DLN: 93493134049988 OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

Form **990**

foundations)

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

2016

nterna	ment of the Tre l Revenue Serv	asury ► Information abo	ut Form 990 and its instructions is	at <u>www</u>	IRS gov		0	pen to Public Inspection		
\ Fe	or the 201 0	i c <mark>alendar year, or tax year begi</mark>	nning 07-01-2016 ,and endin	ıg 06-30-	2017					
□ Ad	ck ıf applıcabl dress change me change	C Name of organization OBERLIN COLLEGE				D Employ 34-071		cation number		
□ Ini	tıal return	Doing business as								
Fın Detur⊐	al n/terminated	Number and street (or D.O. how if a	wall in wat dalillared to atmost address \	Doom /out		E Telephor	ne number			
	nended return	173 WLORAIN ST CONTROLLERS O	mail is not delivered to street address) IFFICE	Room/suite	2	(440) 7	75-8460			
⊔ Apı	plication pend	City or town, state or province, cou OBERLIN, OH 44074	untry, and ZIP or foreign postal code			C Cross to	counts # 21	2.600.960		
		F Name and address of princip	al officer		H(a) I	s this a group re		.2,600,869		
		ALAN J NORTON				subordinates?	turri ioi	□Yes ☑ No		
		70 NPROFESSOR ST OBERLIN, OH 44074			H(b) A	Are all subordinat	es	☐ Yes ☐No		
Tax	x-exempt stat	us ☑ 501(c)(3)	(insert no)] 527		ncluded? if "No," attach a l	list (see i			
W	ebsite: 🕨 🕦	WWW OBERLIN EDU			H(c) (Group exemption	number	•		
(Forn	n of organızat	on 🗹 Corporation 🗌 Trust 🗌 Ass	ociation Other	1	L Year of	formation 1834	M State of OH	of legal domicile		
Pa	rt I Su	mmary								
GOVERNA	Oberlin creativi	describe the organization's mission of College and Conservatory educate sty and innovation, and leadership of the complex issues and to create char	students for lives of intellectual, m Oberlin aims to prepare graduates							
		2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3. Number of voting members of the governing body (Part VI. line 1a)								
ACHAINES &		er of voting members of the governing body (Part VI, line 1a)								
Š		number of individuals employed in co		•			5	3,901		
3		number of volunteers (estimate if ne		•			6	50		
•	7a Total (inrelated business revenue from Pai	rt VIII, column (C), line 12				7a	-1,483,923		
	b Net ur	related business taxable income fro	m Form 990-T, line 34				7b	-1,483,923		
						Prior Year		Current Year		
ġ		Contributions and grants (Part VIII, line 1h)						24,750,983		
Ravenue	1	, ,		193,382,420						
ç		ment income (Part VIII, column (A) revenue (Part VIII, column (A), line	6,514,	0	39,847,937 0					
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 234,781,090								
		and similar amounts paid (Part IX,	, , , , , , , , , , , , , , , , , , , ,	,	+	60,118,	711	257,981,340 64,561,372		
		ts paid to or for members (Part IX,				· · · ·	0	0		
8	15 Saları	es, other compensation, employee b	enefits (Part IX, column (A), lines	5-10)		113,404,	585	103,962,383		
Expenses	16a Profes	sional fundraising fees (Part IX, coli	umn (A), line 11e)	•			0	0		
dx.	b Total fu	ndraising expenses (Part IX, column (D),	line 25) ▶6,732,463							
ш		expenses (Part IX, column (A), lines	,	•		84,039,	_	82,762,197		
		expenses Add lines 13–17 (must eq			-	257,562,	_	251,285,952		
Fund Balances	19 Reven	ue less expenses Subtract line 18 fi	iom ine 12	•	Begin	-22,781,4 Ining of Current Y		6,695,388 End of Year		
alar	20 Total a	ssets (Part X, line 16)				1,224,453,	188	1,322,456,220		
2 A		labilities (Part X, line 26)				279,716,9	_	298,932,469		
Ž,	22 Net as	sets or fund balances Subtract line	21 from line 20			944,736,	251	1,023,523,751		
		nature Block								
nowl		f perjury, I declare that I have exan elief, it is true, correct, and complete								
		***				2018-05-10				
Sign	Sig	nature of officer				Date				
Here	ALA	N J NORTON INTERIM VP FOR FINANCE& e or print name and title	ADMIN							
		Print/Type preparer's name	Preparer's signature	Dat	:e		PTIN P00226559			
Paid		Christopher B Anderson	Christopher B Anderson			self-employed				
_	parer	Firm's name ► Maloney Novotny LLC Firm's EIN ► 34-0677006								
	\sim .	Firm's address > 1111 Superior Ave Su	ite /00			Phone no (216)	363-0100			
Jse	Only	Cleveland, OH 44114				Phone no (216)	363-0100			

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

☑ Yes ☐ No

Form	990 (2016)					Page 2
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		_
	Check If Sche	dule O contains a resp	onse or note to	any line in this Part III		🗹
1	Briefly describe the o	organization's mission				
SEE :	SCHEDULE O					
2	Did the organization	undertake any signific	ant program ser	vices during the year wh	nich were not listed on	
	the prior Form 990 o	or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the					
3	Did the organization					
	services?	🗌 Yes 🗹 No				
	If "Yes," describe the	ese changes on Schedu	ile O			
4	Section 501(c)(3) an		ons are required	I to report the amount of	argest program services, as meas f grants and allocations to others,	
4a	(Code) (Expenses \$	226,237,054	including grants of \$	64,561,372) (Revenue \$	192,798,822)
	See Additional Data				, , , ,	, ,
	-					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program servi	ces (Describe in Sched	ule O)			
	(Expenses \$	•	luding grants of	\$) (Revenue \$)
4e	Total program serv	vice expenses ▶	226,237,0	954		•
	,		,,-			Form 990 (2016)

Section 501(c)(3) organizations.

or X as applicable

Yes

1

2

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

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19

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 👺 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

No

Page 3

No

Nο

No No Yes

No

Nο

Nο

Nο

Nο

No

Nο

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Yes

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Form 990 (2016)							
Pai	t IV Checklist of Required Schedules (continued)						
			Yes	No			
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b					
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1º If "Yes," complete Schedule I, Parts I and II	21	Yes				

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

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31

32

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34

35a

35b

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Nο

Nο

No

Nο

Νo

Νo

Nο

Nο

Nο

No

Νo

		_	
L	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1	23	Yes

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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 🔀

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 ** Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

complete Schedule L, Part I 🥞

instructions for applicable filing thresholds, conditions, and exceptions)

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Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 965			
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 reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return	2b	Yes	
D	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			140
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		140
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
.1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? 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			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to lı	nes ✓
Se	Check if Schedule O contains a response or note to any line in this Part VI	• •		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 36			
	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 34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	<u> </u>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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	Yes	
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	Yes	
Se	ction C. Disclosure	100	162	
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►ALAN J NORTON 70 N PROFESSOR ST OBERLIN, OH 44074 (440) 775-8460			. /

orm 990 (2016) Pa								
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							
La Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's	tax						

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

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

(B)

(A)

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

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

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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

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Part VII Section A. Officers, Direct		s, Key I	Empl			and	High			ate		(con	-	
(A) Name and Title	(B) Average hours per week (list any hours for related	than one box, unless person is both an officer and a director/trustee) orga					Repo compe fror organiz	(D) Reportable ompensation from the ganization (W- /1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated emptoxee	Former	2,103	J 1130	-,	2, 2000 1113		relat organiz	:ed
See Additional Data Table														
1b Sub-Total	art VII, Sectio	n A . 			——	▶	reco		306,036 re than		10 000	0		795,126
of reportable compensation from the								CIVEG IIIO	TC triair	Ψ=0				
3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k		mple	oyee,	or hi	ghest cor	npensa	ted •	employee on	3	Yes	No No
For any individual listed on line 1a, is organization and related organization individual											the		Vas	
5 Did any person listed on line 1a receiver services rendered to the organization									tion or	ındı\ •	vidual for	5		No
Section B. Independent Contract	ors													110
1 Complete this table for your five high from the organization Report comper												omper	nsation	
Name a	(A) and business addre	200)escr	(B) uption of services		Compe	
ALBERT M HIGLEY CO	a basiness addit								CONSTR				<u> </u>	,794,797
2926 CHESTER AVENUE CLEVELAND, OH 44114 MAROUS BROTHERS CONSTRUCTION									CONCT	NICT!	CON			
NAKOUS BROTHERS CONSTRUCTION 1702 JOSEPH LLOYD PARKWAY WILLOUGHBY, OH 44094									CONSTR	(UCI)	ON			2,624,603
PANZICA CONSTRUCTION COMPANY									CONSTR	RUCTI	ON		1	,901,853
739 BETA DRIVE MAYFIELD HTS, OH 44143 GIMPLEX GRINNELL LP									FIRE SA	FETY	SVCS		1	,084,721
13500 DARICE PARKWAY 515 STRONGSVILLE, OH 44149														
INDUSTRIAL FIRST INC 25840 MILES ROAD									CONSTR	RUCTI	ON			823,400
BEDFORD, OH 44146 2 Total number of independent contractor	s (includina but	not lim	uted t	o th	ose	listed	abov	ve) who n	eceiver	d mo	re than \$100 (000 of	:	

