.00
22 Overpayment (if Line 16 is greater than Line 11, subtract Line 11 from Line 16)	22	1600.00
23 Amount to be credited to 2015 estimated tax	23	.00
24 Amount to be refunded (subtract Line 23 from Line 22)	24	1600.00

I, the undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act on behalf of the corporation for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a person other than the taxpayer, this declaration is based on all information of which he or she has any knowledge.

Date	Signature of Officer	Title EXECUTIVE DIRECTOR
Printed Name of Officer		Phone Number 757.221.1842
	Firm Name JAMES M. HAGGARD ES GOODMAN LLP	Phone Number 757.873.1033
Date	Individual of Firm, Signature of Preparer	Address of Preparer 701 TOWN CENTER DRIVE, SUI NEWPORT NEWS, VA 23606-4295
Preparer's FEIN, PTIN or SE P00100566	SN	Approved Vendor Code 1019

VA DEPT OF TAXATION 2601004 (REV 09/14) IMPORTANT: INCLUDE A COPY OF YOUR FEDERAL RETURN WITH THIS RETURN.

VA 500		NOL CARRYFORWARI	ADJUSTMENT	STATE	MENT 1
YEAR END DATE	FEDERAL NOL	ADDITION	SUBTRACTION		RCENT OF FEDERAL NOL UTILIZED THIS YEAR
06/30/12 06/30/13 NET VIRGINIA	226,814. 25,951. A MODIFICATION	0. 0.	0. 0.	0.0.	.0000

## Schedule of Federal Line Items



Name as shown on Virginia return SOCIETY OF THE ALUMNI OF THE COLLEGE O FEIN	54-6054	289
Form 1120, Deductions and Taxable Income		
1. Domestic Production Activities Deduction	1	.00
2. Federal Taxable Income before NOL and Special Deductions		28913 .00
3. Net Operating Loss Deduction	3	28913 <sub>.00</sub>
4. Special Deductions		1000 <sub>.00</sub>
5. Federal Taxable Income after NOL and Special Deductions	5	.00
Form 1120, Schedule C, Dividends and Special Deductions		
6. Subpart F Income	6	.00
7. Foreign Dividend Gross-Up		
Form 1120, Schedule K or M-3		
8. Tax Exempt Interest		.00
Form 5884		
9. Salaries and Wages not deducted due to the WOTC	9	.00
Form 4562, Special Depreciation Allowance and Other Depreciation		
10. Special depreciation allowance for qualified property placed in service during the		
taxable year	10	.00
11. Property subject to 168(f)(1) election	11	.00
12. Other depreciation	12	.00
Form 1118, Schedule A, Income or Loss Before Adjustments-Gross Income or Loss		
13. Total: Deemed Dividends (Exclude Gross-up)	13	.00
14. Total: Deemed Dividend (Gross-up)	14	.00
15. Total: Other Dividends (Exclude Gross-up)		
16. Total: Other Dividends (Gross-up)	16	.00
17. Total: Interest		.00
18. Total: Gross Rents, Royalties, and License Fees		
19. Total: Gross Income from Performance of Services		
20. Total: Other		
21. Total: Total Gross Income or Loss from Outside the US	21	.00
Form 1118, Schedule A, Income or Loss Before Adjustments-Deductions		
22. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses -		
Depreciation, Depletion, and Amortization	22	.00
23. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses -		
Other Expenses	23	.00
24. Total: Definitely Allocable - Expenses Related to Gross Income from Performance of Services	24	.00
25. Total: Definitely Allocable - Other Definitely Allocable Deductions		
26. Total: Total Definitely Allocable Deductions		
27. Total: Apportioned Share of Deductions not Definitely Allocable		
28. Total: Net Operating Loss Deduction		
29. Total: Total Deductions		.00
Form 1118, Schedule A, Income or Loss Before Adjustments-Total Income		
30. Total: Total Income or (Loss) Before Adjustments	30	.00

Attach Schedule 500FED to Your Virginia Corporation Return, Form 500.

Schedule 500FED does not replace the requirement to attach a complete federal Form 1120 to your Virginia return.

483701 10-09-14 **1019** 

1019 Va. Dept. of Taxation 2601002 REV 08/14

5

## Virginia Corporation Income Tax e-file Signature Authorization

## DO NOT SEND THIS VA-8879C TO THE VA DEPT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Corporation Name	Federal ID Number
SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MA	54-6054289
Part I Tax Return Information	
1. Federal Taxable Income (Form 500, Page 2, Line 1)	1.
2. Virginia Taxable Income (Form 500, Page 2, Line 7)	2.
3. Income tax (Form 500, Page 2, Line 9)	3.
4. Total payments and credits (Form 500, Page 2, Line 16)	4. 1,600.
5. Total due (Form 500, Page 2, Line 21)	5.
6. Amount to be refunded (Form 500, Page 2, Line 24)	6. 1,600.
Part II Declaration and Signature Authorization of Officer	
return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, that the information provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service in Part I above agrees with the information and amounts shown on the corresponding lines of the corporate balance due return, I authorize the Virginia Department of Taxation and its designated Financial Agent to ini entry to the financial institution account indicated on the 2014 Virginia income tax return for payment of sta authorize the financial institutions involved in the processing of the electronic payment of taxes to receive or answer inquiries and resolve issues related to the payment. I certify that the transaction does not directly in the territorial jurisdiction of the United States at any point in the process.	Provider including the amounts shown electronic income tax return. If filing a tiate an ACH electronic funds withdrawal te taxes owed on this return. I also confidential information necessary to ivolve a financial institution outside of
complete return to the Virginia Department of Taxation. I have selected a personal identification number (PI electronic income tax return.         Officer's PIN: check one box only         I authorize the ERO named below to enter my PIN income tax return.       23187         Do not enter all zeros       as my signature on the corporation	N) as my signature for the corporation's
DIXON HUGHES GOODMAN LLP ERO Firm Name	
I will enter my PIN as my signature on the corporation's 2014 electronic Virginia corporation incom are entering your own PIN and the return is filed using the Practitioner PIN method. The ERO must	
Your Signature	Date
Part III Certification and Authentication	
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN. 549218236 Do not enter all zer	
I certify that the above numeric entry is my PIN, which is my signature for the 2014 Virginia corporation inco indicated above. I confirm that I am submitting this return in accordance with the requirements of the Pract all other requirements as specified by the Department. ERO's may sign the form using a rubber stamp, mec pen, or computer software program.	itioner PIN method and have followed
ERO's Signature	Date
	Form VA-8879C (REV 11/14)

17130204 781789 2018590000

			** PUBLIC DISCLOSURE COPY	* *		
	Ω	00	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047	
Form <b>JJU</b> Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) 20						
		of the Treasury	Do not enter social security numbers on this form as it may	-	Open to Public	
		enue Service	▶ Information about Form 990 and its instructions is at www		Inspection	
-				JÚN 30, 2015		
B C a	heck if pplicat		organization ETY OF THE ALUMNI OF THE COLLEGE OF	D Employer identifica	ation number	
	Addr		IAM & MARY IN VIRGINIA, INC.			
	_chan _Name _chan			<u>-</u> 	54289	
	Initial returr	ge Doing b	usiness as WILLIAM & MARY ALUMNI ASSOCIA'I' and street (or P.O. box if mail is not delivered to street address) Room/si		54209	
	Final	P O	BOX 2100		221-1842	
	⊥returr termi ated	n-	bown, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	4,421,876.	
	Amer Amer returr		IAMSBURG, VA 23187	H(a) Is this a group ret		
	_Appli		nd address of principal officer: MARILYN W. MIDYETTE	for subordinates?		
	pend		LUMNI DRIVE PO BOX 2100, WILLIAMSBURG	, H(b) Are all subordinates inc		
ΙT	ax-ex	kempt status:		- ''	st. (see instructions)	
			WMALUMNI.COM	H(c) Group exemption	,	
KF	orm o	of organization:	X Corporation Trust Association Other ► L Y	'ear of formation: 1923 M		
	irt I	Summary		·		
۵	1	Briefly describ	e the organization's mission or most significant activities: ${{f TO}}$ ${f SUPPO}$	RT THE COLLEGE	OF W&M	
anc		AND ITS	ALUMNI THROUGH ENGAGEMENT ACTIVITIES	AND COMMUNICA	TION.	
Governance	2	Check this bo	$x \mathrel{\blacktriangleright}$ if the organization discontinued its operations or disposed of n	nore than 25% of its net ass		
Ň	3	Number of vo	ting members of the governing body (Part VI, line 1a)		17	
ی م	4	Number of inc	ependent voting members of the governing body (Part VI, line 1b)		17	
Activities &	5		of individuals employed in calendar year 2014 (Part V, line 2a)		47	
iviti	6		of volunteers (estimate if necessary)		160	
Act			d business revenue from Part VIII, column (C), line 12		70,403.	
	b	Net unrelated	business taxable income from Form 990-T, line 34		0.	
				Prior Year	Current Year	
ne	8		and grants (Part VIII, line 1h)	2,105,395.	1,224,291.	
Revenue	9	•	ce revenue (Part VIII, line 2g)	656,421. 394,747.	340,895. 1,141,907.	
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)	1,927,117.	400,660.	
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,083,680.	3,107,753.	
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,000.	60,500.	
	13		nilar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)	02,000:	00,500.	
	14		to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,784,965.	399,117.	
Expenses			undraising fees (Part IX, column (A), line 11e)	0.	0.	
ben			ng expenses (Part IX, column (D), line 25)  0.			
Ĕ			es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,751,075.	1,115,807.	
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,598,040.	1,575,424.	
	19	-	expenses. Subtract line 18 from line 12	1,485,640.	1,532,329.	
or				Beginning of Current Year	End of Year	
ilanc	20	Total assets (I	Part X, line 16)	12,194,865.	12,255,369.	
Net Assets or Fund Balances	21		(Part X, line 26)	540,182.	194,788.	
Fun	22		fund balances. Subtract line 21 from line 20	11,654,683.	12,060,581.	
Pa	irt II					
Unde	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of my	knowledge and belief, it is	
true	corre	ect, and complete	Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge		

Sign	Signature of officer		Date
Here	MARILYN W. MIDYETTE, E Type or print name and title	XECUTIVE DIRECTOR	
Paid	Print/Type preparer's name JAMES M. HAGGARD	Preparer's signature Dat	e Check PTIN if self-employed P00100566
Preparer	Firm's name DIXON HUGHES GOO	DMAN LLP	Firm's EIN 56-0747981
Use Only	Firm's address 701 TOWN CENTER NEWPORT NEWS, VA		Phone no. 757. 873.1033
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

Par	990 (2014) WILLIAM & MARY IN VIRGINIA, INC. 54-6054289 P rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE ALUMNI ASSOCIATION OF THE COLLEGE OF WILLIAM AND
	MARY IS TO PROVIDE SERVICES AND AVENUES FOR ALUMNI AND FRIENDS TO
	DEVELOP LOYALTY TO, UNDERSTANDING OF, AND LIFELONG PARTICIPATION IN
	THE PRESENT AND FUTURE OF THE COLLEGE.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 1,314,944. including grants of \$ ) (Revenue \$ 380,31
14	THE ALUMNI ASSOCIATION ACCOMPLISHES ITS MISSION THROUGH A VARIETY OF
	PROGRAMMING EFFORTS THAT INCLUDE:
	CHAPTER & REGIONAL ENGAGEMENT - WHICH FOCUSES ON INCREASING ALUMNI
	ACTIVITY AROUND THE COUNTRY AND INTERNATIONALLY, GROWING THE NUMBER C
	ALUMNI CHAPTERS, BROADENING COVERAGE IN KEY METRO AREAS, AND INCREASI
	THE NUMBER OF UNIVERSITY STAFF AND FACULTY TRAVELING TO MEET WITH
	ALUMNI WHERE THEY LIVE AND WORK.
	SIGNATURE EVENTS - WHICH BRINGS FELLOW ALUMNI BACK TOGETHER WITH THEI
	ALMA MATER IN FAMILIAR AND NEW SPACES TO RECONNECT, GENERATE IMPACT A
	CELEBRATE EACH OTHER.
4b	(Code:       ) (Expenses \$ 60,500. including grants of \$ 60,500.) (Revenue \$ 00000000000000000000000000000000000
	URDER OF THE WHITE JACKET FUNDS SCHULARSHIPS FOR STUDENTS AT THE
	COLLEGE WORKING IN THE FOOD SERVICE INDUSTRY. THESE SCHOLARSHIPS ARE
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## WILLIAM & MARY IN VIRGINIA, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
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		X
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		- 27
b	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		x
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			<u> </u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	0000	(0014)
		<b>F</b> • • • • • •		001 4

Form **990** (2014)

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Form 990 (2014)

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 17 II 'Yes,' complete Schedule I, Parts I and II.       21       X         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 17 II 'Yes,' complete Schedule I, Part III, Societin A, Iine 3, 4, or 5 about compensation of the organization's current and former offices, director, trustese, key employees, and 'higher composest II'''es,' complete Schedule I, Part IV, Societin A, Iine 3, 4, or 5 about compensation of the organization's current and former offices, director, trustese, key employees, and 'higher composest II''es,' complete Schedule I, Part II''s, complete Schedule I, Part I       24a         25a       Section 501(s)(3), 501(s)(4), and 501(s)(29) organizations. Did the organization engage in a excess benefft transaction with a disqualified person during the yar' II 'Yes,' complete Schedule I, Part I       25a       X         25b       Did the organization excess benefft transaction with a disqualified person in a phoryear, and that the transaction may ancure to erganization excess benefft transaction ware three schedule I, Part II''s, complete Schedule I, Part IV''s, complete Schedule I, Part IV''s, complete Sche	Form	WILLIAM & MARY IN VIRGINIA, INC. 54-6054	4289	Р	age <b>4</b>
11         Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Park IX, columa (k), ine 17 11 "Ss." Complete Schedule I, Parts I and II         21         X           22         Did the organization nerve than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (k), line 27 II "Yes," complete Schedule I, Parts I and II         22         X           23         Did the organization nerve "Yes" (Part VI). Section A, line 3, 4, or 6 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? II "Yes," complete Schedule J.         23         X           249         Did the organization nerve may proceeds of fax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was used attra-December 31, 2002? II "Yes," answer lines 24d through 24d and complete Schedule K. II 'No", go to line 25a         24d         X           25         Did the organization maintain an escrow account other than a refunding strony period exception?         24d         X           26         Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year' I' Yes, 'complete Schedule L, Part I         25a         X           27         Did the organization expection on parts the response of an organization spice Complete Schedule L, Part I         25a         X           28         Dis the organization expect, a grant stelentin organization expect,	Pa	rt IV Checklist of Required Schedules (continued)			
admastic government on Part IX, column (A), line 17.8° res, "complete Schedule I, Parts I and II.     21     X       22     Did the organization report most han 55,000 (grants or other assistance to or for domestic individuals on Part IX, column (A), line 27.11° Yes, "complete Schedule I, Parts I and III.     22     X       23     Did the organization navver "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former folloes, directors, trustees, key employees, and higher to composets 2 for thes, "complete Schedule I, I"No:", or other Bass.     23     X       24     Did the organization navver "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization complete Schedule I, I"No:", or other Bass.     24     X       24     Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception?     24     X       25     Section 50((3), 501((4), and 501((220 graphizations. Dut Hor organization ange) in an oxcess benefit transaction with a disqualified person during the year?     24       25     Section 50((3), 501((4), and 501((220 graphizations. Dut Hor organization ange) in a process benefit transaction with a disqualified person during the year?     24       25     Section 50((3), 501((4), and 501((220 graphizations. Dut Hor organization approxem the reso: to associate the transaction with a disqualified person during the year?     26       26     Did the organization aver that the angaed in an excess benefit transaction with a disqualified person? If "Yes," complete Schedule L, Part I     25       27     <				Yes	No
22       Ddt the organization report more than 85.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 /f 'Yes,' complete Schedule I, Parts I and III       22       X         23       Ddt the organization answer 'Yes' to Part' IV, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, ley employees, and highest compensated employees IF 'Yes,' complete Schedule J       22       X         24       Ddt the organization have a tax exempt bond issue with an outstanding principal amount of more than 5100,000 as of the last day of the year, that was not proceeds of tax exempt bonds beyond a temporary period exception?       24       24         25       Ddt the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24       24         26       Ddt the organization maintain an escrow account other than a refunding serow at any time during the year?       24       24         27       Section 501(c)(3), 501(c)(4), and 501(c)(2)(3) organization. Ddt the organization nayes in an excess benefit transaction with a disqualified person in a prior year, and that the transaction hand to any the associants prior Form's complete Schedule L, Part I       25       X         26       Ddt the organization report any anount on Part X, line 5, 6, or 22 for reseivables from or payables to any current or former officer, director, trustees, key employees, or disqualified persons 2// Yes,' complete Schedule L, Part II       26       X         27       Dd the organization report any anount on P	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part V, column (A), Ine 27. If "Yes," complete Schedule I, Parts I and III       22       X         23       Did the organization answer 'Yes' to Part VII, Section A, Iine 3, 4, or 5 about compensation of the organization's ourrent and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes," complete Schedule I, the 'Yes,'' to Part VII, Section A, Iine 3, 4, or 5 about compensation of the organization have a tax-exempt bonds beyond a temporary period exception?       2a       X         24       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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       X         24       Did the organization have a tax-except bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was sissed after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If No; 9 to line 25a       24a       X         25       Did the organization invest as an "on behalf of" issuer for bonds outstanding at any time during the year 10 defease any tax-exempt bond?       24d       X         26       Did the organization anistal an escrow account other than a refunding escrow at any time during the year?       24d       24d         27       Did the organization maintain an escrow benefit transaction. Bay not been reported on any of the organization organization area to be monoton on a prory earl, and that the transaction has not been reported on any of the organization sport any amount on Part X, line 6, 6, or 22 for receivables from or payables to any current or former officer, directors, trustees, key employees, highest compersated employees, or slagualing persons? If "Yes," complete Schedule L, Part II       26b       X         28       Was the organization report any amount on Part X, line 6, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, or exployees, highest complete Schedule L, Part IV       26b       X         29       Did the organization report any a	22	· · · ·			
and former officers, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule J.     23     X       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 completie Schedule J. (***) ****, or to be 25a     24a     X       2 bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b     24a       2 bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24d     24d       2 bid the organization and that an escow account other than a refunding escrow at any time during the year?     24d     25a       2 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dut the organization allogualified person in a prior year, and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I     25a     X       2 Did the organization aware that It engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction bas not been reported on any of the organization's pior Forms 990 or 990-E27 If 'Yes," complete Schedule L, Part II     25b     X       2 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or tormer officers, director, trustee, sey employees, indicating the enders, or a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV     26     X       2 Did the organization needve cont of the r		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
Schedule J       23       X         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 // 17%s," answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a       24a       X         24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds outstanding at any time during the year?       24b       X         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization maintain an escrew abenefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I       25a       X         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization with a disqualified person n a prory ear, and that the transaction has not been reported on any of the organization with a disqualified persons? If 'Yes,' complete Schedule L, Part I       25a       X         26 Did the organization prort 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       26a       X         27 Did the organization provide a grant or other assistance to an officer, director, trustee, is yee mployee? If 'Yes,' complete Schedule L, Part IV       26a       X         28 Was the organization provide a grant selection committee member, or to a 35% controlled antity or family member of a current or former officer, director, trustee, o	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
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 Wo', go to line 25a         24a         X           b Did the organization numbrant an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?         24b         24b         X           d Did the organization maintain an escrow account other than a refunding secrow at any time during the year?         24c         X           25a         Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization is a disqualified person during the year?         25a         X           25b         List 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-E27 if "Yes," complete Schedule L, Part I         25b         X           26         Did the organization aware that it engaged in an excess benefit transaction with an disqualified person in a prior year, and that the transaction that an excess here thransaction approxement or former officars, director, trustee, key employees, thighest companization approxement or former officars, director, trustee, key employees, thighest companization approxement, we any order or the assistance to an officer, director, trustee, key employee, substantial contributors of raphicable benefort and the complete Schedule L, Part II         27         X           27         Did th					
is tail 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         X           b Did the organization mixet any proceeds of tax-exempt bonds beyond a temporary period exception?         24b         24b           c Did the organization mixet any proceeds of tax-exempt bonds beyond a temporary period exception?         24b         24c           d Did the organization maintain an escrow account other than a refunding escrow at any time during the year?         24d         25a           25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization reports and that the transaction has no been reported on any of the organization report year, and that the transaction has no been reported on any of the organization or provides and that the transaction has no been reported on any of the organization or provides a grant or other assistance to an officer, director, trustes, key employees, highest target on a particulary provide a grant or other assistance to an officer, director, trustes, key employees, bustantial contributor or emplexe bareod, a grant or other assistance to an officer, director, trustes, key employees, funderation, and exceptions).         27         X           27         X         Was the organization provide a grant or other assistance to an officer, director, trustes, were more than 25c. Ordine 12, Part IV         28a         X           28         X         Did the organization provide a grant or other assistance to an officer, director, trustes, were more than 25c. Ordine 12, Part IV         28a         X           27		Schedule J	23		X
Schedule K. If 'No'', go to line 25a     24a     X       b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b     24b       c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24c     24c       2 Did the organization at as an 'on behalf of' issuer for bonds outstanding at any time during the year?     24d     24c       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 in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 900 or 900 ±22? If 'Yes,' complete Schedule L, Part I     25a     X       26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustes, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II     25a     X       27 Did the organization provide a grant or other assistance to an officer, director, trustes, key employees, highest compensated employees, substantial contributor or employee three0, a grant setochico comtitue member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II     26a     X       28 Was the organization receive contributions of art, historical trassures, or other analyze thereof, was an officer, director, trustee, or key employee (or family member of a current of former officer, director, trustee, or key employee (or family member of any of these persons? If 'Yes,' complete Schedule L, Part II     26a     X<	24a				
b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b         c       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         d       Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24d         25a       Section 57(c)(3), 591(c)(4), and 591(c)(29) organizations. Did the organization engage in an excess benefit transaction has not been reported on any of the organization proyer, and that the transaction has not been reported on any of the organization s prior Forms 990 or 990-E27 (1 "Yes," complete Schedule L, Part I       25a         25       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       X         26       Did the organization provide 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       26       X         27       X       Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial control former officer, director, trustee, or key employee [7 II "Yes," complete Schedule L, Part II       28a       X         28       A current for former officer, director, trustee, or key employee for a family member thereal was nofficer, director,		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c       Did the organization anistain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24c         d       Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         25s       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 in a prior year, and that the transaction has not been reported on any of the organization action with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I       25a       X         260       Did the organization action to a mount 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 I       26       X         27       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV)       28       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV)       28a       X         28       Did the organization aparty to a business transaction, with one of the sollowing parties (see Schedule L, Part IV)       28a					
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29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I       32       X         33       Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neceive 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       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       X         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 part	С				v
<ul> <li>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M</li> <li>31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I</li> <li>31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I</li> <li>32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.3? If "Yes," complete Schedule R, Part I</li> <li>33 Did 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</li> <li>34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>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)?</li> <li>b If "Yes," complete Schedule R, Part V, line 2</li> <li>35 Bid the organization. Did the organization make any transfers to an exempt non-charitable related organization?</li> <li>a d that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI</li> <li>36 X</li> <li>37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>Note. All Form 990 filers are required to complete Schedule O</li> </ul>	~~				
contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       F"Yes," complete Schedule R, Part V, line 2       35b       35b       35b         37       Did the organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         38       Section 501c)(3) organizations. Did the organization make any tansfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule R, Part V, line 2       36       X <th></th> <td>-</td> <td>29</td> <td></td> <td></td>		-	29		
31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X	30				v
If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       5b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         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       X         38       Did th	04		30		
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       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       X         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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X	31		0.1		v
Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       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       X         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       X         38       Did the organization complete Schedule O       38       X	20	The rest complete Schedule N, Part 1	31		
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i></li> <li>34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i></li> <li>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i></li> <li>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i></li> <li>36 X</li> <li>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? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i></li> <li>37 XX</li> <li>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>38 X</li> </ul>	32		00		v
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       35a       X         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       X         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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X	22		32		- 23
<ul> <li>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</li> <li>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>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)?</li> <li>If "Yes," to line 35a, did the organizations. Did the organization make any transfers to an exempt non-charitable related organization?</li> <li>If "Yes," complete Schedule R, Part V, line 2</li> <li>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</li> <li>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>Note. All Form 990 filers are required to complete Schedule O</li> </ul>	33		22		x
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         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       X         38       Did the organization complete Schedule O       38       X	24		33		
<ul> <li>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>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</li> <li>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</li> <li>36 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</li> <li>37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>38 X</li> </ul>	34		24	x	
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       X         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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X	250			- 23	x
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         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         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38         Note. All Form 990 filers are required to complete Schedule O       38       X			358		- 23
<ul> <li>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</li></ul>	u		254		
If "Yes," complete Schedule R, Part V, line 2       36       X         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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X	26		330		<u> </u>
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i></li> <li>37 X</li> <li>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>38 Note. All Form 990 filers are required to complete Schedule O</li> </ul>	30		26		x
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI37X38Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?44Note. All Form 990 filers are required to complete Schedule O38X	37		30		<u> </u>
38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?         Note. All Form 990 filers are required to complete Schedule O       38	57		37		x
Note. All Form 990 filers are required to complete Schedule O	38		- 57		<u> </u>
	00	· · · · · · · · · · · · · · · · · · ·	38	x	
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Is         Enter the number reported in Box 3 of Form 1006. Enter 0: if net applicable         1a         64           Ib         Enter the number of Forms W2G included in line 1a. Enter 0: if net applicable         1a         64           ID         Enter the number of Forms W2G included in line 1a. Enter 0: if not applicable         1a         64           ID         Enter the number of enriphyses reported on Form W3. Transmittal of Wage and Tax Statements.         2a         47           ID         ID         ID         1a         47           ID         ID         ID         ID         1a         47           ID         <	Par	Int V         Statements Regarding Other IRS Filings and Tax Compliance           Check if Schedule O contains a response or note to any line in this Part V			
b         Enter the number of Forms W-20 included in line 1a. Enter 0- if not applicable         10				Yes	No
b         Enter the number of Forms W/2G included in line 1a. Enter 0-If not applicable         Image: The number of the scalar o	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	64		
gambing winnings to pize winners?       ic       X         2a       Enter the number of employees reported on from W3, Transmittal of Wage and Tax Statements,       iza       47         2b       Exter the number of employees reported on from W3, Transmittal of Wage and Tax Statements,       iza       47         bit at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b       X         3b       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3c       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         4d       Any time during the calendary year, did the organization have an interest in, or a signature or other authorty over, a financial account in a foreign country.       4a       X         bit If "Yes," into ites faor \$0, did the organization have an interest in, or a signature or other authorty over, a financial account is a party to a prohibited tax shafts transaction?       5a       X         bit any taxable party notify the organization therm 886-77       5a       X       5b       X         bit any taxable party notify the dragnization file from 886-78       5c       X       5c       X         bit Yes," idd the organization in therway create scharblize contributions?       5a       X       X         bit Yes," idd the or	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
2a       Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, the for the calendar year anding with or within the year covered by this return       2a       47         b       If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b       X         Note. If the sum of lines 1 and 2a is greater than 250, you may be required to <i>t</i> -file (see instructions)       3a       X         b       If "Yes," has it filed a form 900 T for this year? If "No," to file 3b, provide an explanation in Schedule O       3b       X         d       A tary time during the calendary year, did the organization have an explanation in Schedule O       3b       X         d       A tary time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account)?       4a       X         d       I' Yes," to line 5a or 5b, did the organization have an year of the approximation tat was or is a party to a prohibite tax shelter transaction?       5c       5c         d       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that are receive deductible contributions or gifts were not tax deductible?       7c       X         0       I' Yes, 'to line for a citx deductible contribution and party to sphibite tax and the presonal property for which tax sequred to the pravinization receive any funds, direcity or indirecity, to pary temous on a personal beefft c	с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
ties for the calendar year ending with or within the year covered by this return       2a       47         bit if at least one is reported on line 2a, did the organization file all required federal emplyment tax returns?       2b       X         30       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         41       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account) is origined or provide an explanation in Schedule O       3a       X         bit if "ves," neare the name of the foreign country.       ★       4a       X       X         58       instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         50       bit any taxable party notify the organization that 4 was or is a party to a prohibited tax shelter transaction?       5a       X         61       Dost the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any combibutions that were not tax deductible form 88667?       6a       X         7       Organization shat mary receive deductible contributions under section 170(c).       6b       7a       X         8       If "Yes," did the organization tolk with every solicitation an express statement that such contractor?       7a       X         7       Organization		(gambling) winnings to prize winners?	1c	Х	
b       If at least one is reported on line 2a, did the organization file all required to define (see instructions)       2b       X         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to define (see instructions)       3a       X         b       If 'Yes, ' has it filed a form 990-T for this year? If 'No, 'I to line 3b, provide an explanation in Schedule O       3a       X         b       If 'Yes, ' has it filed a form 990-T for this year? If 'No, 'I to line 3b, provide an explanation in Schedule O       3a       X         b       If 'Yes, ' has it filed a form 990-T for this year? If 'No, 'I to line 3b, provide an explanation on the realmothy over, a       4a       X         b       If 'Yes, ' has it filed a form 990-T for this year? If 'No, 'I to line 3b, provide an explanation on the realmothy over, a       4a       X         b       If 'Yes, ' to line 5a or 5b, did the organization has a nitreset (in or signitus or other explanation noticit any contributions that were not tax deductible contributions?       5a       X         b       Did any taxable pary notify the organization has explice party to a prohibited tax shelter transaction?       5b       X         c       Transaction and grass receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible contributions on grass the are other transaction?       5b       X         c       Transactions that may receive deductible contributions under sectore 170(c).	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)       3a       X         3a Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         4a A ray time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (s).       3a       X         b If 'Yes, ' near the name of the foreign country.       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See instructions for bing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).         b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid: any contributions that were not tax deductible as chartable contributions?       Se       X         ci If 'ves, ' did the organization include with every solicitation an express statement that such contributions or gits were not tax deductible?       Ge       X         fi 'ves, ' did the organization notify the donor of the value of the goods or services provided 7       To       Z         fi 'ves, ' did the organization notify the donor of the value of the goods or services provided 7       To       X         fi 'ves, ' did the organization neckes of \$76 made parity as a contribution and parity for goods and services provided 7       To       X         fi 'ves, ' did the organization necleve apyment meesses of \$76 made parity as a contrib		filed for the calendar year ending with or within the year covered by this return 2a	47		
3a       Dd the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         b       If "Yes," has it field a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0       3b       X         a       At any time during the calendar year, did the organization have an interest in, or a signature or other authomy over, a       4a       X         b       If "Yes," that iffield a Form 900-T for this year? If "No," to line 3b, provide an explanation in Schedule 0       4a       X         b       If "Yes," the the name of the foreign country (such as a bank account, securities account, or other financial account)?       4a       X         b       If "Yes," to line 5a or 5b, did the organization that such corting theat year?       5a       X         b       If "Yes," to line 5a or 5b, did the organization file Form 8880-T?       5b       X         c       If "Yes," to line 5a or 5b, did the organization the account policitation an express statement tha such contributions or gifts       6b       X         b       If "Yes," to lid the organization the event solicitation an express statement tha such contributions or gifts       6b       X         b       If "Yes," to lid the organization sele, event solicitation an express tatement tha such contributions or gifts       7a       X         d       If "Yes," did the organization sele, event solicitation an expresevent yor for which it was	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b       If "Yes," has it filed a Form 990-T for this yea? If "No," to line 3b, provide an explanation in Schedule 0       3b       X         4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly in a bank account, securities account, or other financial accountly over, a financial account in a foreign country: ▶       4a       X         b       If "Yes," enter the name of the foreign country: ▶       5a       X         5e in structuros for filing requirements for FICEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5e       U's any table party notify the organization file Form 888-7?       5c       5c       5c         6b       Does the organization nave annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible contributions?       7a       X         7       Organization struct as deductible contributions under section 170(c).       10 the organization notify the donor of the value of the goods or services provided the party?       7a       X         11       Hord Bacca the number of Forms 8282 filed during the year       7d       7c       X         11       U's the organization notify the donor advised fund maintared by the sponsorial progenization file form 8809 as required?       7a       X         11       U's the organization neceive a punumum, directly or indireci		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign courtly (such as a bark account, securities account, or other financial account)?       4a       X         bit 1**es; "enter the name of the foreign courtly (such as a bark account, securities account, or other financial account)?       5a       X         5a       Was the organization ap anty to a prohibited tax shelter transaction?       5a       X         5d       Dot any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         5d       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization shear annual gross receipts that are normally greater than \$100,000, and did the organization shear annual gross receipts that are normally greater than \$100,000, and did the organization nocke approximation nocke ap	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		
If Yes, 'enter the name of the foreign country (such as a bank account, securities account, or other financial account)?     4a     X       If Yes,' enter the name of the foreign country:     See     See       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).     Sa     X       So Was the organization a party to a prohibited tax shelter transaction?     So     X     X       of Do any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?     So     X       Go Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible as chartable contributions?     Go     X       If Yes,' to line foreign country (***)     Go Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     Go     X       If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     Go     X       If Yes,' indicate the number of Forms 8282 filed during the year     Td     Td     X       If Yes,' indicate the number of Forms 8282 filed during the year     Td     Td     X       If Yes,' indicate the number of Forms 8282 filed during the year?     Td     X     Td       If the organization receive a partimum, directly orindirectly, on a personal benefit contract?     Tr	b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х	
b       If "Yes," enter the name of the foreign country.         Bee instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         SW as the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         B       Dest the organization near the organization flie Form 8886-T?       6a       X         B       If "Yes," to life organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       7a       X         Organization reade a payment in excess of 57 made party as a contribution and party for goods and services provided to the payor?       7a       X         If "Yes," ididate the number of Form 8282? filed during the year       7d       7d       7c       X         If Hores, "adicate the number of Forms 8282 filed during the year?       7d       7d       7c       X         If the organization neelwe any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         If the organization neelwere any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         If the organization neelwere any funds, directly or indinectly, to pay premiums on a personal bene	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
See instructions for fling requirements for FInCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         54 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         56 Ubit any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         61 Ores the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twere not tax deductible as charitable contributions?       5c       X         61 If Yes," told the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?       6b       X         7 Organizations that may receive deductible contributions under section 170(c).       10 if the organization neceive a payment in excess of \$7 made party as a contribution and party for goods and services provided to the payrof?       7a       X         9 If Yes," iddicate the number of Forms 8282 filed during the year       7d       7c       X         10 Ut the organization receive any tonds, directly or indirectly, to pay premiums on a personal benefit contract?       7r       X         10 Ut the organization receive a contribution of cars, hoats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       X         11 Wes," indicate the number of forms 8282 filed during the year?       7d       7d		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
5a       Was the organization a party to a prohibited tax shelter transaction 2       5a       X         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         6b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         6b       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charable contributions?       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charable contributions and party for goods and services provided to the payor?       7a       X         b       If "Yes," did the organization neity the donor of the value of the goods or services provided?       7a       X         b       If "Yes," did the organization neity for ponds and services provide?       7a       X         d       If "Yes," did the organization selex as 22 filed during the year       7d       7a       X         d       If "Yes," did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         d       If "Yes," endicate the number of Forms 8282 filed during the year       7d       7a       X	b	If "Yes," enter the name of the foreign country: ►			
b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If 'Yes,'' to line 5a or 5b, did the organization file Form 8886 T?       5c         d       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b       If 'Yes,'' did the organization include with every solicitation and party set statement that such contributions or gifts were not tax deductible?       6b         7       Organization such are even a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7a       X         d       If 'Yes,'' indicate the number of forms 8282 filed during the year       7d       7d       X         d       If 'Yes,'' indicate the number of Forms 8282 filed during the year, pay premiums, on a personal benefit contract?       7e       X         d       If 'Yes,'' indicate the number of Forms 8282 filed during the year, pay premiums, on a personal benefit contract?       7f       X         g       If the organization, any trans. busits, airplanes, or other vehicles, did the organization file a Form 1098cC?       7h       X         g       Sponsoring organization make any taxabe distributions under section 4966?       9a       9b       9a       9b       9b		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c       If "Yes," to line 5a or 5b, and the organization file Form 8886-T7         6D Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         7       Organizations that may receive deductible contributions under section 170(c).       10 the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         16       Tyes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         16       Tyes," indicate the number of Forms 8282 field during the year       7d       7d       X         10       Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8989 as required?       7t       X         11       Brogenization receive a contribution of cars, bacts, airplanes, or other vehicles, did the organization file Form 8989 as required?       7t       X         11       Brogenization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7t       X         9       Sponsoring organization maxinataining doora advised fund	5a				
6a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b If 'Yes,'' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6a       X         7       Organization stat may receive deductible contributions under section 170(c).       7a       X         7       Did the organization neckes of \$75 made paths as a contribution and path for goods and services provided to the payor?       7a       X         7       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the form \$22?       7c       X         7       Did the organization neceive any funds, directly or indirectly, to ap presimitums on a personal benefit contract?       7r       X         7       The organization neceive a contribution of cars, boats, aiptanes, or other vehicles, did the organization file a Form 1098-C7       7h       X         7       The organization neceived a contribution of cars, boats, aiptanes, or other vehicles, did the organization file a Form 1098-C7       7h       X         8       Sponsoring organization make and istribution to a donor, donor advised fund maintained by the sponsoring organization make and istribution sunder section 4966?       9a       9a       9a       9a       9a       9a <th>b</th> <th></th> <th></th> <th></th> <th>X</th>	b				X
any contributions that were not tax deductible as charitable contributions?       6a       X         b       If 'Yes,'' did the organization include with every solicitation an express statement that such contributions or gifts       6b       6b         7       Organizations that may receive deductible contributions under section 170(c).       0b       7a       X         10       If 'Yes,'' did the organization notify the donor of the value of the goods or services provided?       7a       X         C       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       7c       X         0       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         11       Tr c       X       7f       X         12       If the organization receive a contribution of qualified intellectual property, did the organization file Form 8099 as required?       7f       X         15       If the organization receive a contribution of qualified intellectual property, did the organization file Form 8099 as required?       7h       X         16       If the organization neceive any taxabic distributions under section 4966?       9a       9a       9a       9a       9a       9a       9b       10b       10b       10b       10b       10b       <	с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b         7       Organizations that may receive deductible contributions under section 170(c).       7a       X         9       Did the organization necive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?       7a       X         0       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         0       If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the form \$282?       7c       X         0       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         10       the organization receive any funds, directly or indirectly, to pay premiums, on a personal benefit contract?       7f       X         11       the organization neceived a contribution of qualified intellectual property, did the organization file a Form 1089C as required?       7h       X         14       the organization maintaining door advised funds.       9       Sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         15       Section 501(c/(7) organizations. Enter:       11a       10a       10b       10b       10a	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization so	licit		
were not tax deductible?     6b       7 Organizations that may receive deductible contributions under section 170(c).     0       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       b If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b     7c     X       c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?     7c     X       d If "Yes," indicate the number of Forms 8282 filed during the year     7d     X       e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7f     X       f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7h     X       g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7h     X       9 Sponsoring organization mata mataining donor advised funds.     8     8     8       a Did the sponsoring organization make a distribution to a donor, donor advised funds for year?     9a     9b       D de the sponsoring organization make a distribution to a donor, donor advised funds?     9a     9b       D de the sponsoring organization make a distribution to a donor, donor advised fund Form 1041?     11a     11a       10 Gross			6a		X
7       Organizations that may receive deductible contributions under section 170(c).       a) bit the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payof?       7a       X         b       ff"Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f       Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8989 as required?       7g       7h       X         g       If the organization received a contribution of cars, boats, aiptalens, or other vehicles, did the organization file Form 1098-C?       7h       X         g       Sponsoring organization make any taxable distributions under section 4966?       9a       9       9b         g organization meeved a contribution sincluded on Part VIII, line 12       10a       10a       10a       11a       10a       11a       10a       11a       10a       12a       12a <td< th=""><th>b</th><th>If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts</th><th></th><th></th><th></th></td<>	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7h       X         g If the organization matexing door advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9       9b         b Did the sponsoring organizations. Enter:       10a       10a       10a       10a       10a       10a       10a       10a       10a       11b       11b       11b       12a       12a       12a       14a       13a       13a       13a       13a       13a       13a       13a<		were not tax deductible?	6b		
b       If *Yes,* did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If *Yes,* indicate the number of Forms 8282 filed during the year       7d       7c       X         d If *Yes,* indicate the number of Forms 8282 filed during the year       7d       7c       X         f       Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7c       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?       7h       X         f       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?       7h       X         8       Sponsoring organizations maintaining donor advised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9b         9       Sponsoring organization make any taxable distributions of advisor, or related person?       9b       9b         10 the sponsoring organizations. Enter:       a       Iota       Iota       Iota         11       Section 501(c)(7) againations. Enter:       Iota       Iota       Iota       Iota <t< th=""><th>7</th><th></th><th></th><th></th><th></th></t<>	7				
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g       If the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7g       7d       X         g       If the organization maintaining donor advised funds.       8       9       Sponsoring organizations maintaining donor advised funds.       8       8       9         g       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9a       9b       9c	а				X
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         8 Sponsoring organizations maintaining donor advised funds.       8       9       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9         9 Did the sponsoring organizations. Enter:       10a       10a       9b         10 Section 501(c)(7) organizations. Enter:       10a       10b       10b       10b         11 Section 501(c)(2) organizations. Enter:       11a       10b       12a       12a         12 Section 501(c)(2) organizations. Enter:       11a       10b       12a       12a         13 Section 501(c)(2) organizations. Enter:       11a       11b       12a       12a       12a         13 Section 501(c)(2) organizations. Enter:       11a       12b       12a       12a       <	b		<b>7</b> b		
d If "Yes," indicate the number of Forms 8282 filed during the year       Td       Td         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Te       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       Tf       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       Tg       X         n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?       Th       X         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a         9 Sponsoring organizations maintaining donor advised funds.       Ioa       Ioa       9a       9a         10 the sponsoring organizations make any taxable distributions under section 4966?       9a       9a       9b       Section 501(c)(17) organizations. Enter:       Ioa       Ioa       Ioa       Ioa       Ioa       Ioa       Ioa       Ioa       Ioa       Iob       Iob       Iob       Iob       Iob       Ioa	С				37
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h       X         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         sponsoring organizations maintaining donor advised funds.       a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8       9         9       Sponsoring organizations maintaining donor advised funds.       9       9a       9b       9b         10       the sponsoring organization make any taxable distributions under section 4966?       9a       9b       9a       9b       9c			7c		X
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7r       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h       X         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7h       X         8       Sponsoring organizations maintaining donor advised funds.       8       8       8       8         9       Sponsoring organizations maintaining donor advised funds.       8       8       8       8       9       9a       9b       9a       9b       9c					v
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization mave excess business holdings at any time during the year?       8         9 Sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         12a       11b       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13 Section 501(c)(2) gualified nonprofit health insurance issuers.       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         Vote. See the instructions for additional information the organization must report on Schedule O.       13a         Note. See the instructions for additional information the organization is required to maintain by th	е				
h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds.       8         9       Sponsoring organization make any taxable distributions under section 4966?       8         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a         9       Section 501(c)(7) organizations. Enter:       9b         10       Initiation fees and capital contributions included on Part VIII, line 12. for public use of club facilities       10a         11       Section 501(c)(12) organizations. Enter:       10a       10b         12       Gross income from members or shareholders       11a       10b         13       Gross income from members or shareholders       11a       12a         14       Section 501(c)(12) organizations. Enter:       11b       12a         15       Gross income from members or shareholders       11a       10b         15       Gross income from members or shareholders       11a       12a         16       Gross income from other sources (Do not net amounts due or paid to other sources against       11b       12a         16       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b <td< th=""><th>f</th><th></th><th></th><th></th><th><u> </u></th></td<>	f				<u> </u>
8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         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         11       Section 501(c)(12) organizations. Enter:       10a       11b         a       Gross income from members or shareholders       11a       12a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         Note. See the instructions for additional information the organization must report on Schedule	g				
sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9a         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organizations. Enter:       10a         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         11       Section 501(c)(12) organizations. Enter:       10a       10b         a       Gross income from members or shareholders       11a       11b       12a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       12a       12a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       5a       13a       13a       13a	-		098-C? 7h		
9       Sponsoring organizations maintaining donor advised funds.       9a       9a         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9b         b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10b       10b         a       Initiation fees and capital contributions included on Part VIII, line 12       10b       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       10b       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       10b       10b       10b         12       Gross income from members or shareholders       11a       10b       10b       10b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a<	8				
a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       10a       9b         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11 Section 501(c)(12) organizations. Enter:       11a       10b       11a         a Gross income from members or shareholders       11a       11b       12a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       12a         13 Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a         13 Section 501(c)(29) qualified health plans in more than one state?       13a       13a         14a       X	•		8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       10a         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         11 Section 501(c)(12) organizations. Enter:       10a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       11b         12a       12b         b ff "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13c       14a			0.5		
10       Section 501(c)(7) organizations. Enter:       10a       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       11a       10b       11a         a       Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         14       Did the organization is licensed to issue qualified health plans       13b       13b         13b       13c       13b       13c					
a       Initiation fees and capital contributions included on Part VIII, line 12       10a       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       11a       10b       11a         a       Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X					
b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       13a       13a         d       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X					
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 against amounts due or received from them.)         12a       11b         12b       11b         12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         14a       X					
a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13b       13c         14a       X					
b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X					
amounts due or received from them.)       11b       12a         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X					
12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X					
b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c       14a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	12a		12a		
13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       5       13a       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13c       13c         c       Enter the amount of reserves on hand       13c       14a       X					
a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans       Image: Comparization is licensed to issue qualified health plans <th></th> <th></th> <th></th> <th></th> <th></th>					
Note. See the instructions for additional information the organization must report on Schedule O.       Image: Description of the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X		-			
organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	b				
c Enter the amount of reserves on hand       13c       14a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X					
14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	с				
			14a		Х
			14b		