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

compensation from the organization ▶ 36

Part	VI	II Statement of	Revenue								rage 3
				a respo	onse or note to any	line in th	ıs Part VII	τ			\square
				<u> </u>		(A Total re	1)	Rela ex fur	(B) ated or empt action	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1	a Federated campaig	ns	1a				rev	/enue		512-514
nts nts		b Membership dues		1b							
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events		1c							
		d Related organization		1d							
		e Government grants (c		1e	2,149,381						
.s. ≣		f All other contributions	•	l re	2,143,301						
tion S		and similar amounts n		1f	22,601,602						
Contributions, and Other Sim		g Noncash contribution	ons included	5,86	59,32 <u>4</u>						
ವ ಕ		h Total. Add lines 1a-1	lf		•	24,	750,983				
<u>ı</u>	Γ				Busines	s Code					
หะน	2	TUITION & FEES				900099	154,	167,255	154,167,	255	
Program Service Revenue		RESIDENTIAL & DINING	SERVICES			900099	·	715,525	33,715,		
ر ح		EDUCATIONAL ACTIVIT				900099		221,238 694,804	4,221,3	+	
₹		SUMMER CONFERENCE AUXILLIARY SERVICES	PROGRAM			900099		542,921	054,0	304	542,921
an								40,677			40,677
₽Bo.	1	f All other program se	rvice revenue	!	193.	382,420		I		'	1
4	٥	Total.Add lines 2a-2	f		▶						
		Investment income (i similar amounts) .			nterest, and other	_	2,688,43	7		-1,483,923	4,172,360
	l	Income from investm			ond proceeds	<u> </u>					
				-		•					
			(ı) Rea	I	(II) Personal						
	6	a Gross rents									
		b Less rental expenses									
		c Rental income or (loss)									
		d Net rental income o	r (loss)			-					
			(ı) Securi	ties	(II) Other						
	7	a Gross amount from sales of assets other than inventory	91,7	779,029							
		b Less cost or other basis and sales expenses	54,6	519,529							
		C Gain or (loss)	37,1	159,500							
		d Net gain or (loss)			•		37,159,50	0			37,159,500
Other Revenue	8	a Gross income from f (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of							
ď	l	b Less direct expense		b							
hei		c Net income or (loss) a Gross income from g			ents 🕨						
ō	֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֓֓֡֓֡	See Part IV, line 19		163							
				а							
		b Less direct expense		b							
		c Net income or (loss) aGross sales of invent returns and allowand	tory, less								
		b Less cost of goods s		a b							
	\vdash	Net income or (loss) Miscellaneous		invent	Business Code						
	1	1a				-					
		b						+			
		с						1	+		
		d All other revenue .						1			
		e Total. Add lines 11a			•			+			
	1	2 Total revenue. See	Instructions					1			
				-	• • •		257,981,34	0	192,798,822	-1,483,923	41,915,458 Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other orga	ınızatıons must comp	elete column (A)	
Check if Schedule O contains a response or note to any	y line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	52,524	52,524		
2 Grants and other assistance to domestic individuals See Part IV, line 22	62,139,885	62,139,885		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	2,368,963	2,368,963		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	4,261,785	1,095,533	2,801,461	364,791
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 Other salaries and wages	72,148,049	65,771,815	3,398,444	2,977,790
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	7,978,153	7,462,985	213,994	301,174
9 Other employee benefits	13,784,204	11,831,515	1,223,724	728,965
10 Payroll taxes	5,790,192	5,316,306	255,939	217,947
11 Fees for services (non-employees)				
a Management				
b Legal	920,675		920,675	
c Accounting	98,350		98,350	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	2,912,483		2,912,483	
g Other (If line 11g amount exceeds 10% of line 25, column(A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	10,235,168	9,629,728	311,086	294,354
14 Information technology	1,075,659	1,075,659		
15 Royalties				
16 Occupancy	12,321,506	12,321,506		
17 Travel	3,069,111	2,481,792	292,014	295,305
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings				
20 Interest	5,629,769	5,629,769		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,350,113	20,350,113		
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a STUDY AWAY PROGRAMS	5,623,552	5,623,552		
b FACILITIES EXPENSE	4,390,553	1,975,099	1,612,257	803,197
c INSTRUCTION EXPENSE	2,932,016	2,932,016		

1,957,310

11,245,932

251,285,952

8,178,294

226,237,054

1,957,310

2,318,698

18,316,435

748,940

6,732,463

Form **990** (2016)

d ANNUITY & RLIF PAYMENTS

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

e All other expenses

Page **11**

1,322,456,220

61,309,183

648,137

187,152,766

11.571.480

22.460.000

15.790.903

298,932,469

287,976,940

431,467,425

304.079.386

1,023,523,751

1.322.456.220

Form **990** (2016)

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1,224,453,188

66,801,699

927,689

164,588,618

9.354.906

23.000.000

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279,716,937

268,903,739

379,383,921

296.448.591

944,736,251

1,224,453,188

Form 990 (2016)

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Liabilities 22

Fund Balances

Assets or 30

Net

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

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

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

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

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

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

4	Cash-non-interest-bearing	0,510,550	_	7,220,000
2	Savings and temporary cash investments	88,733,690	2	85,876,658
3	Pledges and grants receivable, net	33,883,776	3	26,211,017
4	Accounts receivable, net	3,201,425	4	3,143,965
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6			6	

	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L		5			
	6	Loans and other receivables from other disquali- section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations		6			
S)	_	Part II of Schedule L	\	,	40,000,000		40.072.247
ē	/	Notes and loans receivable, net	19,028,899	7	18,872,217		
Assets	8	Inventories for sale or use			462,338	8	394,077
A	9	Prepaid expenses and deferred charges	ses and deferred charges				2,166,534
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	711,774,706			
	ь	Less accumulated depreciation	10b	367,966,066	329,865,335	10c	343,808,640

	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	n 4958(ations o	(c)(3)(B), and f section 501(c)(9)		6	
ets	7	Notes and loans receivable, net			19,028,899	7	18,872,217
\$8	8	Inventories for sale or use		462,338	394,077		
A	9	Prepaid expenses and deferred charges	3,289,071	9	2,166,534		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	711,774,706			
	b	Less accumulated depreciation	10b	367,966,066	329,865,335	10c	343,808,640
	11	Investments—publicly traded securities .			520,102,402	11	553,852,829
	12	Investments—other securities See Part IV, line 11			207,255,674	12	268,807,986
	13	Investments—program-related See Part IV, line	e 11 .	•	12,319,988	13	12,098,734

9	Other changes in net assets or fund balances (explain in Schedule O)	9		5	,339,678
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,023	,523,751
Par	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No

☐ Both consolidated and separate basis

2c

3a

3b

Yes

Yes

Yes Form 990 (2016)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

Consolidated basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Additional Data

Software ID:

Software Version:

Name: OBERLIN COLLEGE

EIN: 34-0714363

Form 990 (2016)

Form 990, Part III, Line 4a:

OBERLIN COLLEGE IS A LIBERAL ARTS INSTITUTION MADE UP OF THE COLLEGE OF ARTS AND SCIENCES AND THE CONSERVATORY OF MUSIC. THE COLLEGE SERVES 2,886 FULL-TIME EQUIVALENT UNDERGRADUATE STUDENTS, AWARDING SCHOLARSHIPS TO 2,420 OF THEM THE AVERAGE STUDENT RECEIVES \$25,485 IN FINANCIAL AID THE COLLEGE IS ESSENTIALLY RESIDENTIAL. THE BALANCE OF THE STUDENT BODY IS HOUSED IN PRIVATE OFF-CAMPUS HOUSING WITHIN THE CITY OF OBERLIN. OHIO

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trusti or director Officer Highest compensat Former Institutional MISC) related organizations MISC) below dotted organizations employee line) ⇉

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

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Trustee				
Charles S Birenbaum	2 00	X		ſ
Trustee		^		l

Richard T Brandt

T Christopher Canavan

Trustee

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Trustee

Trustee

Amy Chen

Joseph D Condon

Thomas F Cooper

Marjorie Coward

Motoko T Deane

Anne Chege

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) 2 00 Steve Dolcemaschio Χ Trustee 2 00 Gifty Dominah

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Eric Katzman

Sean Gavin

Jacob A Gayle

Edward P Helms

Cynthia Hogan

Charlene Drew Jarvis

Michael E Kamarck

Lillie Johnson Edwards

Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Key employee Institutional MISC) MISC) related organizations below dotted organizations line) Trustee

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

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David Krischer	2 00	×			0	0	,
Trustee		^				0	,
William Lewis	2 00	×			0	0	
Trustee		_ ^				0	'
Nicholas Loh	2 00	1				0	
Trustee		×			0	U	
Chesley Maddox-Dorsey	8 00						

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Trustee		.,	
Nicholas Loh	2 00	×	
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Chesley Maddox-Dorsey	8 00		
Trustee		X	
Emily McClintock	2 00		
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Trustee

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Trustee

Molly Raphael

Thomas L Riis

Patricia Shanks

David Shipley

Susan J Troy

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per week (list person is both an officer from the from related compensation from the any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former MISC) MISC) related organizations employee

(F)

69,053

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483,903

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

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	organizations below dotted line)	Individual trustee or director	Institutional Trustee
Philip Vasan	2 00	×	
Trustee			l

Leanne Wagner

Danette Wineberg

MARVIN KRISLOV

JAINEN THAYER

VP FOR FINANCE

WILLIAM E BARLOW

CHIEF INVESTMENT OFFICER

VP OF DEVEL /ALUMNI AFFAIRS

MICHAEL L FRANDSEN

Trustee

Trustee

Trustee

Trustee

Diane Yu

Trustee

PRESIDENT

Alan Wurtzel

Lisa Waller

Compensated Employees, and Independent Contractors (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation amount of other compensation person is both an officer week (list from the from related compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Forma Highes emplo Instit organizations MISC) MISC) related below dotted organizations

	line)	dual trustee ector	utronal Trustee	-	mployee	st compensated	ėr		
TIMOTHY E ELGREN DEAN OF ARTS & SCIENCES	40 00			×				219,866	
ANDREA E KALYN DEAN OF CONSERVATORY	40 00			x				234,627	

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ASSOC VP FOR FINANCE

DIRECTOR OF INVESTMENTS

DEAN OF ADMISSIONS & FIN AID

INTERIM VP/DEAN STUDENT LIFE & SVCS

......