Form **990** (2014)

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54-6054289 Page **6** Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	Check if Schedule O contains a response or note to any line in this Part VI			<u></u>			
ect	ion A. Governing Body and Management						-
		ι.	1	1 7		Yes	+
	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		17			
	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.			1 7			
	Enter the number of voting members included in line 1a, above, who are independent	1b		17			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh						ł
	officer, director, trustee, or key employee?				2		╀
	Did the organization delegate control over management duties customarily performed by or under t		-				
	of officers, directors, or trustees, or key employees to a management company or other person?				3		╀
	Did the organization make any significant changes to its governing documents since the prior Form			r	4		+
	Did the organization become aware during the year of a significant diversion of the organization's as				5	<u> </u>	∔
	Did the organization have members or stockholders?				6	<u> </u>	∔
	Did the organization have members, stockholders, or other persons who had the power to elect or a more members of the governing body?				7a	x	
	Are any governance decisions of the organization reserved to (or subject to approval by) members,						t
	persons other than the governing body?				7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	e followina:				t
	The governing body?				8a	Х	I
b	Each committee with authority to act on behalf of the governing body?				8b	X	t
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re						t
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		
	ion B. Policies (This Section B requests information about policies not required by the Internal F						
						Yes	1
0a	Did the organization have local chapters, branches, or affiliates?				10a	X	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such o	hapter	s, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b	X	
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	ore filing the f	form?	11a	X	Ī
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						I
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	I
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	flicts?		12b	X	1
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe				T
	in Schedule O how this was done				12c	X	
	Did the organization have a written whistleblower policy?				13		t
	Did the organization have a written document retention and destruction policy?				14	X	1
	Did the process for determining compensation of the following persons include a review and approv						1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		·				l
а	The organization's CEO, Executive Director, or top management official				15a	X	I
	Other officers or key employees of the organization			r	15b	X	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						1
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a				l
	taxable entity during the year?				16a		I
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its p	participation				1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anizatio	n's				
	exempt status with respect to such arrangements?				16b		Ì
ect	ion C. Disclosure						
7	List the states with which a copy of this Form 990 is required to be filed ►VA , UT , NY , KY , I	ĺD,Μ	I, MA, N	H,NJ	, CA		
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)	)s only) a	vailat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain	n in Sci	hedule O)				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict o	of interest po	olicy, and	finan	icial	
	statements available to the public during the tax year.		1	., .			
	State the name, address, and telephone number of the person who possesses the organization's b	ooks ai	nd records:	►			
	, , , , , ,						-
20	ELAINE CAMPBELL - 757-221-1201						
20							-

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

WILLIAM & MARY IN VIRGINIA, IN	MILLIAM	&	MARY	IN	VIRGINIA,	INC
--------------------------------	---------	---	------	----	-----------	-----

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (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 report-

able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

reportable compensation from the organization and any related organizations.

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

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)	(F)					
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle cer an	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week					1		from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	organizations	truste	al trus		yee	mper		(		and related
	below	idual	Institutional trustee	5	Key employee	est co oyee	er			organizations
	line)	Indiv	Instit	Officer	Keye	Highest compensated employee	Former			
(1) CYNTHIA SATTERWHITE JARBOE	6.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) GLENN W. CRAFFORD	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(3) KEVIN J. TURNER	2.00									
TREASURER		Х		Х				0.	0.	0.
(4) LYDIA R. PULLEY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) DAVID NOEL KELLEY	1.00									
IMMEDIATE PAST PRESIDENT		Х		Х				0.	0.	0.
(6) MARILYN W. MIDYETTE	60.00									
EXECUTIVE DIRECTOR		Х		Х				0.	87,500.	21,875.
(7) CHRISTOPHER PAUL ADKINS	1.00									
MEMBER		Х						0.	0.	0.
(8) MOLLY FRANCES ASHBY	1.00									
MEMBER		Х						0.	0.	0.
(9) SANDRA D. BOWEN	1.00									_
MEMBER		Х						0.	0.	0.
(10) J. THOMAS FLESHER	1.00									_
MEMBER		Х						0.	0.	0.
(11) KATHRYN HENNECY FLOYD	1.00									
MEMBER		Х						0.	0.	0.
(12) SOPHIE LEE	1.00									•
MEMBER	1 00	X						0.	0.	0.
(13) NICOLE LYNN LEWIS	1.00									0
MEMBER	1 00	X						0.	0.	0.
(14) MARK J. LINAUGH	1.00									0
MEMBER	1 00	X						0.	0.	0.
(15) SUSAN P. MANIX	1.00									•
MEMBER	1 00	X						0.	0.	0.
(16) DAVID TODD SCOTT	1.00									0
MEMBER	1 00	X						0.	0.	0.
(17) STEPHEN S. TANG	1.00								_	<u>^</u>
MEMBER		Х						0.	0.	0.
432007 11-07-14										Form <b>990</b> (2014)

Form 990 (2014)

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2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

WILLIAM & MARY IN VIRGINIA, INC.

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Form 990 (2014) WILLIAM &	MARY I	ΕN	V1	IRG	SIN	NIA	Δ,	INC.	54-605	42	289	Page <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, and	d Hi	ghes	st C	Compensated Employe	<b>es</b> (continued)			
(A) Name and title	(B) Average hours per week	erage Position (do not check more box, unless person is officer and a directo			than d is both	n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F Estima amou oth	ated nt of er	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		compen from organiz and re organiz	the ation lated
(18) G. WAYNE WOOLWINE MEMBER	1.00	x						0.	0			0.
(19) WILLIAM A. ARMBRUSTER	1.00	x						0.	0			0.
CHAIR OF OLDE GUARDE COUNCIL (20) ALYSSA WALLACE SCRUGGS	1.00											
CHAIR OF YOUNG GUARDE COUNCIL (21) MADELINE SCHULTZ	1.00	Х						0.	0	•		0.
VICE CHAIR, STUDENTS FOR UNIVERSITY		x						0.	0	•		0.
(22) ANGELA A. CASOLARO CHAIR OF CHAPTER PRESIDENTS COUNCIL	1.00	x						0.	0			0.
(23) KAREN R. COTTRELL EXEC-VP	40.00	x		x				104,059.	0		11,	911.
											-	
								104,059.	87,500		22	786.
1b Sub-total c Total from continuation sheets to Part V								0.	-	•	55,	0.
d Total (add lines 1b and 1c)								104,059.	87,500	•	33,	786.
2 Total number of individuals (including but n compensation from the organization ►	ot limited to th	iose	liste	ed at	oove	e) wh	io r	eceived more than \$100	0,000 of reportable			1
											Ye	s No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s								•			3	x
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportab	le co	omp	ensa	ation	n anc	l otl	her compensation from	the organization		4	x
5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr	elat	ed organization or indiv				
rendered to the organization? If "Yes," com Section B. Independent Contractors	piete Scheaui	eJī	or si	icn j	oers	son .					5	X
1 Complete this table for your five highest co the organization. Report compensation for	-	-								nsa	ation from	1
(A) Name and business	-		ONE					(B) Description of s		Сс	(C) ompensa	tion
							$\dashv$					
2 Total number of independent contractors (i \$100,000 of compensation from the organi		ot li	mite	d to	tho:		stec	d above) who received n	nore than			

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Ра	rt VI	Check if Schedule O cont.		e or note to anv lin	e in this Part VIII			
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts its	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		4,491.				
Ğ,G		Fundraising events		83,650.				
ar /		Related organizations		,				
s, G		Government grants (contribut						
Sir		All other contributions, gifts, grant						
uti		similar amounts not included abov		1 136 150				
oti				1,136,150. 20,077.				
no'	-	Noncash contributions included in lines		<u> </u>	1 224 201			
90	n	Total. Add lines 1a-1f	<u></u>		1,224,291.			
				Business Code	240.005	240.005		
ice	2 a	ALUMNI PROGRAM REVENUE		900099	340,895.	340,895.		
ue v	b							
n S /en	С							
Program Service Revenue	d	I						
roc	е							
д.		All other program service reve						
	g	<b>Total.</b> Add lines 2a-2f		🕨	340,895.			
	3	Investment income (including						
		other similar amounts)		🕨	169,712.			169,712.
	4	Income from investment of tax	x-exempt bond	proceeds 🕨				
	5	Royalties		🕨				
			(i) Real	(ii) Personal				
	6 a	Gross rents	108,681	. 1,350.				
	b	Less: rental expenses	4,882	. 0.				
	с	Rental income or (loss)	103,799	. 1,350.				
	d	Net rental income or (loss)		►	105,149.			105,149.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	2,080,769					
	b	Less: cost or other basis						
		and sales expenses	1,091,151	. 17,423.				
	с	Gain or (loss)			>			
		Net gain or (loss)			972,195.	<17,423.	>	989,618.
ø		Gross income from fundraising						
'nu		including \$ 83						
eve		contributions reported on line						
r Ŗ		Part IV, line 18	-	171,265.				
Other Revenue	h	Less: direct expenses		<b>1</b> 09,346.				
Ò		Net income or (loss) from func		· •	61,919.			61,919.
		Gross income from gaming ac	-		, -			, .
		Part IV, line 19						
	h							
		Net income or (loss) from gam						
		Gross sales of inventory, less	•					
	10 a	•		134,354.				
	h	and allowances		91,321.				
		Less: cost of goods sold			12 022	42 022		
	с	Net income or (loss) from sale			43,033.	43,033.		
	44 -	Miscellaneous Revenu AFFINITY PROGRAM INCOM		Business Code 900099	106 242			106 242
			<u> </u>	561520	106,343.		70 402	106,343.
	b				70,403.	12 012	70,403.	
	C			900099	13,813.	13,813.		
	d				400			
					190,559.			4
43200	<u>12</u> 9	Total revenue. See instructions.		▶	3,107,753.	380,318.	70,403.	
11-07	-14							Form <b>990</b> (2014)

	990 (2014) WILLIAM & MA	ARY IN VIRGI			54289 Page <b>10</b>
	rt IX Statement of Functional Expense		·		
Sect	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	60,500.	60,500.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	20,790.		20,790.	
~	trustees, and key employees	20,750.		20,750.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	F	239,956.	221,275.	18,681.	
7 8	Other salaries and wages Pension plan accruals and contributions (include			10,001.	
0	section 401(k) and 403(b) employer contributions)	21,902.	18,760.	3,142.	
9	Other employee benefits	86,457.	76,112.	10,345.	
9 10		30,012.	25,706.	4,306.	
11	Payroll taxes Fees for services (non-employees):	50,012.	25,100.	1,5000	
'' a					
a b	Management Legal				
	Accounting	27,000.		27,000.	
	Lobbying	2770000			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	49,590.		49,590.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	58,934.	34,080.	24,854.	
14	Information technology	3,942.	3,942.		
15	Royalties				
16	Occupancy	16,582.	16,582.		
17	Travel	8,388.	372.	8,016.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31,109.		31,109.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	27,850.	27,850.		
23	Insurance	14,967.	12,820.	2,147.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OTHER MISCELLANEOUS PRO	361,961.	361,961.		
b	HOMECOMING	254,496.	254,496.		
с	50TH REUNION	109,258.	109,258.		
d	GIFTS	46,120.	46,120.		
е	All other expenses	105,610.	105,610.		
25	Total functional expenses. Add lines 1 through 24e	1,575,424.	1,375,444.	199,980.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

432010 11-07-14

Check here

17130204 781789 2018590000

\_\_\_\_\_\_ if following SOP 98-2 (ASC 958-720)

2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

Form **990** (2014)

Form 990 (2014)

Part X Balance Sheet

17130204 781789 2018590000

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

WILLIAM & MARY IN VIRGINIA, INC.