HEIDI PYCRAFT

MARCIA E MILLER

DEBRA J CHERMONTE

MEREDITH L RAIMONDO

HARRY N HIRSCH

PROFESSOR

CONTROLLER

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

				1				
TIMOTHY E ELGREN	40 00		x			219,866	0	
DEAN OF ARTS & SCIENCES			213,800	j	Ì			
ANDREA E KALYN	40 00		¥			234,627	0	
DEAN OF CONCEDIVATORY			^			254,027	ı "I	i

TIMOTHY E ELGREN	40 00		×		219,866	0	51,68
DEAN OF ARTS & SCIENCES					213,000		31,00
ANDREA E KALYN	40 00		Ų				
DEAN OF CONSERVATORY			×		234,627	0	41,68
SANDHYA S IYER	40 00		V		220 202		40.46
VP, GENERAL COUNSEL & SECY			^		220,202	U	40,48

ANDREA E KALYN	40 00		v		234,627	0	41,683
DEAN OF CONSERVATORY			^		254,027		41,003
SANDHYA S IYER	40 00		v				10.100
VP, GENERAL COUNSEL & SECY			Х		220,202	0	40,480
MARK R BATES	40 00		>		201,728	0	52,967
ASSOC VP FOR FINANCE			^		201,728		32,907

DEAN OF CONSERVATORY	••••••		×		234,627	0	41,683
SANDHYA S IYER	40 00		Ų		220 202	0	40.400
VP, GENERAL COUNSEL & SECY			^		220,202	0	40,480
MARK R BATES	40 00		v		201,728	0	52,967
ASSOC VP FOR FINANCE			^		201,728		32,907
MARY JO DIEKMAN	40 00						

DEAN OF CONSERVATORY									
SANDHYA S IYER	40 00			Ų			220 202		40.400
VP, GENERAL COUNSEL & SECY				^			220,202	0	40,480
MARK R BATES	40 00			v			201.728	0	F2 067
ASSOC VP FOR FINANCE				^			201,726	0	52,967
MARY JO DIEKMAN	40 00								
		l	I	I v I	ı	1	120 249	l n	20 712

ANDHYA S IYER	40 00		v		220,202	0	40,480
P, GENERAL COUNSEL & SECY			^		220,202	0	40,480
1ARK R BATES	40 00		×		201,728	0	52.967
SSOC VP FOR FINANCE			^		201,728	0	52,907
IARY JO DIEKMAN	40 00						
	•••••		l x l		120,248	o	38,713

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114,085

238,329

189,863

150,597

200,794

23,065

38,405

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25,366

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer from the from related week (list compensation from the any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and individu or direc Qf | 52 Instituti MISC) MISC) related organizations below dotted organizations line)

	,	ial trustee tor	ional Trustee	ployee	compensated ee			
CLAYTON R KOPPES	40 00				×	199,136	0	
PROFESSOR					^	199,130	· ·	,
MICHAEL M NOLAN	40 00				v	184 830	0	

CLAYTON R KOPPES PROFESSOR	40 00			х	199,136	0	36,658
MICHAEL M NOLAN ASSOC VP DEVEL/DIR PRINC GIFT	40 00			х	184,830	0	34,355

193,076

181,570

70,076

39,384

40.00

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STEVEN F WOJTAL

JOHN E BUCHER

CHIEF TECHNOLOGY OFFICER

PROFESSOR

efile	GR/	APHIC prin	nt - DO NOT PROCESS	S As Filed Data -			DLN: 9	3493134049988
SCH	IED	ULE A	Public	Charity Statu	s and Put	olic Supp	ort	OMB No 1545-0047
(Forn	n 99(organization is a sect	ion 501(c)(3) d	organization o		2016
990E	Z)			4947(a)(1) nonexe ▶ Attach to Form				2010
-		the Treasury	► Information ab	out Schedule A (Form			uctions is at	Open to Public Inspection
lame	of th	ue Service ne organiza	tion	<u>www.ii 3.g</u> .	<u> </u>		Employer identific	<u> </u>
BERLI	N COL	LEGE					34-0714363	
Par			for Public Charity Sta				See instructions.	
	ganız		a private foundation becau	`	•	,	(4)	
1			onvention of churches, or)(A)(I).	
2	✓		scribed in section 170(b		,			
3		·	or a cooperative hospital se	•				
4		name, city,	esearch organization oper and state		-			·
5			ation operated for the bene (iv). (Complete Part II)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bea in section 1/U
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(4)(v).	
7			ation that normally receive (0(b)(1)(A)(vi). (Comple		s support from a	governmental (unit or from the gener	al public described in
8		A communi	ty trust described in secti	on 170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization rant college of agriculture					ege or university or a
LO		from activit	ation that normally receive ties related to its exempt f income and unrelated bus see section 509(a)(2). (i	unctions—subject to cer siness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
1	П	•	ation organized and operat		r public safety S	ee section 509)(a)(4).	
12		more public	ation organized and operat ly supported organization: through 12d that describe	s described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A s	supporting organization op n(s) the power to regularly	erated, supervised, or c	ontrolled by its s	upported organi	zation(s), typically by	
		complete	Part IV, Sections A and	В.				
b		manageme	supporting organization so nt of the supporting organ plete Part IV, Sections A	ization vested in the sar				
С		Type III fo	unctionally integrated. Appropriate in the property of the company	A supporting organizatio				ited with, its
d		functionally	on-functionally integrated The organizate) You must complete P	ion generally must satis	fy a distribution i	requirement and		
e		Check this	box if the organization rec or Type III non-functional	eived a written determir	nation from the II		ype I, Type II, Type II	I functionally
f	Enter		of supported organization		ga			
			ing information about the	supported organization(s)			
org (descr 1- 10		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governir	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No	1	
			1	1				
Total			tion Act Notice, see the		Cat No 11285		 Schedule A (Form 9	

	III. If the organization f	aıls to qualıfy un	der the tests list	ed below, pleas	e complete Part	III.)	
S	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	40,233,376	46,574,003	30,565,377	39,365,045	24,750,983	181,488,784
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	40,233,376	46,574,003	30,565,377	39,365,045	24,750,983	181,488,784
5	The portion of total contributions by each person (other than a governmental unit or publicly						13,081,377
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						13,061,377
6	Public support. Subtract line 5 from line 4						168,407,407
s	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f) ⊤otal
7	Amounts from line 4	40,233,376	46,574,003	30,565,377	39,365,045	24,750,983	181,488,784
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,349,281	2,781,710	4,402,930	4,854,092	2,688,437	17,076,450
9	Net income from unrelated business activities, whether or not the 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						198,565,234
12	10 Gross receipts from related activities,	etc (see instruction	ns)			12	913,049,627
	First five years. If the Form 990 is for			d, fourth, or fifth	tax year as a sect		
	check this box and stop here					▶□]
S	ection C. Computation of Publi						
14	Public support percentage for 2016 (II	ne 6, column (f) dı	vided by line 11, co	olumn (f))		14	84 810 %
15	Public support percentage for 2015 Sc	hedule A, Part II, l	ine 14			15	85 230 %
16 a	33 1/3% support test—2016. If the	e organization did r	ot check the box o	n line 13, and line	e 14 is 33 1/3% or	more, check this l	box
b	and stop here. The organization qual 33 1/3% support test—2015. If the				nd line 15 is 33 1/	3% or more, chec	▶ ☑ k this
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	t—2016. If the org	anization did not c -and-circumstance	heck a box on lines" test, check this	box and stop her	· e. Explain	▶ □
b	organization 10%-facts-and-circumstances te	st—2015. If the or	ganization did not	check a box on lir	ne 13, 16a, 16b, oi	17a, and line	▶□

	or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10						198,565,234	
12	Gross receipts from related activities,	etc (see instruct	ions)	•		12	913,049,627	
13	First five years. If the Form 990 is fo	r the organizatio	n's first, second,	thırd, fourth, or fıf	th tax year as a sectio	on 501(c)(3)	organization,	
	check this box and stop here						▶ □	
	ection C. Computation of Public							
14	Public support percentage for 2016 (lin		14	84 810 %				
15	Public support percentage for 2015 Schedule A, Part II, line 14						85 230 %	
16a	33 1/3% support test—2016. If the	organization did	not check the bo	x on line 13, and l	ine 14 is 33 1/3% or n	nore, check		
ь	and stop here. The organization quali 33 1/3% support test—2015. If th				, and line 15 is 33 1/3'	% or more,	▶ ✓ check this	
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organizatio in Part VI how the organization meets	: —2016. If the o	rganization did no s-and-circumstar	ot check a box on l ices" test, check th	nis box and stop here	e. Explain	▶□	
ь	organization b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly							
18	supported organization Private foundation. If the organizati	on did not check	a box on line 13,	16a, 16b, 17a, or	17b, check this box a	nd see	▶□	
	instructions						▶□	
					Schedule	A (Form 99	90 or 990-EZ) 2016	

Section A. Public Support										
the organization fails to qualify under the tests listed below, please complete Part II.)										
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT									

Se	ection A. Public Support							
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total	
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and							
_	membership fees received (Do not	I						
	ınclude any "unusual grants`")	<u> </u>						
2	Gross receipts from admissions,	I						
	merchandise sold or services performed, or facilities furnished in	I						
	any activity that is related to the	I						
	organization's tax-exempt purpose	I						
_	Cross receipts from activities that are							
3	Gross receipts from activities that are not an unrelated trade or business	I						
	under section 513	I						
4	Tax revenues levied for the							
	organization's benefit and either paid	I						
5	to or expended on its behalf The value of services or facilities							
,	furnished by a governmental unit to	I						
	the organization without charge	ļ						
6	Total. Add lines 1 through 5	<u></u>						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I						
	5 received from disqualified persons	<u> </u>						
b	Amounts included on lines 2 and 3							
	received from other than disqualified	I						
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I						
	13 for the year	I						
C	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6)							
31	ection B. Total Support	Г	1	T	Т			
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total	
9	Amounts from line 6							
.0a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and							
ь	income from similar sources Unrelated business taxable income							
U	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975							
	Add lines 10a and 10b Net income from unrelated business							
11	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 fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization	
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, ► □	
<u> </u>	ection C. Computation of Public	Support Perce	ntage					
15	Public support percentage for 2016 (lin			column (f))		15		
16		percentage from 2015 Schedule A, Part III, line 15						
	ection D. Computation of Invest	<u> </u>				16		
17	Investment income percentage for 20:			line 13, column (f))	17		
18	Investment income percentage from 2			18				
	331/3% support tests—2016. If the			on line 14, and lir	ie 15 is more than		e 17 is not	
	more than 33 1/3%, check this box and						▶ □	
	33 1/3% support tests—2015. If the						. —	

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

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

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10a

Schedule A (Form 990 or 990-EZ) 2016

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

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
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			
	ın section 509(a)(1) or (2)	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	1 - '		l

	(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)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	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	

	III Section 309(a)(1) or (2)	2	i		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)				
	below	3a			
b	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the				
	determination	3b			
c					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use				

	below	3a				
b	the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied sublic support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the					
	etermination					
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b in Part I, answer (b) and (c) below					
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewers commented	\Box				

		30	l	
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	3с		
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
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	4b		
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 foleigh supported organization was used exclusively for section 170(e)(2)(b) purposes	4c	
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)	5a	
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?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

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9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

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

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

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

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

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

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

organization's supported organizations? If "Yes," provide detail in Part VI.

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

the organization had excess business holdings)

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

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

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

Par	Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the				
	governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
С	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			
	stion B. Tuno I Summouting Ouspuingtions				
36	ction 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		1.03	"	
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa				
	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			
	skien C. Tune II Cumpostine Opposite tions				
Se	ction C. Type II Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of	163	110	
-	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			
C -	skion D. All Tuno III Sunnouting Ouspainsking				
36	ction D. All Type III Supporting Organizations		Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's		1.03	"	
	tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of t				
	Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?				
	, , , , , , , , , , , , , , , , , , , ,	1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization				
	(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization				
	maintained a close and continuous working relationship with the supported organization(s)	2			
3	By reason of the relationship described 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 ta				
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3			
Se	ction 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 instru	ctions)			
а	The organization satisfied the Activities Test. Complete line 2 below	•			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below				
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	ee instri	ictions)	١	
_	The organization supported a governmental entity bescribe in Fair variow you supported a government entity (s	oc mon	100113)	,	
2	Activities Test Answer (a) and (b) below.		1		
			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	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the				
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's				
	involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, and the organization have the power to require the organization of the organization have the organization of the	of 3a			
	the supported organizations? Provide details in Part VI.				
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard				
	Supported organizations: It res, describe in Fart #1. the fole played by the organization in this regard	3b	1	1	

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	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 Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, 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		
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3		
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .



efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

As Filed Data -

Supplemental Financial Statements

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

DLN: 93493134049988 OMB No 1545-0047

Internal Revenue Service

(Form 990)

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Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization **Employer identification number OBERLIN COLLEGE** 34-0714363 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 7,308,113 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Par	t IIII	Organizations M	aintaining Col	lections of Art,	Histor	ical Tı	reas	ures, or (Other	Similar As	sets (cor	tinued)	
3		g the organization's acq s (check all that apply)	juisition, accessior	n, and other record	s, check	any of	the fo	ollowing tha	at are a	sıgnıfıcant u	ise of its co	llection	
а	✓	Public exhibition			d	✓	Loar	n or exchan	ige prog	rams			
b	✓	Scholarly research			е		Othe	er					
С	✓	Preservation for future	e generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No												
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			orm 990), Part	IV, I	line 9, or i	reporte	ed an amou	nt on For	m 990,	Part
1a		e organization an agent ded on Form 990, Part :		an or other interme	diary for	· contril	butio	ns or other	assets	not	Yes	✓ 1	No
Ь	If "Y	es," explain the arrange	ement in Part XIII	and complete the	following	table				A	mount		_
С		nning balance		·	_				1c				_
d	_	tions during the year							1d				_
е		ributions during the year	r						1e				_
f		ng balance							1f				_
2a		the organization include	an amount on Fo	rm 990. Part X. line	e 21. for	escrow	or c	ـــ ustodial acc	count lia	bility?	✓ Yes		_
b		es," explain the arrange			•					,		□ '	No .
Pa	rt V	Endowment Fun	ds. Complete ıf	the organization	answei	red "Y	es" o	n Form 9	90, Par	t IV, line 1	0.		
				(a)Current year		rior yea	$\overline{}$	(c)Two yea)Four yea	
	-	ning of year balance .		753,148,709		814,003			,453,260		847,717		,378,344
b	Contri	butions		10,382,089		14,676			,359,611		082,534		,239,860
С	Net in	vestment earnings, gair	ns, and losses	97,725,520	9	-35,665	5,275	17,	,423,120	115,	495,647	75	,169,147
d	Grants	s or scholarships	•	11,973,623	<u> </u>	11,928	3,644	10,	,544,395	10,	468,387	10	,190,872
е		expenditures for facilition rograms	es	28,761,737	,	27,937	7,474	26,	,688,368	25,	504,251	22	,352,170
f	Admır	nistrative expenses .		575,844	·								396,592
g	End of	f year balance		819,945,114	<u> </u>	753,148	3,709	814,	,003,228	808,	453,260	712	,847,717
2 a b	Boar	ide the estimated percerd designated or quasi-entanent endowment	-	ent year end balanc 34 010 %	e (line 1	g, colu	mn (a	a)) held as					
c		porarily restricted endov		.00 %									
·		percentages on lines 2a											
3a		there endowment funds		•	ation tha	t are h	eld ar	nd administ	ered fo	r the			
	orga	nızatıon by		_								Yes	No
	(i) u	inrelated organizations				•					3a(i		No
		related organizations .									3a(ii)	No
b		es" on 3a(II), are the re cribe in Part XIII the inte	-	· ·			· •				3b		<u> </u>
4					owment	iuiius							
Pa	rt VI	Land, Buildings, Complete if the or			rm 990	Part '	TV/ lı	ne 11a S	ee Fori	n 990 Par	t X line 1	n	
	Descr	ription of property	(a) Cost or oth (investme	er basis (b)Cos	st or other					epreciation		Book valu	ie
12	Land					7.07	78,842	2					7,078,842
	Buildir			+		446,39				207,208,545			9,188,193
		-				770,35	. 0, / 30	1		201,200,343			
		hold improvements				211 F4	50 021	1		160,757,521		-	0,812,310
		ment		46,729,295		211,56	55,031	<u> </u>		100,737,321			6,729,295
	Other	l lines 1a through 1e (Co	olumn (d) must o		t X colu	mn (R)	line	10(c)		>			
· OL	Aud	i iiiles ta ulilougii te (Ci	olullii (u) illust et	_{quai} i oiiii 550, Par	c A, COIUI	ш (D),	, iiile	10(C) / •	•	-		34	3,808,640

Part VII	Investments—Other Securities. Complete See Form 990, Part X, line 12. (a) Description of security or category		Book value		orm 990, Part	
(4)5	(including name of security)				r end-of-year n	
(1)Financial (2)Closely-h	derivatives					
(3)Other (A) FUNDS F	HELD IN TRUST BY OTHERS		17,865,604		F	
(B) NATURA	L RESOURCES INVESTMENTS		25,786,438		F	
(C) VENTUR	E CAP &OTHER ALTERN INV		225,155,944		F	
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•	268,807,986			
Part VIII	Investments—Program Related. Complet See Form 990, Part X, line 13.	e if the org	ganızatıon ans	wered 'Yes' on I	Form 990, Par	t IV, line 11c.
	(a) Description of investment	((b) Book value		c) Method of va r end-of-year n	
(1)					,	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13)	•				
Part IX	Other Assets. Complete if the organization answ (a) Descri		n Form 990, Par	t IV, line 11d Se	e Form 990, Pai	t X, line 15 (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15 Other Liabilities. Complete if the organization		ed 'Yes' on Fo		▶	1f
	See Form 990, Part X, line 25. (a) Description of liability			ook value		
(1) Federal I	ncome taxes		(5) 50	JON VAIAC		
ANNUITY OF	BLIGATIONS			15,790,903		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the te	ext of the fo	▶ otnote to the ord	15,790,903	ual statements	that reports the
	's liability for uncertain tax positions under FIN 48 (A					

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Donated services and use of facilities

Other (Describe in Part XIII)

Supplemental Information

Prior year adjustments

Other losses

Add lines 2a through 2d .

Subtract line 2e from line 1 .

Return Reference

Schedule D (Form 990) 2016

Part XI

5

1

2

е

3

4

b

c

Part XIII

See Additional Data Table

5

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

2a

2b

2c 2d

4a

4b

Explanation

5,973,454

2,912,483

65,520,522

5

2e

3

4c

5

Page 4

257.981.340

188,826,401

5,973,454

182,852,947

68,433,005

251,285,952

Schedule D (Form 990) 2015

chedule D (Form 990) 2015				
tinued)	Part XIII Supplemental Information (co			
Explanation	Return Reference			

Schedule D (Form 990) 2016

Additional Data

Software Version: EIN: 34-0714363

Name: OBERLIN COLLEGE

Supplemental Information

Return Reference

Explanation

Part III, Line 1a

FINANCIAL STATEMENT FOOTNOTE REGARDING ART COLLECTION - THE COLLEGE HAS ELECTED NOT TO CAP ITALIZE CONTRIBUTED COLLECTIONS ALL WORKS OF ART AND COLLECTIONS ARE HELD FOR PUBLIC EXHI BITION, EDUCATION OR RESEARCH, ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED, AND ARE SUBJECT TO POLICIES GOVERNING THEIR USE RECOGNIZING WORKS OF ART AS AN ASSET OF THE INSTITUTION WOULD RESULT IN A MATERIAL INCREASE IN PROPERTY, PLANT AND EQUIPMENT AND A

CORRESPONDING INCREASE IN NET ASSETS IN THE STATEMENTS OF FINANCIAL POSITION.