54-6054289 Page 11

Home         Home <t< th=""><th></th><th></th><th>Check if Schedule O contains a response or not</th><th>e to ar</th><th>v line in this Part X</th><th></th><th></th><th></th></t<>			Check if Schedule O contains a response or not	e to ar	v line in this Part X			
g         Savings and transport cash investments         2           g         Predges and grants receivable, net         72,188.4           4         Accounts incolvable, net         72,188.4           5         Leans and other receivables from current and former officers, directors, trustases, key employees, and highest componated employees. Complete Part II of Schedule L         5           6         Leans and other receivables from chird disqualified persons (as defined under section 4958(h)(1), persons described in SchOy Nouthardy employees the beneficiary organizations (see inst). Complete Part II of Sch L         6           7         Notes and charm receivables from other disqualified persons (as defined under section 4958(h)(1), persons described in SchOy Nouthardy employees: beneficiary organizations (see inst). Complete Part II of Sch L         6           7         Notes and charm receivables. For other the section 4958(h)(200 woltrardy employees: beneficiary organizations (see inst). Complete Part II of Sch L         6           10a         Land, buildings, and equevites. Sch Part IV, Ine 11         11         14           10a         Land, sector and the receivables. Sch Part IV, Ine 11         13         14           11         Interstemats - program-related. See Part IV, Ine 11         13         14           13         Interstemats - program-related. See Part IV, Ine 11         14         15           14         Intreseteres.         21		-		o to ur		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
a         Piedges and grants receivable, net         a           4         Accounts receivables from current and former officers, directors, trustece, key employes, and highest compensated employee. Complete Part II of Schedule L         72,188.4         51,682.5           6         Laars and other receivables from other disqualified persons (as defined under section 4588)(?)), persons described in section 501(5(9) worknary) employees beneficiary organizations of section 501(5(9) worknary) employees beneficiary organizations (see instr). Complete Part II of Sch Lu.         6           7         Notes and loans receivable, net         9         73,112.           10a         Laars, and other receivable, net         6           7         Notes and loans receivable, net         6           11         Inventories for sale or use         65,085.9         23,1112.           10a         Lass, complete Part IV of Schodulo D         10a         834,705.           11         Investments - publicly traded securities         7,080,638.1         6,630,052.9           11         Investments - programetated. See Part IV, line 11         13         14         16           13         Investments - publicly traded securities         7,080,638.1         16,22,255,365.9           17         Accounts payable and accound expenses         14         15           16         Tota assets. Add Ins 11 (must equ		1	Cash - non-interest-bearing			277,175.	1	661,204.
4       Accounts receivable, net       72,188.4       51,682.         5       Loars and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete       5         6       Loars and other receivables from other disqualified persons (as defined under section 4958(r)(1)), persons described in section 4958(r)(2)(9) voluntary employees and sponsoring organizations of section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations (see inst). Complete Part II of Schulta Pilling for an income officers, directors, trustees, key employees and phore payable to current and former officers, directors, trustees, key employees and phore payable to unrelated third parties Pilling for 20 income tax, payables to related third parties Pilling Pilling for 20 income tax, payables to related third parties Pilling Pilling for 20 income t		2	Savings and temporary cash investments				2	
4       Accounts receivable, net       72,188.4       51,682.         5       Loars and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete       5         6       Loars and other receivables from other disqualified persons (as defined under section 4958(r)(1)), persons described in section 4958(r)(2)(9) voluntary employees and sponsoring organizations of section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations for section 501(0) voluntary employees and sponsoring organizations (see inst). Complete Part II of Schulta Pilling for an income officers, directors, trustees, key employees and phore payable to current and former officers, directors, trustees, key employees and phore payable to unrelated third parties Pilling for 20 income tax, payables to related third parties Pilling Pilling for 20 income tax, payables to related third parties Pilling Pilling for 20 income t		3	Pledges and grants receivable, net				3	
S       Lears and other receivables from current and former officers, directors, trustees, kay employees, and highest componsated employees. Complete Part II of Schedule L       5         B       Laars and other receivables from other disqualified persons (as defined under section 4958(17)), persons described in section 501(5(8), and conthibuting employers and sponsoring organizations of section 501(5(8), and conthibuting employers thereficiancy organizations of section 501(5(8), and conthibuting employers thereficiancy organizations of section 501(5(8), and conthibuting employers thereficiancy organizations else instr). Complete Part II of Sch L       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use       49, 884, 8       12, 6227, 65, 085. 9         10a       B34, 705.         b       Lass: accumulated depreciation       10a       712, 954.         11       Investments - publicy traded securities       7, 080, 638. 11       12         11       Investments - publicy traded securities       6       12, 1255, 369.         12       Investments - policy traded securities       7, 080, 638. 11       12       12, 255, 369.         13       Investments - publicy traded securities       14       13.       14         14       Intargetile assets       14       12, 255, 369.       284, 282. 17       90, 7111.         14       Defired revenue       92, 328.		4	Accounts receivable, net			72,188.	4	51,682.
Part II of Schedule L         5           6         Loans and other receivables from other disqualified persons (as defined under section 4958(1)(1), persons described in section 4958(1)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations of section 501(c)(9) voluntary employees and deprediction for the section 500 to 712, 954.         6           10a         834, 705.         6           11a         10a         834, 705.           12a         10b         712, 954.         167, 024.           11a         Investments - outor securities. See Part IV, line 11         482, 871.         12         4, 554, 941.           13         Investments - outor securities. See Part IV, line 11         13         14         16           14         Intragible assets.         114         12, 194, 865.         16         12, 255, 369.           17         Accounts payable and accruet expenses         284, 282.         17         90, 7111.           18         12, 194, 865.         <		5	Loans and other receivables from current and for	ormer o	fficers, directors,			
6         Loans and other receivables from other disqualified persons (as defined under section 4958(1)(1), persons described in section 4958(c)(3)(8), and contributing employees's and sponsing organizations of section 501(c)(9) voluntary employees's baneficiary organizations (see instr). Complete Part II of Sch L.         6           7         Notes and loans receivable, net.         6           9         Prepaid expenses and deferred charges         65, 085. 9         23, 112.           10a         B334, 705.         6         121, 751.           10b Land, building, and equipment: cost or other basis. Complete Part V of Schedule D         10a         712, 954.         167, 024.         10c         121, 751.           11         Investments - publicly traded securities.         7, 080, 638.         11         6, 830, 052.           12         Investments - publicly traded securities.         7, 080, 638.         11         6, 830, 052.           11         Investments - publicly traded securities.         7, 080, 638.         11         6, 830, 052.           14         Intangible assets.         114         168.         12, 194, 865.         16         12, 255, 369.           16         Tota secter. Add in tes 1 through 15 (must equal line 34)         12, 194, 865.         16         12, 255, 369.           16         Tota sacets. Add inses 1 through 15 (must equal line 34)         12,			trustees, key employees, and highest compensation	ated en	nployees. Complete			
section 4558(r)(1), persons described in section 4558(r)(3)(B), and contributing employers and sponsoring organizations (see inst). Complete Part II of Sch L         6           7         Notes and loans receivable, net         7           7         Notes and loans receivable, net         7           9         Prepaid expenses and deferred charges         65, 085. 9         23, 112.           10a         Land, buildings, and equipment cost or other         10a         81, Northories for sales         121, 751.           11         Investments - publicity traded securities         10b         712, 954.         167, 024.         10c         121, 751.           11         Investments - publicity traded securities         10b         712, 954.         167, 024.         10c         121, 751.           11         Investments - publicity traded securities         11         13         6, 830, 052.         12         121, 751.           13         Investments - publicity traded securities         14         14         16         16, 12, 255, 369.         122, 194, 865.         16         12, 255, 369.           14         Intragible assets.         17         Accounts payable and accrued expenses         284, 282.         17         90, 7111.           19         Deferred revenue         92, 328.         18         12			Part II of Schedule L				5	
gg         employes and sponsoring organizations of section 501(0(8) voluntary employees' beneficiary organizations (see inst). Complete Part II of Sch L         6           7         Notes and loans receivable, net         7         7           8         Inventories for sale or use         49,8844.8         12,627.           9         Prepaid expenses and defered charges         65,085.9         23,112.7           10a         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         712,954.1         167,024.40c         121,751.4           11         Investments - publicly fraded securities         7,080,638.111         6,830,052.4         124,554,941.4           13         Investments - publicly fraded securities         7,080,638.111         6,830,052.4         14           14         Intrangible assets         7,080,638.111         6,830,052.4         12,194,865.166         12,255,369.7           16         Total assets. Add lines 1 through 15 (must equal line 34)         12,194,865.166         12,255,369.7         11.6           16         Total assets. Add lines 1 through 15 (must equal line 34)         12,194,865.166         12,255,369.7           17         Accounts payable and accrued expenses         284,282.177         90,711.4           18         Greared payables to current and former officers, d		6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
geg       employee's beneficiary organizations (see instr). Complete Part II of Sch L       6         7       Notes and loars receivable, net       7         8       Inventories for sale or use       49,884.8       12,627.4         9       Prepaid expenses and defered charges       65,085.9       23,112.4         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       7,080,638.11       6,830,052.4         11       Investments - publicy traded securities       7,080,638.11       6,830,052.4       166,30,052.4         12       Investments - policy traded securities       7,080,638.11       6,830,052.4       14         13       Investments - program-related. See Part IV, line 11       13       14       15         14       thangble assets       14       15       16       12,255,369.4         16       Total assets.Add lines 1 through 15 (must equal line 34)       12,194,865.16       12,255,369.4         17       Accounts payable and accrued expenses       284,282.17       90,711.4         18       Grants payable       20       21       22       23       24       22       21       23       24       22       21       23       24       22       21       23       24 <td></td> <td></td> <td>section 4958(f)(1)), persons described in section</td> <td>4958(</td> <td>c)(3)(B), and contributing</td> <td></td> <td></td> <td></td>			section 4958(f)(1)), persons described in section	4958(	c)(3)(B), and contributing			
97       Notes and loans receivable, net       7         97       Notes and loans receivable, net       49,884.       8       12,627.         9       Prepaid expenses and deferred charges       65,085.       9       23,112.         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       834,705.       167,024.       10c       121,751.         11       Investments - publicly traded securities       7,080,638.       11       6,830,052.       12       12       14       53,052.       14,553,052.         12       Investments - program-related. See Part IV, line 11       4,452,871.       12       4,554,941.       13         14       Intargible assets       11       6,830,052.       16       12,255,369.       16       12,255,369.         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.       17         17       Accounts payable and accrued expenses       284,282.       17       90,711.       16         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         18       Grants payable on current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			employers and sponsoring organizations of sec	ion 50	1(c)(9) voluntary			
9       Prepriat expenses and deferred charges       439,034.8       12,027.4         10a       Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D       10a       834,705.         11       Investments - publicly traded securities.       10b       712,954.1       167,024.10c       121,751.4         11       Investments - publicly traded securities.       10b       712,954.1       167,024.10c       121,751.4         11       Investments - other securities. See Part IV, line 11       4,482,871.12       4,554,941.4         13       Investments - other securities. See Part IV, line 11       13         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.16       12,255,369.4         17       Accounts payable and accrued expenses       284,282.17       90,7111.1         18       Grants payable       92,328.18       18         19       Deferred revenue       92,328.19       85,148.2         20       Tax-exempt bond liabilities       20       21         21       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.       24         24       Unsecured notes and loans payable to unrelated third parties       24         25       Secured mor	ŝts		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
9       Prepriat expenses and deferred charges       439,034.8       12,027.4         10a       Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D       10a       834,705.         11       Investments - publicly traded securities.       10b       712,954.1       167,024.10c       121,751.4         11       Investments - publicly traded securities.       10b       712,954.1       167,024.10c       121,751.4         11       Investments - other securities. See Part IV, line 11       4,482,871.12       4,554,941.4         13       Investments - other securities. See Part IV, line 11       13         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.16       12,255,369.4         17       Accounts payable and accrued expenses       284,282.17       90,7111.1         18       Grants payable       92,328.18       18         19       Deferred revenue       92,328.19       85,148.2         20       Tax-exempt bond liabilities       20       21         21       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.       24         24       Unsecured notes and loans payable to unrelated third parties       24         25       Secured mor	SSE	7	Notes and loans receivable, net				7	
10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       834,705.         10b       Uses: accumulated depreciation       10b       712,954.       167,024.       10c       121,751.         11       Investments - publicly traded securities       7,080,638.       11       6,830,052.         12       Investments - orgam-related. See Part IV, line 11       4,482,871.       12       4,554,941.         14       Intragible assets.       11       14       15       16       121,255,369.         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       92,328.       19       85,148.         20       Tax exempt bond liabilities.       20       21         21       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualfied persons.       24       24         24       Unscured notes and loans payable to unrelated third parties       23       24       24         25       Schedule D       24       163,572.       25       18,929       26       19	◄	8	Inventories for sale or use					
basis. Complete Part VI of Schedule D         10a         334,705. 10b         167,024. 10c         10c         121,751. 10c           1         Investments - publicly traded securities. Investments - program-related. See Part IV, line 11         4,482,871. 12         12,554,941. 13           11         Investments - program-related. See Part IV, line 11         13         14         14           13         Investments - program-related. See Part IV, line 11         13         14           15         Other assets. See Part IV, line 11         14         15           16         Total assets. Add lines 1 through 15 (must equal line 34)         12,194,865. 16         12,255,369.           17         Accounts payable and accrued expenses         284,282. 20         18         85,148.           20         Tax exempt bond liabilities         200         21         22           21         Escrow or custodial account liability. Complete Part IV of Schedule D         21         22           22         Lans and other payable to unrelated third parties         23         24         24           25         Other liabilities not included on lines 17.24). Complete Part X of Schedule D         24         163,572. 25         18,929. 24         194,788. 27           26         Total liabilitities. Add lines 17 through 25         5400,182. 26 <td></td> <td>9</td> <td>Prepaid expenses and deferred charges</td> <td></td> <td></td> <td>65,085.</td> <td>9</td> <td>23,112.</td>		9	Prepaid expenses and deferred charges			65,085.	9	23,112.
b       Less: accumulated depreciation       10b       712,954.       167,024.       10c       121,751.         11       Investments - publicly traded securities       7,080,638.       11       6,830,052.         12       Investments - program-related. See Part IV, line 11       4,482,871.       12       4,554,941.         13       Investments - program-related. See Part IV, line 11       13       14       15         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       18       12       20       21         20       Tax exempt bond liabilities       20       21       20       21         21       Escrow or custodial account lability. Complete Part V of Schedule D       21       22       22         22       Lonas and other payables to current and former officers, frustees, key employees, highest compensated employees, and disqualified persons.       24       24         24       Unsecured notes anal loans payable to unrelated third parties       24       24         25       Other liabilities, and included on lines 17:24). Complete Part X of Schedule D       163,572.       25		10a	Land, buildings, and equipment: cost or other					
11       Investments - publicly traded securities       7,080,638.11       6,830,052.         12       Investments - other securities. See Part IV, line 11       4,482,871.12       4,554,941.         13       Investments - opegram-related. See Part IV, line 11       13       14         14       Intangible assets       14       15         15       Other assets. See Part IV, line 11       15       16         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.16       12,255,369.         17       Accounts payable and accrued expenses       284,282.17       90,711.         18       Grants payable       16       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       20         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.       22       23         24       Unsecurde notes and loans payable to unrelated third parties       23       24         25       Other liabilities not included on lines 17.24). Complete Part X of Schedule D       163,572.25       18,929.         28       Total liabilities Add lines 37 through 25.       540,182.26       194,788.         26       Total liabilities. Add lines 17 through 25.<			basis. Complete Part VI of Schedule D					
12       Investments - other securities. See Part IV, line 11       4,482,871.12       4,554,941.12         13       Investments - program-related. See Part IV, line 11       13         14       Intagible assets       14         15       Other assets. See Part IV, line 11       14         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.16       12,255,369.         17       Accounts payable and accrued expenses       284,282.17       90,711.9         18       Grants payable       18       18         19       Deferred revenue       92,328.19       85,148.         20       Earcow or custodial account liability. Complete Part IV of Schedule D       21       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       22         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualfied persons. Complete Part II of Schedule L       22         23       Secured notes and loans payable to unrelated third parties       23       24         24       Unsecured notes and loans payable to unrelated third parties       24       163,572.25       18,929.9         24       Total liabilities. Add lines 17 through 25       540,182.26       194,788.0		b	Less: accumulated depreciation	10b	712,954.	167,024.	10c	
13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       14         15       Other assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       18       20       284,282.       17       90,711.         18       Deferred revenue       92,328.       19       85,148.       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21       22         22       Leans and other payable to urrelated third parties       22       22       23         22       Leans and other payable to unrelated third parties       23       24       24       24         24       Unsecured notes and loans payable to unrelated third parties       24       24       24       24         25       Other liabilities (including federal income tax, payables to related third parties       24       24       24       26       163,572.       25       18,929.       540,182.       26       194,788.         28       Total liabilities. Add lines 17 through 25       540,182.       26 <td< td=""><td></td><td>11</td><td>Investments - publicly traded securities</td><td></td><td></td><td></td><td></td><td></td></td<>		11	Investments - publicly traded securities					
14       Intangible assets       14         15       Other assets. See Part IV, line 11       15         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       18       18         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.       22       23         23       Secured mortgages and notes payable to unrelated third parties       24       24         24       Unsecured notes and loans payable to unrelated third parties       24       24         24       Other liabilities. Add lines 17 through 25       540,182.       26       194,788.         27       Total liabilities. Add lines 33 and 34.       6,772,834.       27       7,621,143.         28       Temporarily restricted net assets       1,026,533.       28       972,910.         28       Temporarily restricted net assets       3,855,310. <td< td=""><td></td><td>12</td><td>Investments - other securities. See Part IV, line</td><td>I<b>1</b></td><td></td><td>4,482,871.</td><td>12</td><td>4,554,941.</td></td<>		12	Investments - other securities. See Part IV, line	I <b>1</b>		4,482,871.	12	4,554,941.
15       Other assets. See Part IV, line 11       15         16       Total assets. Add lines 1 through 15 (must equal line 34)       12,194,865.       16       12,255,369.         17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       18       18         19       Deferred revenue       92,328.       19       85,148.         20       20       21       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L       22       22         23       Secured mortgages and notes payable to unrelated third parties       23       24         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D       163,572.       25       18,929.         26       Total liabilities. Add lines 17 through 25       540 , 182 .       26       194,788 .         29       Permanently restricted net assets       1,026,539 .       28       972,910 .         29       Permanently restricted net		13	Investments - program-related. See Part IV, line	11			13	
16         Total assets. Add lines 1 through 15 (must equal line 34)         12,194,865.         16         12,255,369.           17         Accounts payable and accrued expenses         284,282.         17         90,711.           18         Grants payable         18         18           19         Deferred revenue         92,328.         19         85,148.           20         Zate exempt bond liabilities         20         21           21         Escrow or custodial account liability. Complete Part IV of Schedule D         21         22           22         Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.         22         23           23         Secured mortgages and notes payable to unrelated third parties         23         24         24           25         Other liabilities not included on lines 17.24). Complete Part X of Schedule D         26         163,572.         25         18,929.           26         Total liabilities. Add lines 17 through 25         540,182.         26         194,788.           0rganizations that follow SFAS 117 (ASC 958), check here          3,855,310.         29         3,466,528.           27         Unrestricted net assets         30         37,655,310.         29 <td< td=""><td></td><td>14</td><td></td><td></td><td></td><td></td><td>14</td><td></td></td<>		14					14	
17       Accounts payable and accrued expenses       284,282.       17       90,711.         18       Grants payable       18       18         19       Deferred revenue       92,328.       19       85,148.         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       24         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       163,572.       25       18,929.         26       Total liabilities. Add lines 17 through 25       540,182.       26       194,788.         27       Unrestricted net assets       1,026,539.       28       972,910.         28       Temporarily restricted net assets       3,855,310.       29       3,466,528.         29       Permanently restricted net assets       30       31 <td></td> <td>15</td> <td>Other assets. See Part IV, line 11</td> <td></td> <td></td> <td></td> <td>15</td> <td></td>		15	Other assets. See Part IV, line 11				15	
18       Grants payable       18         19       Deferred revenue       92,328.19       85,148.         20       Tax exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L       22       23         23       Secured mortgages and notes payable to unrelated third parties       24       24       24         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D       25       163,572.25       18,929.9         26       Total liabilities (including federal income tax, payables to related third parties       24       104,788.4         27       Unrestricted net assets       540,182.26       194,788.4         29       Permanently restricted net assets       3,855,310.29       3,466,528.4         29       Permanently restricted net assets       30       31       32         29       Permanently, sor land, building, or equipment fund       31       32       32         30       Capital stock or trust principal, or current funds <td></td> <td>16</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		16						
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23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       24         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       163,572.25       18,929.5         26       Total liabilities. Add lines 17 through 25       540,182.26       194,788.5         0rganizations that follow SFAS 117 (ASC 958), check here ▶       X       and complete lines 27 through 29, and lines 33 and 34.         27       Unrestricted net assets       1,026,539.28       972,910.5         28       Temporarily restricted net assets       3,855,310.29       3,466,528.5         29       Permanently restricted net assets       3,855,310.29       3,466,528.5         0       Capital stock or trust principal, or current funds       30       30         31       Secure and earnings, endowment, accumulated income, or other funds       32       33       12,060,581.5         34       Total liabilities and net assets/fund balances       12,194,865.34       12,255,369.5       34	ies	22						
23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       24         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       163,572.25       18,929.5         26       Total liabilities. Add lines 17 through 25       540,182.26       194,788.5         0rganizations that follow SFAS 117 (ASC 958), check here ▶       X       and complete lines 27 through 29, and lines 33 and 34.         27       Unrestricted net assets       1,026,539.28       972,910.5         28       Temporarily restricted net assets       3,855,310.29       3,466,528.5         29       Permanently restricted net assets       3,855,310.29       3,466,528.5         0       Capital stock or trust principal, or current funds       30       30         31       Secure and earnings, endowment, accumulated income, or other funds       32       33       12,060,581.5         34       Total liabilities and net assets/fund balances       12,194,865.34       12,255,369.5       34	ilit							
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parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       163,572.25       18,929.25         26       Total liabilities. Add lines 17 through 25       540,182.26       194,788.65         Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.       6,772,834.27       7,621,143.65         27       Unrestricted net assets       1,026,539.28       972,910.6         28       Temporarily restricted net assets       3,855,310.29       3,466,528.6         29       Permanently restricted net assets       3,855,310.29       3,466,528.6         30       Capital stock or trust principal, or current funds       30         31       Paid-in or capital surplus, or land, building, or equipment fund       31         32       Retained earnings, endowment, accumulated income, or other funds       32         33       Total liabilities and net assets/fund balances       11,654,683.33       12,060,581.6					F		24	
Schedule D       163,572.25       18,929.25         26       Total liabilities. Add lines 17 through 25       540,182.26       194,788.5         Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.       6,772,834.27       7,621,143.5         27       Unrestricted net assets       1,026,539.28       972,910.5         28       Temporarily restricted net assets       3,855,310.29       3,466,528.5         29       Permanently restricted net assets       3,855,310.29       3,466,528.5         Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □       30       30         30       Capital stock or trust principal, or current funds       30         31       Paid-in or capital surplus, or land, building, or equipment fund       31         32       Retained earnings, endowment, accumulated income, or other funds       32         33       Total liabilities and net assets/fund balances       11,654,683.33       12,060,581.5         34       Total liabilities and net assets/fund balances       12,194,865.34       12,255,369.5		25		-				
26       Total liabilities. Add lines 17 through 25       540, 182. 26       194, 788.         Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗴 and complete lines 27 through 29, and lines 33 and 34.       6, 772, 834. 27       7, 621, 143.         27       Unrestricted net assets       1, 026, 539. 28       972, 910.         28       Temporarily restricted net assets       3, 855, 310. 29       3, 466, 528.         29       Permanently restricted net assets       3, 855, 310. 29       3, 466, 528.         0       Grapital stock or trust principal, or current funds       30         30       Capital stock or trust principal, or current funds       30         31       Paid-in or capital surplus, or land, building, or equipment fund       31         32       Total net assets or fund balances       11, 654, 683. 33       12, 060, 581.         34       Total liabilities and net assets/fund balances       12, 194, 865. 34       12, 255, 369.						162 570		10 020
Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.       and       6,772,834. 27       7,621,143.         27       Unrestricted net assets       1,026,539. 28       972,910.         28       Temporarily restricted net assets       3,855,310. 29       3,466,528.         29       Permanently restricted net assets       3,855,310. 29       3,466,528.         0       Organizations that do not follow SFAS 117 (ASC 958), check here ▶       3       3,855,310. 29       3,466,528.         30       Capital stock or trust principal, or current funds       30       30       31         31       Paid-in or capital surplus, or land, building, or equipment fund       31       32         33       Total net assets or fund balances       11,654,683. 33       12,060,581.         34       Total liabilities and net assets/fund balances       12,194,865. 34       12,255,369.		00						
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band complete lines 30 through 34.3030Capital stock or trust principal, or current funds3031Paid-in or capital surplus, or land, building, or equipment fund3132Retained earnings, endowment, accumulated income, or other funds3233Total net assets or fund balances11,654,683.34Total liabilities and net assets/fund balances12,194,865.	alan							
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Form	990 (2014) WILLIAM & MARY IN VIRGINIA, INC.	54-	6054289	Pad	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,10		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,57		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,53		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,65		
5	Net unrealized gains (losses) on investments	5	<1,12	6,4	<u>31.</u> >
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	12,06	0,5	81.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			x	
b	Were the organization's financial statements audited by an independent accountant?			^	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
-		o oudit			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
Ja		0	л. За		Х
h	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
b	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
	טו מעטונה, פראומוד איזיץ ווז סטוובעטוב ט מווע עבזטוושב מדץ זובאה נמגבוז נט עוועבועט געטון מעטונה		<b>30</b>   Form	990	2014)

Form **990** (2014)