Software ID:

pupplemental information					
Return Reference	Explanation				
Part III, Line 4	DESCRIPTION OF ART COLLECTION - THE ALLEN MEMORIAL ART MUSEUM (AMAM) IS ONE OF THE FINEST COLLEGE OR UNIVERSITY COLLECTIONS IN THE UNITED STATES COMPRISING NEARLY 14,000 WORKS OF ART FROM VIRTUALLY EVERY CULTURE AND SPANNING THE HISTORY OF ART, THE AMAM'S COLLECTION IS A VITAL CULTURAL RESOURCE FOR THE STUDENTS, FACULTY, AND STAFF OF OBERLIN COLLEGE AS WELL AS THE SURROUNDING COMMUNITY THE MUSEUM ORGANIZES A VARIETY OF PUBLIC PROGRAMS IN CONNEC TION WITH EXHIBITIONS FOR OBERLIN COLLEGE AND THE LOCAL COMMUNITY THE MUSEUM OFFERS EDUCA				

 \mid TIONAL RESOURCES FOR OBERLIN COLLEGE FACULTY AND STUDENTS AS WELL AS OTHER COLLEGES AND UN \mid

IVERSITIES, K-12 TEACHERS, CHILDREN, AND FAMILIES

Supplemental Information

Supplemental Information	
Return Reference	Explanation
Part IV, Line 2b	CUSTODIAL FUNDS - IN ADDITION TO FUNDS FROM STUDENT ORGANIZATIONS, THE COLLEGE MAINTAINS A GENCY FUNDS FOR VARIOUS PURPOSES INCLUDING FELLOWSHIPS FUNDED BY OUTSIDE FOUNDATIONS

_ _ _

Supplemental Information	
Return Reference	Explanation
Part V, Line 4	INTENDED USE OF ENDOWMENT FUNDS - OBERLIN COLLEGE'S ENDOWMENT SPENDING POLICY IS SET BY THE COLLEGE'S BOARD OF TRUSTEES THE BOARD OF TRUSTEES TAKES GREAT CARE IN DEVELOPING THE BOARD OBJECTIVES AND SPECIFIC SPENDING METHODOLOGY, GIVING CONSIDERATION TO A NUMBER OF FACT ORS, INCLUDING PRESERVATION OF THE COLLEGE'S ENDOWMENT FOR PERPETUITY, ECONOMIC CONDITIONS AND THE POSSIBLE IMPACT OF INFLATION AND DEFLATION, THE COLLEGE'S HISTORICAL TOTAL RETURN ON ENDOWMENT, THE EXPECTED TOTAL RETURNS AND THE RELATED INVESTMENT POLICIES AND TARGETED ALLOCATIONS TO ACHIEVE THE EXPECTED RETURNS, AND THE OTHER FINANCIAL RESOURCES OF THE COLLEGE THE BROAD OBJECTIVES OF THE ENDOWMENT SPENDING POLICY ARE TO INCREASE THE REAL VALUE OF THE ENDOWMENT, TO PROVIDE A DEPENDABLE STREAM OF CURRENT EARNINGS DISTRIBUTION FROM THE ENDOWMENT POOL TO THE COLLEGE, TO RELEASE EARNINGS AT A RATE SUSTAINABLE OVER THE LONG TERM, AND TO SEEK TO PROVIDE PREDICTABILITY AND STABILITY OF ENDOWMENT SPENDING ESSENTIAL FOR LONG-RANGE PLANNING

Supplemental Information	
Return Reference	Explanation
Part X, Line 2	FIN 48 (ASC 740) FOOTNOTE - THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(c)(3) THE COLLEGE GENERATES MINOR AMOUNTS OF UNRELATED BUSINESS INCOME, ANNUALLY FILES FORM 990-T AND PAYS TAXES ON SUCH INCOME THE COLLEGE RECOGNIZES THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICA L MERITS OF THE POSITION EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE COLLEGE, THE CONTINUED TAX-EXEMPT STATUS OF BONDS ISSUED BY THE COLLEGE AND VARIOUS POSITION NS RELATED TO POTENTIAL SOURCES OF UNRELATED TAXABLE INCOME THE COLLEGE BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AND, AS SUCH, DOES NOT HAVE ANY UNCERT AIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS AS OF JUNE 30, 2017, THE COLLEGE'S TAX YEARS FROM 2013 AND THEREAFTER REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, AS WELL AS VARIOUS STATE AND LOCAL TAXING AUTHORITIES

Supplemental Information Return Reference Explanation CHANGE IN INTEREST RATE SWAP LIABILITY 5,884,355 REVENUE OF AFFILIATES THAT WAS INCLUDED Part XI, Line 2d - Other Adjustments IN CONSOLIDATED FIN STMTS 3.829.976 RECLASS REDESIGNATED FUNDS TO EXPENSES -1,056.668

Supplemental Information	
Return Reference	Explanation
l ,	STUDENT FINANCIAL AID, WHICH WAS SHOWN AS A REDUCTION OF TUITION REVENUE ON FIN STMTS BUT AS AN EXPENSE IN PART IX OF FORM 990 64,463,848

_ _ _

Supplemental Information Return Reference Explanation Part XII, Line 2d - Other POST-RETIREMENT BENEFIT OBLIGATION ADJUSTMENT -214,677 EXPENSES OF AFFILIATES THAT WERE I Adjustments NCLUDED IN CONSOLIDATED FIN STMTS 5.428,773 NONRECURRING BOND DEFEASANCE CHARGE 759.358

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b - Other Adjustments	STUDENT FINANCIAL AID, WHICH WAS SHOWN AS A REDUCTION OF TUITION REVENUE ON FIN STMTS BUT AS AN EXPENSE IN PART IX OF FORM 990 64,463,848 RECLASS REDESIGNATED FUNDS TO EXPENSES 1

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493134049988 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **Employer identification number** OBERLIN COLLEGE 34-0714363 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2016)

Schedule E (Form 990 or 990EZ) (2016)	Page 2					
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)						
Return Reference	Explanation					
Schedule E, Part I, Line 3	THE COLLEGE PUBLICIZES ITS RACIALLY NONDISCRIMINATORY POLICY THROUGH NEWSPAPER ADVERTISING, THE COLLEGE COURSE CATALOG, THE STUDENT REGULATIONS, POLICIES AND PROCEDURES PUBLICATION, AND EMPLOYEE HANDBOOKS THE COLLEGE FOLLOWS A VOLUNTARY AFFIRMATIVE ACTION PLAN					
Schedule E, Part I, Line 6	FINANCIAL AID FROM A GOVERNMENTAL AGENCY - OBERLIN COLLEGE PARTICIPATES IN VARIOUS STUDENT FINANCIAL AID PROGRAMS FROM THE U S DEPARTMENT OF EDUCATION, INCLUDING THE FOLLOWING PROGRAMS PELL GRANTS, SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS, PERKINS LOANS, AND COLLEGE WORK-STUDY PROGRAMS					
	Schedule E (Form 990 or 990-EZ) (2016					

efile GRAPHIC print	- DO NOT PI	ROCESS	As Filed Data -	a - DLN: 93493134049988			
SCHEDULE F (Form 990)	State	ment of A	Activities (Outside the Uni	OMB No 1545-0047		
(► Complete	e if the organizatio Part IV, line	2016			
Department of the Treasury Internal Revenue Service	▶ Informati		ach to Form 990. ▶	See separate instructions. and its instructions is at <i>wi</i>	vw.irs.gov/form990.	Open to Public Inspection	
Name of the organization OBERLIN COLLEGE					Employer ide 34-0714363	ntification number	
	nformation o Part IV, line 1		Outside the U	Inited States. Comple	te if the organization a	answered "Yes" to	
other assistance, to award the grant For grantmakers outside the United	the grantees' e ts or assistance Describe in P States	ligibility for the? Part V the orga	ne grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria used use of its grants and ot	✓ Yes □ No ther assistance	
3 Activites per Region (a) Region	(The following	(b) Number of offices in the region	(c) Number of employees, agents, and independent	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is a program service, describe specific type of	a (f) Total expenditures for and investments in region	
(1) See Add'l Data				region)			
(2)							
(4)							
(5)							
3a Sub-total b Total from continuat Part I		(0 4			336,452,858 633,913	
c Totals (add lines 3a		the Instruction	s for Form 990	Cat	No 50082W Sched u	337,086,771 sle F (Form 990) 2016	

(11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash (book, FMV, assistance assistance appraisal, other)

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

(1) See Add'l Data (2)

(3) (4)

(5) (6)

(7)

(8) (9) (10)

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 Pry	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

scriedule F (Form 990) 2016 Page 5
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return Reference	Explanation e

Additional Data

Europe (Including Iceland &

North America - Canada and

Mexico, but not the United

Austria, Belgium

States

Greenland) - Albania, Andorra,

Software ID: Software Version:

EIN: 34-0714363

Name: OBERLIN COLLEGE

19,175,938

502,451

Form 990 Schedule F Part I - Activities Outside The United States

0

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	0	INVESTMENTS		312,355,803

2 INVESTMENTS

0 INVESTMENTS

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS	261,027			
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS	747,586			
Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	0	2	1	STUDY ABROAD PROGRAMS	3,248,875			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
Middle East and North Africa - Algeria, Bahrain, Djibouti, Egypt,	0	0		STUDY ABROAD PROGRAMS	52,039			
North America - Canada and Mexico, but not the United States	0	0		STUDY ABROAD PROGRAMS	109,139			
Russia and Neighboring States - Armenia, Azerbijan, Belarus,	0	0		STUDY ABROAD PROGRAMS	81,316			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
South America - Argentina, Bolivia, Brazil, Chile, Columbia, Ecuador,	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS	237,090			
South Asia - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal,	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS	101,564			
Sub-Saharan Africa - Angola, Benin, Botswana, Burkina Faso,	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS	213,943			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 133,515 CREDIT TO ACCT SCHOLARSHIPS Central America and the Carıbbean lAntiqua & Barbuda, Aruba, lBahamas, **SCHOLARSHIPS** 23 286.974 CREDIT TO ACCT East Asia and Ithe Pacific -Australia, Brunei, Burma, Cambodia,

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of (f) Amount of (q) Description of (h) Method of assistance of cash grant cash disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 1,633,162 CREDIT TO ACCT SCHOLARSHIPS 132 Europe (Including Iceland & Greenland) -Albania, Andorra. Austria, Belgiu SCHOLARSHIPS 42,693 CREDIT TO ACCT Middle East and North Africa -Algeria, Bahrain, Djibouti, Egypt,

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S								
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
	North America - Canada and Mexico, but not the United States	4	45,694	CREDIT TO ACCT	0			
	Russia and Neighboring States - Armenia, Azerbijan, Belarus,	1	5,000	CREDIT TO ACCT	0			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S											
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
	South America - Argentina, Bolivia, Brazil, Chile, Columbia, Ecuador,	9	86,901	CREDIT TO ACCT	0						
	South Asia - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal,	3	25,710	CREDIT TO ACCT	0						

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (d) Amount of (e) Manner of cash (g) Description of (h) Method of (b) Region (c)Number (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 109.314 CREDIT TO ACCT SCHOLARSHIPS Sub-Saharan Africa - Angola, lBenin, Botswana. Burkina Faso,

Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 . Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 . Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	efile GRAPHIC print - Do	O NOT PROCESS	As Filed Data -					DLN: 93493134049	988
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Co	Governments mplete if the organiza	and Individuals tion answered "Yes," o Attach to Form	s in the Unite on Form 990, Part IV 990.	d States , line 21 or 22.		2016 Open to Public Inspection	
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?							' '		
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?							34-07143	363	
(a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (book, FMV, appraisal, other) (f) Method of valuation (book, FMV, appraisal, other) (h) Purpose of grant or assistance or assistance (h) Purpose of grant or assistance or assis	the selection criteria uses Describe in Part IV the or Part II Grants and Othe	d to award the grants rganization's procedur r Assistance to Dom	or assistance? es for monitoring the us estic Organizations ar	e of grant funds in the Un of Domestic Governme	ited States				□ No
OBERLIN EARLY CHILDHOOD CENTER 317 E COLLEGE ST	(a) Name and address of organization	·	(c) IRC section	(d) Amount of cash	cash	(book, FMV, appraisal,			ant
	ÖBERLIN EARLY CHILDHOOD CENTER 317 E COLLEGE ST		501(c)(3)	38,000		FMV		GENERAL GRANT	
(2) OBERLIN CITY SCHOOLS 153 N MAIN ST OBERLIN, OH 44074 GREEN EDGE GRANT FOR SUSTAINABILIT PROJECTS \$7,524, GENERAL PURPOSES \$2,000	153 N MAIN ST	34-6002072	115	9,524		FMV		FOR SUSTAINABILI PROJECTS \$7,524 GENERAL PURPOSE	ITY
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3 Enter total number of oth	her organizations listed	d in the line 1 table						0

Schedule I (Form 990) 2016						Page 2		
Part III Grants and Other A	Assistance to	Domestic Individu	ials. Complete if the orga	inization answered "Yes"	on Form 990, Part IV, line 22			
(a) Type of grant or assi		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance		
(1) SCHOLARSHIPS		2710	62,094,885	С				
(2) LAUNCH U ENTREPRENEURI	IAL GRANTS	3	45,000	0	J			
(2)				<u> </u>				
(3)								
(4)								
(5)								
(6)				İ				
(7)								
Part IV Supplementa	al Information	on. Provide the inf	formation required in [Part I, line 2, Part III,	, column (b), and any other a	additional information.		
Return Reference	Explanation	on						
Part I, Line 2	PURPOSE BY ENTREPREN THE GRANTS	MONITORING USE OF GRANT FUNDS - THE COLLEGE ENSURES THAT ITS GRANTS OF STUDENT FINANCIAL AID ARE USED FOR THE INTENDED EDUCATIONAL PURPOSE BY APPLYING THE AWARDS DIRECTLY TO THE STUDENTS' TUITION BALANCES INSTEAD OF ISSUING CHECKS THE COLLEGE ALSO MAKES ENTREPRENEURIAL AND ENVIRONMENTAL GRANTS THROUGH ITS LAUNCH U PROGRAM AND GREEN EDGE FUND POTENTIAL GRANTEES SUBMIT APPLICATIONS FOR THE GRANTS, AND AFTER A RIGOROUS REVIEW PROCESS, GRANTS ARE AWARDED GRANTEES ARE REQUIRED TO SUBMIT REPORTS WHICH INDICATE HOW THE GRANT FUNDS WERE SPENT						

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

OMB No 1545-0047

DLN: 93493134049988

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

Employer identification number Name of the organization OBERLIN COLLEGE 34-0714363

Pa	rt I Questions Regarding Compensatio	n	54 0714303			
					Yes	No
1 a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	□ First-class or charter travel	Ľ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply				
	Compensation committee	Ľ	Written employment contract			
	Independent compensation consultant	Ŀ	Compensation survey or study			
	Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization	, Part VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	pased coi	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations mu	ıst complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6 a		Νo
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III					
_				8		No
9	If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?	ne rebutt	able presumption procedure described in Regulations	9		

Schedule J (Form 990) 2015	Page 2								
Part III Officers, Directors	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.								
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual									
(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990		

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Page 3 Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Part I. Line 1a EXPLANATION OF BENEFITS - THE COLLEGE REQUIRES ITS PRESIDENT, MARVIN KRISLOV, AND ITS DEAN OF STUDENTS, MEREDITH L

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 34-0714363

Name: OBERLIN COLLEGE

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
(A) Name and Title		(B) Breakdown of (i) Base	f W-2 and/or 1099-MIS (ii) Bonus &	SC compensation (iii) Other	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred	
		Compensation	incentive compensation	reportable compensation	·			on prior Form 990	
1MARVIN KRISLOV PRESIDENT	(1)	483,403	500	0	39,750	29,303	552,956	0	
	(11)	0	0	0	0			0	
1JAINEN THAYER CHIEF INVESTMENT OFFICER	(1)	409,623	187,202	0	29,813	17,183	643,821	0	
	(11)	0	0	0	0		-	0	
2MICHAEL L FRANDSEN VP FOR FINANCE	(1)	260,341	0	0	33,125	40,103	333,569	0	
VP FOR FINANCE	(11)	0	0	0	0			0	
3WILLIAM E BARLOW	(1)	266,016	50,000	0	39,750	863	356,629	0	
VP OF DEVEL /ALUMNI AFFAIRS	(11)	0	0	0	0			0	
4TIMOTHY E ELGREN	(1)	219,866	0	0	34,497	17,183	271,546	0	
DEAN OF ARTS & SCIENCES	(11)	0	0	0	0			0	
5ANDREA E KALYN	(1)	234,627	0	0	30,500	11,183	276,310	0	
DEAN OF CONSERVATORY	(11)	0	0	0	0			0	
6SANDHYA S IYER	(1)	210,202	10,000	0	23,297	17,183	260,682	0	
VP, GENERAL COUNSEL & SECY	(11)	0	0	0	0			0	
7MARK R BATES	(1)	195,454	0	6,274	29,206	23,761	254,695	0	
ASSOC VP FOR FINANCE	(11)	0	0	0,274	29,200	23,761	234,093	0	
8MARY JO DIEKMAN	(1)	120,248	0		15 265	0	150.061		
ASSOC VP FOR FINANCE	(11)	0	0	0	15,265 0	23,448	158,961	0	
9MARCIA E MILLER	(1)	227,794	10,535	0	32,022	6,383	276,734	0	
DIRECTOR OF INVESTMENTS	(11)	0	10,333	0	0			0	
10DEBRA J CHERMONTE	(1)	189,863			20.020	0	0		
DEAN OF ADMISSIONS & FIN AID	(11)	0	0	0	28,838 0	6,351 	225,052	0	
11MEREDITH L RAIMONDO	(1)	145,597			40.000	0	0		
INTERIM VP/DEAN STUDENT LIFE & SVCS	(11)	143,337	5,000 0	0	19,208	6,158 	175,963 	0	
12HARRY N HIRSCH	(.)	200 704				0	0		
PROFESSOR	(I) (II)	200,794 0	0	0	30,832	6,383 	238,009	0	
ARCHAGON B MORRES						0	0		
13CLAYTON R KOPPES PROFESSOR	(I) (II)	199,136 0	0	0	30,327	6,331	235,794	0	
			0	, and the second	ŭ	0	0		
14MICHAEL M NOLAN ASSOC VP DEVEL/DIR PRINC GIFT	(I) (II)	184,830	0	0	28,028	6,327	219,185	0	
	(,	0	U	U	U	0	0	U	
15STEVEN F WOJTAL PROFESSOR	(ı)	193,076	0	0	29,979	40,097	263,152	0	
	(11)	U	0	0	0	- 0	- 0	0	
16JOHN E BUCHER CHIEF TECHNOLOGY OFFICER	(1)	181,570	0	0	28,250	11,134	220,954	0	
	(11)	0	0	0	0	0	0	0	