432012 11-07-14

SCHED (Form 990 Department of Internal Revenue	D or 990-EZ)	Co	Public Cha omplete if the organ 490 Ion about Schedule A	OMB No. 1545-0047					
Name of the	ne organizati			ALUMNI OF T			OF		identification number
				IN VIRGINIA					4-6054289
Part I	Reason	for Public (	Charity Status (	All organizations must c	omplete th	iis part.) Se	e instruction	S.	
1 2 3 4	A church, cor A school des A hospital or A medical res city, and stat An organizati	nvention of ch cribed in <b>sect</b> i a cooperative earch organiz e: on operated fo	urches, or associatio ion 170(b)(1)(A)(ii). ( hospital service org ation operated in co	(For lines 1 through 11, on of churches describe (Attach Schedule E.) anization described in <b>s</b> njunction with a hospita	ed in section ection 170 al described	on 170(b)(1 0(b)(1)(A)(ii d in section	i). n 170(b)(1)(A		
7 🗌 8 📃	An organizati <b>section 170(</b> A community	on that norma o)(1)(A)(vi). (C trust describe	Ily receives a substa omplete Part II.) ed in <b>section 170(b)</b>	nental unit described in antial part of its support (1)(A)(vi). (Complete Par e than 33 1/3% of its su	from a gov rt II.)	vernmental	unit or from t	-	
10 🗌 11 🔲	income and u See <b>section</b> An organizati An organizati more publicly	nrelated busin 5 <b>09(a)(2).</b> (Con on organized a on organized a supported or	ness taxable income mplete Part III.) and operated exclus and operated exclus ganizations describe	ct to certain exceptions e (less section 511 tax) for sively to test for public sa- sively for the benefit of, t ed in <b>section 509(a)(1)</b> of for supporting organization	rom busine afety. See to perform or <b>section</b>	esses acqu section 50 the functio 509(a)(2). S	ired by the or <b>9(a)(4).</b> ns of, or to ca See <b>section</b> {	ganization arry out the 509(a)(3). C	after June 30, 1975.
a b	the support organization <b>Type II.</b> A s control or n	ed organization. <b>You must o</b> upporting org nanagement o	on(s) the power to re complete Part IV, Se anization supervised	d or controlled in connect anization vested in the s	a majority	of the direct	ctors or truste	ees of the s on(s), by ha	ving
c d	its supporte Type III no that is not f	ed organization <b>-functionally</b> unctionally int	n(s) (see instructions <b>y integrated.</b> A supp regrated. The organiz	g organization operated s). You must complete porting organization ope zation generally must sa nplete Part IV, Section	Part IV, Se rated in co itisfy a dist	ections A, onnection w ribution rec	<b>D, and E.</b> /ith its suppo quirement an	rted organi	zation(s)
e f Enter	functionally	integrated, or	r Type III non-functio	written determination from the support	ting organi	zation.	Туре I, Туре	II, Type III	
			n about the supporte						
(i)	Name of suppo organization		(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))		rganization in your document? <b>No</b>	(v) Amount of support Instruct	(see	(vi) Amount of other support (see Instructions)
Total	aperwork Re	duction Act N	lotice, see the Instr	ructions for			Scheo	lule A (For	m 990 or 990-EZ) 2014

Form 990 or 990-EZ. 432021 09-17-14

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

## Schedule A (Form 990 or 990 EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC.

54-6054289 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	(e) 2014	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge $\dots$								
4	Total. Add lines 1 through 3	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)								
	Public support. Subtract line 5 from line 4.						8,799,273.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
7	Amounts from line 4	1,814,706.	1,741,895.	1,980,986.	2,105,395.	1,156,291.	8,799,273.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources $\dots$	101,258.	157,821.	239,423.	296,061.	279,743.	1,074,306.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on $\dots$								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						9,873,579.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 5	,439,516.		
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)			
80	organization, check this box and stor ction C. Computation of Publ	here	roontago						
				(7)			89.12 %		
	Public support percentage for 2014 (					14	<u> </u>		
	15    Public support percentage from 2013 Schedule A, Part II, line 14      15    91.37								
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         Image: Step here in the organization in the organization is a publicly support test in the organization is a publicly support test in the organization is a publicly support organization is a publicly support organization is a publicly support test in the organization is a publicly support of the organization is a publ									
C	33 1/3% support test - 2013. If the c								
47.	and <b>stop here.</b> The organization qual								
1/8	10% -facts-and-circumstances tes								
	and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
		-		• • • •	-				
b	10% -facts-and-circumstances tes								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
40									
18	Private foundation. If the organization	IT UIU HOT CHECK A	box on line 13, 16	a, 100, 17a, or 17t					
	Schedule A (Form 990 or 990-EZ) 2014								

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## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
-	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons						
D	Amounts included on lines 2 and 3 received from other than disgualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
D	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
••	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization'	's first, second. thi	rd, fourth. or fifth t	tax year as a section	on 501(c)(3) oraani;	zation,
Sec	tion C. Computation of Publi	c Support Pe	ercentage				······
	Public support percentage for 2014 (li			column (fl)		15	9
	Public support percentage from 2013					16	9
	tion D. Computation of Inves						/
	Investment income percentage for 20		•			17	0.
	Investment income percentage from 2					18	9 9
isa	33 1/3% support tests - 2014. If the	-					
	more than 33 1/3%, check this box an						
	<b>33 1/3% support tests - 2013.</b> If the	•					
	line 18 is not more than 33 1/3%, check						
	Private foundation. If the organization	1 did not check a	a box on line 14, 19	a, or 19b, check t			
13202	3 09-17-14				Sc	hedule A (Form 99	0 or 990-EZ) 201

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## Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC.

## Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *Part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in *Part VI* when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
   (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" *and if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer* (*b*) *below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c

Schedule A (Form 990 or 990-EZ) 2014

10a

10b

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1

2

Yes

No

## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

# Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. Part IV Supporting Organizations (continued)

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1 4	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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI.	11c		Ĺ
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		165	
•	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			
<u></u>	the supported organization(s).	1		L
Sec	tion D. 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, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions)	:		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	;).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	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			
d		3a		
F	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	Jd		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01-		
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		0011
43202	5 09-17-14 Schedule A (Form S	אט or 99	v∪-ヒZ)	<b>∠</b> ∪14

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## SOCIETY OF THE ALUMNI OF THE COLLEGE OF

#### Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2

2 1	Recoveries of prior-year distributions	2		
3 (	Other gross income (see instructions)	3		
4 /	Add lines 1 through 3	4		
<b>5</b> [	Depreciation and depletion	5		
<b>6</b> F	Portion of operating expenses paid or incurred for production or			
c	collection of gross income or for management, conservation, or			
r	naintenance 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		
Sectio	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 /	Aggregate fair market value of all non-exempt-use assets (see			
i	nstructions for short tax year or assets held for part of year):			
a /	Average monthly value of securities	1a		
b A	Average monthly cash balances	1b		
сF	Fair market value of other non-exempt-use assets	1c		
d	Fotal (add lines 1a, 1b, and 1c)	1d		
еI	Discount claimed for blockage or other			
f	actors (explain in detail in <b>Part VI</b> ):			
2 /	Acquisition indebtedness applicable to non-exempt-use assets	2		
3 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,			
5	see instructions).	4		
5 1	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
<b>7</b> F	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sectio	n C - Distributable Amount			Current Year
1 /	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
<b>2</b> E	Enter 85% of line 1	2		
3 1	Vinimum asset amount for prior year (from Section B, line 8, Column A)	3		
<b>4</b> E	Enter greater of line 2 or line 3	4		
5	ncome tax imposed in prior year	5		
6 [	Distributable Amount. Subtract line 5 from line 4, unless subject to			
6	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	/-integra	ted Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2014

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#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF

#### Schedule A (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations З 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6 9 10 Line 8 amount divided by Line 9 amount (i) (ii) (iii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 1 2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) 3 Excess distributions carryover, if any, to 2014: а b С d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2014 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if 5 any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). 6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3j 7 and 4c. 8 Breakdown of line 7: а b С d Excess from 2013 e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).
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432028 09-17-14 Schedule A (Form 990 or 990-EZ) 20

<b>(Forr</b> Depart	HEDULE D n 990) ment of the Treasury Revenue Service	Comr	e 6, 7, 8, 9, 10	ganization answer ), 11a, 11b, 11c, 1 Attach to Form 9	al Statement red "Yes" to Form 99 1d, 11e, 11f, 12a, or 1 90.	), 2b.			OMB No. 1 20 Open to Inspect	14 Public
-	e of the organizati		THE ALU	IMNT OF TH	E COLLEGE O	rs.gov/f			•	n number
Indiii	e of the organizati	WILLIAM & M				-	Emp		-60542	
Pa	t I Organiza	ations Maintaining Do				ls or A	ccou			
		n answered "Yes" to Form 9							inploto il ti	
	organization		50, 1 art IV, III		advised funds	(	b) Fund	is and o	ther accou	unts
-1	Total number at or	nd of year				· · ·	-,			
1 2		nd of year f contributions to (during ye								
2		f grants from (during year)								
3 4										
4 5		t end of year on inform all donors and don		-	acta hald in donar adv	l viced fun	do			
5	-	n's property, subject to the		-					Yes	No
6		on inform all grantees, donor						····· ∟		
U	•	oses and not for the benefit		•	•		-			
	impermissible priva						-		Yes	Νο
Pa		ation Easements. Con	nlete if the or	nanization answer	ed "Ves" to Form 990	Part IV	line 7			
1		servation easements held by		-		rannv,	iii ic 7.			
		of land for public use (e.g.,	•	`		torioally	import	ont land	oroo	
		f natural habitat	recreation of		☐ Preservation of a his ☐ Preservation of a ce	-			area	
						nineu m	SLONC S	liuciure		
0		of open space		ified concernation .	a a satulla suti a sa isa tila a ƙasar			+:		
2		through 2d if the organization	on neid a quai	ified conservation (	contribution in the form	n of a co	nserva	tion ease	ement on	the last
	day of the tax year	r.				I			o End of t	ne Tax Year
_	Tatal months and a							пена ани		ie lax real
a		onservation easements					2a			
b		ricted by conservation ease					2b			
с		vation easements on a certi					2c			
d		vation easements included i								
-		al Register					2d			
3		vation easements modified,	transferred, re	eleased, extinguish	ed, or terminated by t	he organ	Ization	during t	he tax	
	year ►	<u> </u>								
4		where property subject to co								
5	•	tion have a written policy reg								
•		orcement of the conservatio							Yes	└── No
6		r hours devoted to monitori	0, 1 0	, <b>o</b>		0		·		
7	•	es incurred in monitoring, in		e e		• •	-			_
8		vation easement reported or	. ,	, ,						
~		)(4)(B)(ii)?							_ Yes	└── No
9		be how the organization repo			•					
		ble, the text of the footnote t	o the organiza	ation's financial sta	tements that describe	s the org	janizati	on's acc	ounting fo	or
Da	conservation ease	ments. ations Maintaining Co	llections	of Art Historic	al Tragguras or (	Othor 9	Simil	ar Aeeo	ate	
Fa		the organization answered		-	-		5111110	11 A330	513.	
4-										( t
1a	•	elected, as permitted under								
		s, or other similar assets hel	•		, or research in furthei	rance of	public	service,	provide, ir	n Part XIII,
		note to its financial stateme								
b	-	elected, as permitted under	-							
		similar assets held for publ	ic exhibition, e	education, or resea	rch in furtherance of p	ublic sei	vice, p	rovide tr	ne followin	ig amounts
	relating to these it						•			
		ded in Form 990, Part VIII, li					•	-		
-	.,									
2	•	received or held works of an		-		ial gain,	provide	e		
	-	unts required to be reported			-					
		in Form 990, Part VIII, line 1								
b	Assets included in	Form 990, Part X					▶ \$	5 <u> </u>		
									<b>_</b>	
LHA 43205 10-01-	1	eduction Act Notice, see th	ne Instructior	ns for Form 990.			ę	schedule	e D (Form	990) 2014

		SOCIETY	OF THE A	LUMNI	OF TH	E COLL	EGE	OF					
Sche	edule D (Form 990) 2	2014 WILLIAM	& MARY I	N VIR	RGINIA,	INC.			5	54-60	54289	) <sub>Pa</sub>	age <b>2</b>
Pa	rt III   Organiza	ations Maintaining C	ollections of	Art, His	torical Tr	easures, o	or Oth	er S	imila	ar Asse	ts(contin	ued)	
3	Using the organiza	ation's acquisition, accessi	on, and other rec	ords, chec	k any of the	following that	at are a s	signifi	cant u	ise of its	collectior	ı item	s
	(check all that app	bly):											
а	Public exhib	bition		d 🗌	Loan or exc	hange progra	ams						
b	Scholarly res	search		е 🗌	Other								
с		n for future generations											
4													
5													
		funds rather than to be ma									Yes		No
Pa		and Custodial Arran											
		n amount on Form 990, Pai		•	Ũ				,	,	,		
1a	Is the organization	n an agent, trustee, custodi	an or other intern	nediarv for	- contributior	ns or other as	sets not	t inclu	ided				
		X?									Yes	X	No
b	If "Yes." explain th	ne arrangement in Part XIII	and complete the	following	table:					······			
	ii tee, explaint i							Г			Amount		
c	Reginning balance	e						F	1c		7 4110 4110		
		he year							1d				
									1e				
f		ig the year							1f				
		on include an amount on F									Yes		No
	-	ne arrangement in Part XIII.						-					
		nent Funds. Complete i											
I U			(a) Current year		Prior year	(c) Two yea			hroov	are back	(e) Four	Voare	hack
10	Poginning of yoor	balance	4,482,87		1,023,207.	., ,	5,275.	(u) 1		77,252.			392.
			4,402,07		29,761.		1,749.			22,629.			683.
			213,30	0	573,148.		1,7 <u>4</u> 9. 8,980.			50,360.		,	543.
		rnings, gains, and losses	215,50	<u>.</u>	575,140.	57	0,900.		~	50,500.	^	4/2,	545.
		ships											
е	Other expenditure		141 00	<u>_</u>	142 245	14	2 7 9 7		1	24 246		140	266
-			141,23	••	143,245.	14	2,797.		1.	34,246.		142,	366.
		oenses	4 554 04		400 051	4.00	2 007		2 5			688	050
g		ce	4,554,94		1,482,871.		3,207.		3,7	05,275.	3,	677,	252.
2		ated percentage of the cur		•	1g, column (a	a)) held as:							
а	-	or quasi-endowment	24.51	%									
b			%										
С	Temporarily restric		%	Ď									
		n lines 2a, 2b, and 2c shou											
3a	Are there endowm	ent funds not in the posse	ssion of the orga	nization th	at are held a	ind administe	ered for t	the or	ganiz	ation	г		
	by:											Yes	No
		anizations											Х
	(ii) related organiz	zations									3a(ii)	Х	
b		re the related organizations									3b	Х	
4		III the intended uses of the		ndowment	funds.								
Pa		uildings, and Equipm											
	Complete it	f the organization answere	d "Yes" to Form 9	990, Part I	V, line 11a. S	ee Form 990	, Part X,	line <sup>-</sup>	10.				
	Descript	ion of property	(a) Cost o	or other	(b) Cost	or other	(c) A	ccum	nulate	d	(d) Book	valu	е
			basis (inve	stment)	basis	(other)	de	preci	ation				
1a	Land												
b	Buildings												
		ements				4,914.			.,22				88.
						5,541.			,47		38	3,0	63.
					1	4,250.		14	, 25	50.			0.
-		ugh 1e. (Column (d) must e		art X, colu	mn (B), line 1	10c.)					121	.,7	51.
									ę	Schedule	D (Form	990)	2014

17130204 781789 2018590000

	THE ALUMNI O			
	ARY IN VIRGI	NIA, INC.	54	-6054289 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11b. See Form 990, P	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives				-
				· · · · · · · · · · · · · · · · · · ·
(2) Closely-held equity interests				
(3) Other (A) ENDOWMENT FUNDS HELD BY				
				172 1 111
(B) OTHERS	4,554,941	- END-OF-YI	EAR MARKET	VALUE
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	4,554,941	•		
Part VIII Investments - Program Related.		-		
Complete if the organization answered "Yes"	to Form 000 Port IV line	110 Soo Form 000 D	art V line 12	
(a) Description of investment	(b) Book value			d-of-year market value
	(b) DOOK Value		iluation. Cost of end	1-01-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
	to Found 000 Doubly/ Kee	11 - 0 E 000 E		
Complete if the organization answered "Yes"		e 11d. See Form 990, P	art X, line 15.	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	- 15)		•	
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		<b>&gt;</b>	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990, Part IV, line		990, Part X, line 25	
1.(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) DUE TO COLLEGE		18,929.		
(3)				
(4)				
(5)				
<u>(6)</u>				
(7)				
(8)				

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

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

432053 10-01-14 18,929.

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,302.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         1       Total revenue, gains, and other support per audited financial statements         2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,302.
1       Total revenue, gains, and other support per audited financial statements       1       3,318         2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:       1	,302.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	/0020
a Net unrealized gains (losses) on investments 2a	
b Donated services and use of facilities 2b 5,000.	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
	,882.
3 Subtract line 2e from line 1 3 3,308	,420.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b <a></a>	,667.>
	,753.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.	
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements 1 2,912	,404.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities 2a 5,000.	
b Prior year adjustments 2b	
c Other losses 2c	
d Other (Describe in Part XIII.)	
	,980.
3 Subtract line 2e from line 1 3 1,575	,424.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	-
c Add lines 4a and 4b	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	,424.
Part XIII Supplemental Information.	