efi	ile GRAPHIC print - DO NO	T PROCESS As	Filed Data -									DLN:	93493	13404	19988
(Fo	hedule K orm 990)		e organization ans explanations	Information o wered "Yes" to Form , and any additional Attach to Form 99	990, Part information	[V, line	24a. Provi		criptions,			2	201		
	artment of the Treasury mal Revenue Service	▶Informatio		(Form 990) and its		s is at <u>u</u>	vww.irs.go	v/forn	<u>1990</u> .				en to f Inspec		
	e of the organization RLIN COLLEGE									Emplo	yer ıden	tıficatıo	n numb	er	
										34-07	14363				
P	art I Bond Issues	T	I	T			T			1					
	(a) Issuer name	me (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Def		efeased	eased (h) On behalf of issuer		(i) Pool financing								
										Yes	No	Yes	No	Yes	No
A	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6846974	67756AP55	10-01-2009	78,	715,883	SEE PART	/I			X		X		X
В	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6846974	67756DBZ8	09-12-2013	55,0	592,997	SEE PART	/I			Х		Х		Х
С	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6849674	67756BZU7	09-16-2014	53,	360,000	SEE PART	/I			X		Х		Х
D	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6849674	67756DNB8	04-12-2017	43,:	220,316	SEE PART	E PART VI			Х		Х		Х
Pa	rt III Proceeds						<u> </u>				<u> </u>	<u> </u>	<u> </u>	<u> </u>	
1	Amount of bonds retired					A		В		C	:			D	
	Amount of bonds legally defea														
3	Total proceeds of issue					78,715	883		55,699,573		53,860	000		43	239,199
4	Gross proceeds in reserve fund					70,713	,,003		33,033,373		33,000	,000		∃ J,.	
<u>.</u>	Capitalized interest from proce														
6	Proceeds in refunding escrows				78,007,350 40,106,763				53,660,000			17,424,343			
7	Issuance costs from proceeds				684,258				,	,					
8	Credit enhancement from proc	ceeds					<i>,</i>								
9	Working capital expenditures f	rom proceeds				24	4,275 419,058			200,000					
10	Capital expenditures from prod	ceeds					15,173,751								
11	Other spent proceeds														
12	Other unspent proceeds													25,	314,856
13	Year of substantial completion				21	009		201	.5	20	14				
					Yes	No	Y	es	No	Yes	No		Yes		No
14	Were the bonds issued as part	of a current refunding	ıssue?		Х		>	(Х					X
15	Were the bonds issued as part	of an advance refundi	ng issue?			Х			Х		X		Χ		
16	Has the final allocation of proc	eeds been made?			Х		>	(Х					X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?						>	(Х			Х		
Pa	rt IIII Private Business U	lse													
					Yes	A No	, Y	B	No	Yes	: No		Yes	D	No
1	Was the organization a partne	r ın a partnership, or a	member of an LLC,	which owned property	162			-3		162			162		
	financed by tax-exempt bonds	?	<u> </u>			×			Х		X				X
2	Are there any lease arrangeme property?			e of bond-financed		X			Х		X				X
For	Paperwork Reduction Act Not			-	Ca	t No 50)193F				S	chedul	e K (Fo	rm 990)) 2016

6

Part IV

c

Χ

No

Χ

Х

Χ

Χ

Χ

Page 2

D

C

Х

Х

Χ

Yes

Χ

Schedule K (Form 990) 2016

D

Х

No

Χ

Х

Х

Χ

C

Х

Χ

Χ

No

Χ

Χ

Χ

Х

Χ

В

Yes

Χ

Χ

Α

No

Х

Χ

Х

Х

Х

Yes

Χ

Χ

Х

Yes

Χ

Х

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

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

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

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

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

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

Was the hedge superintegrated? Was the hedge terminated?

Arbitrage

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

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

Χ

		Yes	No
а	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х

Χ

Page 3

No

Х

D

Yes

Х

No

Х

Х

Χ

Χ

Part V

Schedule K (Form 990) 2016

period?

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

the GIC satisfied? _ _ . . .

requirements of section 148? . . .

		A		В		c		<u> D</u>	
		Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirement voluntary closing agreei applicable regulations?	tablished written procedures to ensure that violations of s are timely identified and corrected through the ment program if self-remediation is not available under	х		Х		X		Х	
Part VI Supplemen	ital Information. Provide additional information f	or responses	to questions	on Schedule	K (see instri	uctions).			
Return Reference	Return Reference Explanation								
Date Rebate Computation Performed	Issuer Name OHIO HIGHER EDUCATIONAL FACILITY CO	OMMISSION D	ate the Rebate	Computation v	vas Performed				

Return Reference	Explanation
	EDUCATIONAL FACILITIES, INCLUDES REFUNDING OF SERIES 1999 (2-1-1999), SERIES 2005 (12-14-2005) AND SERIES 2006 (1-12-2006)

Return Reference	Explanation
PART I, ROW B, COLUMN F - DESCRIPTION OF PURPOSE	EDUCATIONAL FACILITIES, INCLUDES REFUNDING OF SERIES 2003 (8-26-2003)

Return Reference	Explanation
PART I, ROW C, COLUMN F -	EDUCATIONAL FACILITIES, INCLUDES REFUNDING OF SERIES 2008 (4-18-2008) AND A PORTION OF SERIES 2009
DESCRIPTION OF PURPOSE	(10-1-2009)

Return Reference	Explanation						
PART I, ROW D, COLUMN F - DESCRIPTION OF PURPOSE	EDUCATIONAL FACILITIES, INCLUDES PARTIAL ADVANCE REFUNDING OF SERIES 2009 (10-1-2009)						

Return Reference	Explanation									
	THE BONDS OF THESE ISSUES IDENTIFIED IN PART I, ROWS A AND C, ARE TREATED AS PART OF TWO SEPARATE ISSUES PURSUANT TO, AND TO THE EXTENT SET FORTH IN, TREASURY REGULATION SECTION 1 150-1(c)(3)									

efile GRAP	HIC pri	nt - DO NO	T PROCES	S A	s Fil	ed Data -					DL	.N: 93	4931	340	49988	
Schedule L (Form 990 or 990-EZ)			Transactions with Interested Persons Complete if the organization answered						าร	OMB No 1545-					5-0047	
,			"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ.							Зс,			20	1	6	
										201				U		
Department of the Treasury				out Sch	hedule L (Form 990 or 990-EZ) and its instruc www.irs.gov/form990.				ructio	ns is	at	(Open to Public			
Internal Revenue Service Name of the organization										Inspection Employer identification number						
OBERLIN COLL										-	4363					
								501(c)(29) o								
			the organization answered "Yes le of disqualified person			on Form 990, Part IV, line 25a or 25b, or Form 99 (b) Relationship between disqualified person and							(4	\ Cor	rected?	
1 (a) Name		e or disquaimed person			organization					(c) Description of transaction			(d) Corrected? Yes No			
									_							
									+							
Part II Loans to and Complete if the reported an am		o and/or I of the organ an amount o Relationship	or From Interested organization answered "Yount on Form 990, Part X, iship of loan of loan (d) I			sons. Form 990-EZ, , 6, or 22			(g)	(g) In (default? Approboa			6, or if the organization (h) (i)Written agreement? ard or mittee?			
				То		From			Yes	No	Yes	No	Yes		No	
									<u> </u>							
Total							\$									
						sted Person		line 27								
interested) Relationship erested perso organizat	ip between son and the		(c) Amount of assistance		(d) Type of assistance			ce	(e) Purpose of assistance					
(1)			Organization		8,000 MERIT AID			MERIT AID	ED			DUC AS	JC ASSIST			
					\dashv											
					+											
For Paperwork	Reduction	Act Notice.	see the Instru	ctions fo	or For	m 990 or 990-E	Z. Ca	I at No 50056A		Sc	hedule !	(Form	990 0	- 990-	EZ) 2016	

(a) name of meresica person	between interested person and the organization	transaction	(a) Description of transaction	organiz reven	f ation's
				Yes	No
(1) THOMAS COOPER	TRUSTEE		INV IN GMO AND EMERGING COUNTRY DEBT FUND III		No