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART V, LINE 4:

#### TO SUPPORT THE MISSION AND PROGRAMS OF THE ALUMNI ASSOCIATION.

PART X, LINE 2:

THE ALUMNI ASSOCIATION IS A NONSTOCK CORPORATION THAT HAS BEEN DETERMINED

BY THE INTERNAL REVENUE SERVICE TO BE EXEMPT FROM TAXES ON INCOME DERIVED

FROM ACTIVITIES RELATED TO ITS TAX-EXEMPT PURPOSE UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE. CERTAIN ACTIVITIES OF THE ALUMNI

ASSOCIATION ARE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. NO SUCH

TAXES WERE DUE FOR THIS YEAR. THE ASSOCIATION HAS DETERMINED THAT IT DOES

NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE

 
 30, 2015. TAX YEARS ENDING ON OR AFTER JUNE 30, 2012, REMAIN SUBJECT TO

 432054 10-01-14
 Schedule D (Form 990) 2014

PART XI, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	4,882.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD - NETTED WITH REVENUE ON TAX RETURN	-91,321.
FUNDRAISING EXPENSES	-109,346.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-200,667.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD NETTED WITH REVENUE ON TAX RETURN	91,321.
RENTAL EXPENSES	4,882.
UNREALIZED LOSS	1,126,431.
FUNDRAISING EXPENSES	109,346.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,331,980.

SOCIETY OF THE ALUMNI OF THE COLLEGE OF

WILLIAM & MARY IN VIRGINIA, INC.

Schedule D (Form 990) 2014

54-6054289 Page 5

432055 10-01-14

Schedule D (Form 990) 2014

Part XIII | Supplemental Information (continued)

EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES

SCHEDULE G (Form 990 or 990-EZ)	Suppleme	ntal Information Regarding	Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047		
Department of the Treasury	c	e organization answered "Yes" to F organization entered more than \$19 Attach to Form 990	5,000 or Fo	on Fo orm 99	rm 990-EZ, line 6a. 0-EZ.			<b>ZU 14</b> Open to Public Inspection		
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.         Name of the organization       SOCIETY OF THE ALUMNI OF THE COLLEGE OF       Employer ide										
WILLIAM & MARY IN VIRGINIA, INC. 54-6054289										
Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.										
a A Mail solicitat b Internet and c Phone solicit	b       Internet and email solicitations       f       Solicitation of government grants         c       Phone solicitations       g       Special fundraising events         d       In-person solicitations       g       Special fundraising events									
key employees list <b>b</b> If "Yes," list the ter	<ul> <li>2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?</li> <li>b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.</li> </ul>									
(i) Name and address or entity (fund		(ii) Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained by fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization		
			Yes	No						
				. 🕨						
3 List all states in whi or licensing.	ch the organizatio	on is registered or licensed to solicit o	contrik	oution	s or has been notified	d it is	exempt from	registration		

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

Schedule G (Form 990 or 990-EZ) 2014

432081 08-28-14

Cab	l	SOCIETY le G (Form 990 or 990-EZ) 2014 WILLIAM	OF THE ALUM			6054289 Page 2
	art					
		of fundraising event contributions and gr	oss income on Form 990	-EZ, lines 1 and 6b. List	events with gross receip	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			NY AUCTION			col. (c))
anı			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	254,915.			254,915.
	2	Less: Contributions	83,650.			83,650.
	3	Gross income (line 1 minus line 2)	171,265.			171,265.
	4	Cash prizes				
	5	Noncash prizes				
lses						72 125
Expe	6	Rent/facility costs	73,135.			73,135.
Direct Expenses	7	Food and beverages				<u> </u>
	8	Entertainment				26 211
	9	Other direct expenses Direct expense summary. Add lines 4 through			<b></b>	36,211. 109,346.
	10	Net income summary. Subtract line 10 from I			•	61,919.
Pa	art					
		\$15,000 on Form 990-EZ, line 6a.				
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col. (a) through col. (c))
Be	1	Gross revenue				
	†					
SS	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
	Ŭ		Yes %	Yes %	Yes %	
	6	Volunteer labor	No	□ No	Νο	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	r from line 1 column (d)		•	
		Net gaming meetine summary. Subtract line 7				
9	En	ter the state(s) in which the organization condu	ucts gaming activities:			
		the organization licensed to conduct gaming a				Yes No
b	) If "	No," explain:				
		ere any of the organization's gaming licenses re			year?	Yes No
0	, IT "	Yes," explain:				
4320	82 0	8-28-14			Schedule G (For	rm 990 or 990-EZ) 2014

0-1-	SOCIETY OF THE ALUMNI OF THE COLLEGE OF nedule G (Form 990 or 990-EZ) 2014 WILLIAM & MARY IN VIRGINIA, INC. 54-6	051	280	D 0
	Does the organization conduct gaming activities with nonmembers?		Yes	Page 3
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		162	
	to administer charitable gaming?		Yes	
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility	13a		%
	an outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
<b>1</b> 5a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
k	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	. []	Yes	└── No
k	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Pa	organization's own exempt activities during the tax year <b>s</b> <b>Irt IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part II, line	nes 9.	9b. 10	)b. 15b.
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	,	,	, ,
4320	83 08-28-14 Schedule G (Form	1 990 c	or 990	-EZ) 2014

Schedule G (Form 990 or 990-EZ)		ALUMNI OF T IN VIRGINIA	HE COLLEGE	OF 54-6054289	Page <b>4</b>
432084 05-01-14				Schedule G (Form 990 or	990-EZ)

SCHEDULE I (Form 990) Department of the Treasury	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Attach to Form 990.									
Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.									
Name of the organizationSOCIETY OF THE ALUMNI OF THE COLLEGE OFEmployer identificationWILLIAM & MARY IN VIRGINIA, INC.54-605										
Part I General Information on Grants and Assistance										
•	zation maintain records		•		• •					
criteria used to award the grants or assistance?										
	IV the organization's pro									
	d Other Assistance to hat received more than t	-				anization answered "	′es" to Form 990, Part	IV, line 21, for any		
	dress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
2 Enter total numb	per of section 501(c)(3) a	and government or	ganizations listed in th	ne line 1 table						
3 Enter total numb	er of other organization	s listed in the line <sup>.</sup>	1 table							
LHA For Paperwork	Reduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2014)		

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

# SOCIETY OF THE ALUMNI OF THE COLLEGE OF

Schedule I (Form 990) (2014)

Part III

#### WILLIAM & MARY IN VIRGINIA, INC. Grante and Other Assistance to Demostic Individuals, Complete if the examination answered "Vee" to Ferm 990, Bart IV, line 22

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance		(f) Description of non-cash assistance			

	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	
SCHOLARSHIPS	20	60,500.	0.	CASH	
Bart IV Supplemental Information Brouids the information rea	L Line of the Double file		(I_)	l statiti - se at isata sera ati a se	

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

PART I, LINE 2:

AMOUNTS WERE UNDER \$5,000 FOR EACH PARTICIPANT. NO REQUIREMENTS FOR

DISCLOSURE.

54-6054289

Page 2

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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



Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 SOCIETY OF THE ALUMNI OF THE COLLEGE OF Emplo WILLIAM & MARY IN VIRGINIA, INC. 54

Employer identification number 54-6054289

#### FORM 990, PART I, DOING BUSINESS AS:

WILLIAM & MARY ALUMNI ASSOCIATION

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES: THE WILLIAM & MARY ALUMNI ASSOCIATION (WMAA) OF THE COLLEGE OF WILLIAM & MARY ENTERED INTO A MEMORANDUM OF UNDERSTANDING WITH THE COLLEGE OF WILLIAM & MARY (COLLEGE) DATED JUNE 26, 2014. WHILE REMAINING THE INDEPENDENT VOICE AND ADVOCATE OF THE ALUMNI AS IT HAS FOR GENERATIONS AND AN ENTITY SEPARATE AND INDEPENDENT FROM THE COLLEGE, THE MEMORANDUM EXPRESSES THE INTENTION TO WORK TOGETHER AS TRUE PARTNERS WITH THE COLLEGE TO INTEGRATE THE STAFF OF THE WMAA AND STAFF FROM DEVELOPMENT TO FORM THE COLLEGE'S NEW OFFICE OF UNIVERSITY ADVANCEMENT (OUA) AND TO CONTINUE TO EXPAND PROGRAMS AND SERVICES TO BE FAITHFUL TO THE MISSION. NOTWITHSTANDING, THE WMAA RETAINS ITS 501(C)(3) STATUS AND CONTINUES TO BE MANAGED BY ITS BOARD OF DIRECTORS. ALL EMPLOYEES WERE TRANSFERRED FROM THE ALUMNI ASSOCIATION TO THE OUA EFFECTIVE OCTOBER 10, 2014. THE OUA WILL PROVIDE SUFFICIENT STAFFING AND OTHER RESOURCES TO CARRY OUT THE WMAA MISSION. NO ASSETS OF WMAA WILL BE TRANSFERRED AS PART OF THE MEMORANDUM.

 WHILE NO CHANGES TO THE WMAA BALANCE SHEET ARE DUE TO THE MEMORANDUM,

 NOTABLE PERMANENT CHANGES IN THE FINANCIAL STATEMENTS ARE THE REMOVAL

 OF SALARY AND BENEFIT OBLIGATIONS FOR THE WMAA AND THE EXPENSES FOR

 PUBLICATION OF THE ALUMNI MAGAZINE, FOR WHICH THE BOARD MAINTAINS

 EDITORIAL INPUT. THE BOARD REMAINS COMMITTED TO THE COST-EFFECTIVE

 APPLICATION OF FUNDS AND RESOURCES IN PROVIDING WORLD CLASS ALUMNI

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

 Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization SOCIETY OF THE ALUMNI OF THE COLLEGE OF	Employer identification number
WILLIAM & MARY IN VIRGINIA, INC.	54-6054289
ENGAGEMENT, AND TO THE PRUDENT INVESTMENT AND MANAGEMENT	OF INVESTED
RESOURCES TO ACHIEVE GROWTH. THE BOARD OF WMAA WILL CONTI	NUE TO BE
POLICYMAKERS, STRONG REPRESENTATIVES AND ADVOCATES OF THE	ALUMNI
POPULATION INTO THE LIFE OF THE COLLEGE, AND WILL CONTINU	E FIDUCIARY
MANAGEMENT OF WMAA ASSETS AND OVERSIGHT OF THE COLLEGE'S	ALUMNI
ENGAGEMENT AND RELATED ACTIVITIES CONSISTENT WITH THE WMA	A ARTICLES OF
INCORPORATION AND BY-LAWS. THE PORTION OF THE OUA BUDGET	THAT RELATES
TO ALUMNI ENGAGEMENT ACTIVITIES AND ALUMNI SERVICES WILL	BE PRESENTED
TO THE WMAA BOARD AND THE BOARD'S CONSENT WILL BE SOUGHT,	CONCURRENT
WITH THE BOARD OF THE WMAA ESTABLISHING ITS OWN FISCAL YE	AR OPERATING
BUDGET FOR PROGRAMMING AND SERVICES. THE WMAA WILL RETAIN	AUTHORITY
OVER AND APPROVE ANNUAL BUDGETS IN SUPPORT OF ALUMNI ENGA	GEMENT FROM
THE FOLLOWING SOURCES: INCOME FROM ENDOWMENTS OR QUASI-EN	DOWMENTS,
ANNUAL RESTRICTED GIFTS, REVENUE FROM AFFINITY PROGRAMS,	ALUMNI HOUSE
OPERATIONS, MERCHANDISING ALUMNI RELATED PRODUCTS AND NET	REVENUE FROM
MISSION RELATED ACTIVITIES.	

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ALUMNI CAREER MANAGEMENT - PROVIDING NETWORKING COMMUNITIES, WEBINARS, ONLINE GROUP PROGRAMMING, CAREER EVENTS AND OTHER IMPACTFUL PROFESSIONAL RESOURCES TO AID ALUMNI THROUGHOUT THEIR CAREER DEEPENING THE LIFELONG RELATIONSHIP BETWEEN WILLIAM & MARY AND ITS ALUMNI.

ALUMNAE & AFFINITY GROUP INITIATIVES - THAT UNITE ALUMNI AROUND SHARED INTERESTS, EXPERIENCES AND IDENTITIES CREATING STRONGER VALUE DRIVEN NETWORKS THAT BENEFIT EACH OTHER AND THE UNIVERSITY.

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.	Employer identification number 54-6054289
VOLUNTEER MANAGEMENT - PROVIDING VOLUNTEERS WITH THE HIGH	EST QUALITY OF
LEADERSHIP, TRAINING AND SUPPORT TO AID IN THE ENGAGEMENT	EFFORT.
STUDENT OUTREACH - ENGAGING NEW MEMBERS OF THE TRIBE EARL	Y TO EDUCATE
AND TO PROMOTE A DYNAMIC, LONG-LASTING RELATIONSHIP FOR A	LIFETIME.
ALUMNI ADMISSION AND LEGACY OUTREACH - SPOUSES, PARENTS,	CHILDREN AND
SIBLINGS SHARE A COMMON IDENTITY THROUGH THE TRIBE AND TH	E ALUMNI
ASSOCIATION WORKS TO FOSTER THESE CONNECTIONS AND HONOR T	HE POWER OF
LEGACY NETWORKS.	
AWARDS AND HONORS - ACTIVELY RECOGNIZING OUTSTANDING AND	DEDICATED
ALUMNI, FACULTY, COACHES AND STUDENTS THROUGH ROBUST AWAR	DS PROGRAMS
THAT RECOGNIZE THE BEST OF THE BEST IN PERPETUITY.	
FORM 990, PART VI, SECTION A, LINE 7A:	
ALL MEMBERS OF THE ASSOCIATION CAST A BALLOT FOR ALL PERS	ONS ACCEPTED FOR
NOMINATION TO THE GOVERNING BODY UPON THEIR CONSENT TO BE	PLACED ON THE

BALLOT.

FORM 990, PART VI, SECTION A, LINE 7B:

CHANGES IN GOVERANCE AFFECTING ASSOCIATION MEMBERSHIP, NOMINATIONS AND

ELECTIONS, DISSOLUTION, OR PURPOSES OF THE ASSOCIATION MAY ONLY BE AMENDED BY MEMBERSHIP VOTE.

FORM 990, PART VI, SECTION B, LINE 11:

A COPY OF THE 990 IS PROVIDED TO THE MEMBERS OF THE BOARD FOR THEIR

APPROVAL PRIOR TO FILING.

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

 Schedule O (Form 990 or 990-EZ) (2014)
 Page 2

 Name of the organization
 SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC.
 Employer identification number 54-6054289

 FORM 990, PART VI, SECTION B, LINE 12C:
 AT BOARD OF DIRECTORS MEETINGS, MEMBERS ARE REMINDED OF THE ORGANIZATION'S

 POLICY.
 PER ORGANIZATION'S BYLAWS, MEMBERS ARE PROHIBITED FROM VOTING ON A

 MATTER WHERE THE MEMBER HAS A CONFLICT OF INTEREST. ANY QUESTIONABLE

 INTERESTS ARE COMMUNICATED, DOCUMENTED AND VOTED ON AT THE MEETING IN WHICH

THEY ARISE.

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

COMPENSATION OF KEY EMPLOYEES IS APPROVED BY THE BOARD THROUGH THE ANNUAL

BUDGET PROCESS. EXECUTIVE DIRECTOR'S COMPENSATION IS APPROVED BY THE

COLLEGE OF WILLIAM & MARY'S BOARD OF VISITORS.

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

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE

ORGANIZATION'S WEBSITE, WWW.WMALUMNI.COM. THE FINANCIAL STATEMENTS ARE

AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S BOARD OF DIRECTORS INCLUDES A FINANCE COMMITTEE THAT

IS RESPONSIBLE FOR THE OVERSIGHT OF THE INDEPENDENT AUDIT.

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Department of the Treasury Internal Revenue Service Info Name of the organization SOCIETY OF THE	rmation about Schedule R (Form 9 E ALUMNI OF THE COI Y IN VIRGINIA , INC	Yes" on Form 990, Part IV, ach to Form 990. 190) and its instructions is a LLEGE OF •	line 33, 34, 35b, 3 t <sub>www.irs.gov/forn</sub>			20 Open		l blic n
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state c foreign country)	(d) Total inco	(e) End-of-year		(f) Direct contre entity	olling	
Part II Identification of Related Tax-Exempt Organizations during the tax year. (a) Name, address, and EIN of related organization	ations Complete if the organization a	answered "Yes" on Form 990 (c) Legal domicile (state or foreign country)	), Part IV, line 34 be (d) Exempt Code section	ecause it had one of the formation of th	or more related (f) Direct cont entity	rolling	(g) ction 512 controll entity	led
THE COLLEGE OF WILLIAM & MARY FOUNDATION - 54-0734117, 5300 DISCOVERY PARK BLVD, WILLIAMSBURG, VA 23188	ADMINISTER ENDOWMENT ASSETS OF THE COLLEGE OF WILLIAM AND MARY	VIRGINIA	501(C)3	501(c)(3))	THE COLLEGE WILLIAM & M	OF	'es	No X
THE COLLEGE OF WILLIAM & MARY - 54-6001718 102 RICHMOND ROAD WILLIAMSBURG, VA 23186	EDUCATION	VIRGINIA	115					X

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

Schedule R (Form 990) 2014

#### SOCIETY OF THE ALUMNI OF THE COLLEGE OF WILLIAM & MARY IN VIRGINIA, INC. Schedule R (Form 990) 2014

54-6054289

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. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partn	<sup>I or</sup> Percentage <sup>ing</sup> ownership r?
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	10
	1										
	1										
	1										
	1										
	4										
	4										

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

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512(I conti ent	(i) ction (b)(13) trolled tity?
		country)		or trusty		233013		Yes	No
	]								

### Page 2

### SOCIETY OF THE ALUMNI OF THE COLLEGE OF

Schedule R (Form 990) 2014 WILLIAM & MARY IN VIRGINIA, INC.

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to related organization(s)	1b		Х
с	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
_(6)				

### SOCIETY OF THE ALUMNI OF THE COLLEGE OF Schedule R (Form 990) 2014 WILLIAM & MARY IN VIRGINIA, INC.

# 54-6054289 Page 4

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes I	) 3 sec. )(3) .? No	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	Dispr tior	n) opor- nate tions? No	(j) General c managing partner? Yes NO	<b>(k)</b> Percentage ownership

Schedule R (Form 990) 2014

# Part VII Supplemental Information

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

432165 08-14-14

Schedule R (Form 990) 2014

	EXTENDED TO M	AY	16, 2016			
Form <b>990-T</b>	Exempt Organization Bus	sine	ss Income T	ax Returr	ιL	OMB No. 1545-0687
	(and proxy tax und	er se	ection 6033(e))			
	For calendar year 2014 or other tax year beginning ${f JUL}$ 1 ,			N 30, 201	5	2014
Department of the Treasury	Information about Form 990-T and its instruct				-	2014
Internal Revenue Service	Do not enter SSN numbers on this form as it may				. 5	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if	Name of organization ( Check box if name c				D Emplo	yer identification number byees' trust, see
address changed	SOCIETY OF THE ALUMNI			OF	instruc	ctions.)
B Exempt under section	Print WILLIAM & MARY IN VIRG	INI	A, INC.		5	4-6054289
<b>X</b> 501( <b>c</b> )( <b>3</b> )	_ or Number, street, and room or suite no. If a P.O. box		-		E Unrela	ted business activity codes
408(e) 220(e)	Type P.O. BOX 2100	,			(See In	istructions.)
408A 530(a)	City or town, state or province, country, and ZIP o	r foreia	n postal code		1	
529(a)	WILLIAMSBURG, VA 2318				531	190 541800
Book value of all assets	F Group exemption number (See instructions.)					
12,255,369.	G Check organization type ► X 501(c) corporation	<u>,</u> 1 [	501(c) trust	401(a) trust		Other trust
H Describe the organizatio	n's primary unrelated business activity. COMMISS				M	
	the corporation a subsidiary in an affiliated group or a parer				Ye	s X No
• • •	and identifying number of the parent corporation.	11 0460	ialary controlled group i		10	
	ELAINE CAMPBELL		Telenho	one number 🕨 7	57-3	221-1201
	d Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sal			( )	(-)+	-	(-)
<b>b</b> Less returns and allo		1c				
	Schedule A, line 7)	2				
3 Gross profit. Subtrac		3				
	t line 2 from line 1c ne (attach Schedule D)	4a				
		4a 4b				
	4797, Part II, line 17) (attach Form 4797)	40 4c				
	n for trusts artnerships and S corporations (attach statement)	40 5				
		5 6				
	lle C)	6 7				
	ced income (Schedule E)	<u> </u>				
	valties, and rents from controlled organizations (Sch. F)	8				
	f a section $501(c)(7)$ , (9), or (17) organization (Schedule G)					
	ivity income (Schedule I)	10				
11 Advertising income (	Schedule J)	11	70,403.			70 402
,	structions; attach schedule) <b>STATEMENT</b> 1	12	70,403.			70,403. 70,403.
	s 3 through 12	13				70,403.
	ons Not Taken Elsewhere (See instructions for contributions, deductions must be directly connected					
					I	
	ficers, directors, and trustees (Schedule K)				14	20 156
					15	20,456.
	nance				16	
					17	
	edule)				18	
<b>19</b> Taxes and licenses					19	
	ions (See instructions for limitation rules)				20	
21 Depreciation (attach	Form 4562)					
	aimed on Schedule A and elsewhere on return		22a		22b	
					23	
	erred compensation plans				24	0 771
	ograms				25	8,771.
	enses (Schedule I)				26	
27 Excess readership of	osts (Schedule J)				27	10.000
	ttach schedule)		SEE STAT	EMENT 2	28	12,263.
	Add lines 14 through 28				29	41,490.
	taxable income before net operating loss deduction. Subtrac				30	28,913.
	eduction (limited to the amount on line 30)				31	28,913.
	taxable income before specific deduction. Subtract line 31 fr				32	0.
	Generally \$1,000, but see line 33 instructions for exceptions				33	1,000.
	taxable income. Subtract line 33 from line 32. If line 33 is	-	-			-
					34	0.
423701 01-13-15 LHA For Pa	perwork Reduction Act Notice, see instructions.					Form <b>990-T</b> (2014)

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Form 990-T	(2014) WILLIAM & M	IARY IN	VIRGINIA,	INC.		54-605	54289	P:	age <b>2</b>
Part II	I Tax Computation								
35	Organizations Taxable as Corpora	ations. See instru	uctions for tax comp	utation.					
	Controlled group members (section				s and:				
	Enter your share of the \$50,000, \$2		,						
	(1) \$	(2) \$	, I	(3) \$	7-				
h	Enter organization's share of: (1) A		x (not more than \$11	. ,					
	(2) Additional 3% tax (not more th								
	Income tax on the amount on line 3						35c		0.
	Trusts Taxable at Trust Rates. See						000		<u> </u>
50			•				36		
97	Tax rate schedule or						37		
	Proxy tax. See instructions								
	Alternative minimum tax		R				38		0.
39	Total. Add lines 37 and 38 to line 3	350 OF 36, WHICH	ever applies				39		0.
	=		tuurata atta ala Farma d	110)	40-				
	Foreign tax credit (corporations att						-		
D	Other credits (see instructions)				40b		-		
	General business credit. Attach For						_		
	Credit for prior year minimum tax (								
	Total credits. Add lines 40a throug						40e		
41	Subtract line 40e from line 39						41		0.
	Other taxes. Check if from: E	orm 4255 🛄	Form 8611 Fo	orm 8697 🛄 Forn	n 8866 📖 Ot	her (attach schedule)	42		
							43		0.
	Payments: A 2013 overpayment c								
b	2014 estimated tax payments				44b	4,000.			
	Tax deposited with Form 8868								
	Foreign organizations: Tax paid or								
	Backup withholding (see instructio								
f	Credit for small employer health in				44f				
g	Other credits and payments:	E Fo	orm 2439						
	Form 4136								
			ther		► 44g				
45	Total payments. Add lines 44a thro	ough 44g					45	4,00	0.
45 46	<b>Total payments.</b> Add lines 44a thro Estimated tax penalty (see instruction	ough 44g					45 46	4,00	0.
46	Total payments. Add lines 44a thro	ough 44g ions). Check if Fe	orm 2220 is attached	d ▶ 🗌					
46 47	Total payments. Add lines 44a thro Estimated tax penalty (see instruction	ough 44g ions). Check if Fe total of lines 43 a	orm 2220 is attached and 46, enter amoun	d ▶ □		<b>&gt;</b>	46	4,00	0.
46 47 48 49	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the Overpayment. If line 45 is larger th Enter the amount of line 48 you wa	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: <b>Credited to 2</b>	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax	t owed		Refunded	46 47		0.
46 47 48 49 Part V	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the i Overpayment. If line 45 is larger th Enter the amount of line 48 you wa Statements Regardi	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: Credited to 2 ing Certain	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and	d ▶ □ t owed amount overpaid ▶ d Other Inform	ation (see in:	Refunded structions)	46 47 48 49	4,00 4,00	00.
46 47 48 49 Part V	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the Overpayment. If line 45 is larger th Enter the amount of line 48 you wa	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: Credited to 2 ing Certain	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and	d ▶ □ t owed amount overpaid ▶ d Other Inform	ation (see in:	Refunded structions)	46 47 48 49	4,00 4,00	00.
46 47 48 49 Part V 1 At ar secu	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the Overpayment. If line 45 is larger th Enter the amount of line 48 you wa Statements Regarding my time during the 2014 calendar you urities, or other) in a foreign country	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: Credited to 2 ing Certain ear, did the organ /? If YES, the org	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and nization have an inter ganization may have	d ▶ □ t owed amount overpaid ▶ d Other Inform rest in or a signature to file Form FinCEN F	ation (see in: or other authorit orm 114, Repor	Refunded structions) y over a financial act t of Foreign Bank an	46 47 48 49 ccount (ba d Financia	4,00 4,00	00.
46 47 48 49 Part V 1 At ar secu	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the Overpayment. If line 45 is larger th Enter the amount of line 48 you wa Statements Regarding my time during the 2014 calendar you urities, or other) in a foreign country	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: Credited to 2 ing Certain ear, did the organ /? If YES, the org	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and nization have an inter ganization may have	d ▶ □ t owed amount overpaid ▶ d Other Inform rest in or a signature to file Form FinCEN F	ation (see in: or other authorit orm 114, Repor	Refunded structions) y over a financial act t of Foreign Bank an	46 47 48 49 ccount (ba d Financia	4,00 4,00	00. 00. No
46 47 48 49 Part V 1 At ar secu	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the Overpayment. If line 45 is larger th Enter the amount of line 48 you wa Statements Regarding my time during the 2014 calendar you urities, or other) in a foreign country	ough 44g ions). Check if Fo total of lines 43 a nan the total of lin ant: Credited to 2 ing Certain ear, did the organ /? If YES, the org	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and nization have an inter ganization may have	d ▶ □ t owed amount overpaid ▶ d Other Inform rest in or a signature to file Form FinCEN F	ation (see in: or other authorit orm 114, Repor	Refunded structions) y over a financial act t of Foreign Bank an	46 47 48 49 ccount (ba d Financia	4,00 4,00	)0. )0. No
46 47 48 49 Part V 1 At ar secu Accc 2 Durin fryes	Total payments. Add lines 44a thro Estimated tax penalty (see instructi Tax due. If line 45 is less than the to Overpayment. If line 45 is larger th Enter the amount of line 48 you war Statements Regarding my time during the 2014 calendar year	ough 44g ions). Check if Fo total of lines 43 a nan the total of lines tredited to 2 ing Certain ear, did the organ /? If YES, the org foreign country anization may have	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and nization have an inter ganization may have here m, or was it the grantor of to file.	t owed amount overpaid ► d Other Inform rest in or a signature to file Form FinCEN F ot, or transferor to, a foreig	ation (see in: or other authorit orm 114, Repor	Refunded structions) y over a financial act t of Foreign Bank an	46 47 48 49 ccount (ba d Financia	4,00 4,00	00. 00. No
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46 47 48 49 Part V 1 At ar secu Accc 2 Durin If YES 3 Ente Sched 1 Inve 2 Purc 3 Cost 4 a Addit b Othe 5 Tota Sign Here Paid Prepa	Total payments. Add lines 44a throws         Estimated tax penalty (see instruction         Tax due. If line 45 is less than the form         Overpayment. If line 45 is larger the         Enter the amount of line 48 you way         Statements Regarding         ny time during the 2014 calendar you         urities, or other) in a foreign country         pounts. If YES, enter the name of the         ig the tax year, did the organization receives         see instructions for other forms the org         ur the amount of tax-exempt interest         ule A - Cost of Goods S         ntory at beginning of year         chases         tof labor         under penalties of perjury, I declare to correct, and complete. Declaration of         Signature of officer         Print/Type preparer's name         JAMES M. HAGG         Firm's name > DIXON         701         Firm's address > NEW	ough 44g ions). Check if For total of lines 43 a nan the total of lines ing Certain ear, did the organ /? If YES, the organ /? I	orm 2220 is attached and 46, enter amoun nes 43 and 46, enter 2015 estimated tax Activities and nization have an inter ganization may have here ► m, or was it the grantor of to file. erued during the tax y ethod of inventory ethod of inventory d this return, including a in taxpayer) is based on Date Preparer's signature S GOODMAN CENTER DRI	d ▶ □ t owed amount overpaid ► d Other Inform rest in or a signature to file Form FinCEN F of, or transferor to, a foreu- year ▶ \$ valuation ▶ N 6 Inventory at end o 7 Cost of goods sol from line 5. Enter 8 Do the rules of sec property produced the organization? (ccompanying schedules all information of which p EXECU Title re LLP VE , SUITE	ation (see ins or other authorit orm 114, Repor gn trust? /A f year d. Subtract line 4 here and in Part ction 263A (with d or acquired for and statements, ar reparer has any kn TIVE DI Date	Refunded structions) y over a financial act t of Foreign Bank an b c foreign Bank an c foreign Bank an foreign	46 47 48 49 ccount (ba d Financia d Financia	4,00         4,00         4,00         ink,         al         yes         d belief, it is true,         discuss this return wishown below (see         2         X Yes         00100566         -0747981	No X X X X No No

Page 3

SOCIETY OF THE ALUMNI OF THE COLLEGE OF Form 990-T (2014) WILLIAM & MARY IN VIRGINIA, INC. 54-6054289 Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)(see instructions) 1. Description of property (1) (2) (3) (4) 2. Rent received or accrued 3(a) Deductions directly connected with the income in (a) From personal property (if the percentage of rent for personal property is more than (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if columns 2(a) and 2(b) (attach schedule) 10% but not more than 50%) the rent is based on profit or income) (1) (2) (3) (4) Total 0. 0. Total (b) Total deductions. (c) Total income. Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, Part I, line 6, column (B) here and on page 1, Part I, line 6, column (A) 0 0. Schedule E - Unrelated Debt-Financed Income (see instructions) 3. Deductions directly connected with or allocable to debt-financed property 2. Gross income from or allocable to debt-(b) Other deductions (attach schedule) (a) Straight line depreciation 1. Description of debt-financed property financed property (attach schedule) (1) (2) (3) (4) Average adjusted basis of or allocable to debt-financed property (attach schedule) **4.** Amount of average acquisition debt on or allocable to debt-financed 6. Column 4 divided 7 Gross income 8 Allocable deductions by column 5 reportable (column (column 6 x total of columns property (attach schedule) 2 x column 6) 3(a) and 3(b)) % (1) (2) % (3) % % (4) Enter here and on page 1. Enter here and on page 1. Part I, line 7, column (A), Part I, line 7, column (B), 0 Totals Total dividends-received deductions included in column 8 ► Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) Exempt Controlled Organizations 2. 4 5. Part of column 4 that is included in the controlling 6. Deductions directly 1. Name of controlled organization 3. Net unrelated income (loss) (see instructions) Total of specified payments made connected with income in column 5 Employer identification number organization's gross income (1) (2) (3) (4) Nonexempt Controlled Organizations 7. Taxable Income 10. Part of column 9 that is included in the controlling organization's gross income 8 Net unrelated income (loss) 9 Total of specified payments **11.** Deductions directly connected with income in column 10 (see instructions) made (1) (2)(3) (4) Add columns 5 and 10. Add columns 6 and 11. Enter here and on page 1, Part I, Enter here and on page 1, Part I,

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Totals

Form 990-T (2014)

line 8, column (B).

0

0

17130204 781789 2018590000

2014.05060 SOCIETY OF THE ALUMNI OF TH 20185902

line 8, column (A).

0

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# Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	<ol> <li>Deductions directly connected (attach schedule)</li> </ol>	<b>4.</b> Set-asides (attach schedule)	<ol> <li>Total deductions and set-asides (col. 3 plus col. 4)</li> </ol>
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).
Totals	0.			0.

## Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	<b>3.</b> Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	<b>6.</b> Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)							
(2)							
(3)							
(4)							
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.	
Totals 🕨	0.	0.				0.	
Schedule J - Advertising Income (conjectivitiens)							

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	<b>3.</b> Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ►	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	<b>2.</b> Gross advertising income	<b>3.</b> Direct advertising costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		5. Circulation 6. Readership costs			7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals from Part I	0.	0	•					
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).						Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) 🕨	0.	0	•					0.
Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)								
1. Name			3. Percent of time devoted to business			4. Compensation attributable to unrelated business		
(1)						%		
(2)						%		
(3)						%		
(4)						%		
Total. Enter here and on page 1, Part II, line 14						0.		
								Form <b>990-T</b> (2014)

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