Explanation

Schedule I (Form 990 or 990-FZ) 2016

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

Return Reference

Supplemental Information

Part V

DLN: 93493134049988 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number OBERLIN COLLEGE 34-0714363 Types of Property Part I (d) (a) (b) (c) Check if Number of contributions or Noncash contribution Method of determining items contributed applicable amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g Χ 526,500 APPRAISAL 1 Art—Works of art . 2 Art—Historical treasures 3 Art-Fractional interests Х 4,567 APPRAISAL Books and publications Clothing and household 1,446 COST/APPRAISAL Χ goods Cars and other vehicles Boats and planes . Intellectual property Χ 133 5,197,519 FMV Securities—Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . 14 Oualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial 17 Real estate—Other . 96,997 APPRAISAL 18 Collectibles . . Х 19 Food inventory . 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . 42,295 COST/APPRAISAL 25 Other ▶ (MUSICAL INSTRUMENTS) 26 Other ▶ (_ 27 Other ▶ (__ Other ► (_ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Nο b If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2016)	Page 2
I, column (b), t	Information. ormation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part the number of contributions, the number of items received, or a combination of both. Also complete additional information.
Return Reference	Explanation
Part I, Line 32b	USE OF THIRD PARTIES - THE COLLEGE UTILIZES A SECURITIES BROKER TO SELL DONATED SECURITIES THE FEES CHARGED BY THE BROKER ARE AT OR BELOW FAIR MARKET VALUE
	Schedule M (Form 990) (2016)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493134049988 OMB No 1545-0047 Supplemental Information to Form 990 or 990-EZ **SCHEDULE O 2016** (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Internal Revenue Service | Name of the organization Employer identification number OBERLIN COLLEGE 34-0714363 990 Schedule O, Supplemental Information Return Reference Explanation FORM 990, PART Oberlin College and Conservatory educate students for lives of intellectual, musical and a III, LINE 1 rtistic rigor and breadth, sustained inquiry, creativity and innovation, and leadership O ORGANIZATION'S berlin aims to prepare graduates with the knowledge, skills, and perspectives essential to MISSION confront complex issues and to create change and value in the world. Oberlin is committed to educational access and opportunity, embraces a diverse and inclusive residential learn ing environment defined by a free and respectful exchange of ideas, and shares an enduring commitment to a sustainable and just society. Core values derived from our mission includ e - Educational excellence The College of Arts and Sciences and Conservatory of Music ar e committed to educating students to achieve academic and musical excellence in an environ ment where equity, diversity, and inclusion are a central mode for achieving such excellen ce An Oberlin education prepares students for successful lives, careers, and leadership b y enabling them to see and develop meaningful connections and integration with all aspects of their Oberlin experience, and with the wider world. The Oberlin Conservatory provides professional education at the highest level, enabling students to reach their greatest pot ential both as musicians and individuals, and to attain skills and perspectives not only in music, but in other disciplinesthat will prepare them to become leaders - Diversity and community A diverse residential community is critical to fostering the spectrum of perspe ctives, interactions, and approaches upon which the most effective teaching and learning d epend - Stewardship Oberlin seeks life-long engagement with and wise stewardship of the institution by students, parents, faculty, staff, and alumni - Sustainability Oberlin re mains committed to leadership in environmental sustainability and education

Return Reference	Explanation
Form 990,	FORM 990 REVIEW - THE BOARD OF TRUSTEES DELEGATED THE TASK OF REVIEWING FORM 990 TO THE AU
Part VI,	DIT COMMITTEE, PURSUANT TO THE COLLEGE'S BY-LAWS AND APPROVED VIA A VOTE OF THE ENTIRE BOA
Section B,	RD AN ELECTRONIC DRAFT COPY OF FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE IN ADVANCE OF
line 11b	TS MEETING ON MAY 2, 2018, FOR REVIEW FOLLOWING THE REVIEW WITH THE OUTSIDE PUBLIC ACCO
	UNTING FIRM, THE AUDIT COMMITTEE APPROVED FORM 990

990 Schedule O, Supplemental Information Return Explanation

Reference	
Form 990,	MONITORING AND ENFORCEMENT OF CONFLICT POLICY - ALL OFFICERS, TRUSTEES, DIRECTORS, AND KEY
Part VI,	EMPLOYEES ARE REQUIRED TO DISCLOSE AT LEAST ANNUALLY, AND WITHIN THIRTY DAYS AFTER A MATE
Section B,	RIAL CHANGE, ANY RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES THAT THEY BELIEVE COULD CONTRI
line 12c	BUTE TO A CONFLICT OF INTEREST, VIA A DISCLOSURE FORM THAT IS CIRCULATED, ALONG WITH THE C
	OLLEGE'S CONFLICT OF INTEREST POLICY, TO ALL SUCH INDIVIDUALS THE GENERAL COUNSEL AND SEC
	RETARY OF THE COLLEGE REVIEWS AND ANALYZES ANY CONFLICTS AND MAINTAINS COPIES OF DISCLOSUR
	E STATEMENTS VIOLATIONS OF THE CONFLICT OF INTEREST POLICY ARE COMMUNICATED TO THE CHAIR
	OF THE AUDIT COMMITTEE AND THE CONTROLLER OF THE COLLEGE, INVESTIGATED BY THE COLLEGE, AND
	PROMPTLY CORRECTED, INCLUDING, WHERE APPLICABLE, DISCIPLINARY ACTION, UP TO THE INDIVIDUA
	L'S REMOVAL FROM HIS OR HER POSITION

Form 990, Part VI, Section B, Iine 15 COMPENSATION REVIEW AND APPROVAL - PURSUANT TO THE COLLEGE'S BY-LAWS, APPROVED VIA A VOTE OF THE FULL BOARD, THE COMPENSATION ARRANGEMENTS FOR THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES ARE APPROVED IN ADVANCE THROUGH THE FOLLOWING PROCESS THE COMPENSATION SUB COMMITTEE OF THE BOARD'S EXECUTIVE COMMITTEE ORGANIZES AND CONDUCTS THE REVIEW OF THE PRESIDENT AS THE COLLEGE'S CHIEF EXECUTIVE OFFICER, AND MAKES RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE AND THE BOARD CONCERNING THE COMPENSATION OF THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES THE COMPENSATION SUBCOMMITTEE CONSISTS OF TRUSTEES WITHOUT A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT IN FORMULATING ITS RECOMMENDATION S, THE COMPENSATION OF THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES AT SIMILARLY SITUATED PRIVATE COLLEGES AND UNIVERSITIES THE SUBCOMMITTEE PRESENTS TO THE EXECUTIVE COMMITTEE IT S WRITTEN REPORT AND RECOMMENDATIONS OR ACT OTHERWISE, AND THE EXECUTIVE COMMITTEE'S ACTION IS THE SUBCOMMITTEE OF THE SU	Return Reference	Explanation
THE APPROVED COMPENSATION DETERMINATION AND THE BASIS FOR THAT DETERMINATION IS SUBSEQUENT LY FILED AND PRESERVED WITH THE COLLEGE'S GENERAL COUNSEL AND SECRETARY	Part VI, Section B,	OF THE FULL BOARD, THE COMPENSATION ARRANGEMENTS FOR THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES ARE APPROVED IN ADVANCE THROUGH THE FOLLOWING PROCESS THE COMPENSATION SUB COMMITTEE OF THE BOARD'S EXECUTIVE COMMITTEE ORGANIZES AND CONDUCTS THE REVIEW OF THE PRESIDENT AS THE COLLEGE'S CHIEF EXECUTIVE OFFICER, AND MAKES RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE AND THE BOARD CONCERNING THE COMPENSATION OF THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES THE COMPENSATION SUBCOMMITTEE CONSISTS OF TRUSTEES WITHOUT A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT IN FORMULATING ITS RECOMMENDATION S, THE COMPENSATION OF THE PRESIDENT AND SELECT OFFICERS AND KEY EMPLOYEES AT SIMILARLY SITUATED PRIVATE COLLEGES AND UNIVERSITIES THE SUBCOMMITTEE PRESENTS TO THE EXECUTIVE COMMITTEE IT S WRITTEN REPORT AND RECOMMENDATIONS OR ACT OTHERWISE, AND THE EXECUTIVE COMMITTEE'S ACTION IS THE NORSENTED TO THE FULL BOARD IN EXECUTIVE SESSION FOR RATIFICATION A WRITTEN REPORT OF THE APPROVED COMPENSATION DETERMINATION AND THE BASIS FOR THAT DETERMINATION IS SUBSEQUENT

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Inc. 19

Return Reference	Explanation
FORM 990, PART VI, LINE 16B - JOINT VENTURE POLICY	THE COLLEGE'S PROCESS REGARDING MAKING INVESTMENTS, INITIATING CAPITAL PROJECTS, AND CREAT ING NEW SUBSIDIARIES REQUIRES THOROUGH BOARD REVIEW AND APPROVAL THE COLLEGE HAS REVIEWED WITH ITS BOARD ITS PARTICIPATION IN ITS EXISTING JOINT VENTURES AND ENSURED THAT THE COLL EGE'S TAX-EXEMPT STATUS HAS NOT BEEN COMPROMISED THE COLLEGE FORMED TWO FOR-PROFIT ENTITIES THAT ARE CURRENTLY TREATED AS "JOINT VENTURES" THESE FOR-PROFIT ENTITIES WERE FORMED TO FACILITATE THE QUALIFICATION FOR AND USE OF HISTORIC AND OTHER TAX CREDITS FOR THE COLLEGE'S APOLLO THEATER BUILDING RENOVATION APOLLO THEATER HOLDINGS, INC. IS 100% OWNED BY THE COLLEGE, AND APOLLO THEATER, LCC IS 98.8% OWNED BY THE COLLEGE AS SUCH, THE COLLEGE HAS SUFFICIENT CONTROL TO ENSURE THAT THE FOR-PROFIT ENTITIES OPERATE IN A MANNER THAT FURTHERS THE EXEMPT PURPOSES OF THE COLLEGE THE COLLEGE FORMALIZED IN A WRITTEN POLICY THESE EXISTING PROCEDURES AND PROCESSES REGARDING ITS PARTICIPATION IN JOINT VENTURES WITH FOR-PROFIT ENTITIES, AND THE POLICY WAS APPROVED BY THE BOARD IN JUNE OF 2013

Return Explanation

Form 990,	CHANGE IN INTEREST RATE SWAP LIABILITY 5,884,355 POST-RETIREMENT BENEFIT OBLIGATION ADJUS
Part XI, line	TMENT 214,677 NONRECURRING BOND DEFEASANCE CHARGE -759,358 ROUNDING ERROR 4

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

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

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

DLN: 93493134049988

Inspection

Schedule R (Form 990) 2016

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** OBERLIN COLLEGE 34-0714363 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) (c) (d) (e) (f) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Total income Primary activity End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (d) (f) (g) (c) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)COLLEGE PROPERTIES OF OBERLIN INC PROPERTY HOLDING ОН 501(c)(3) Line 12a, I OBERLIN COLLEGE Yes 173 WLORAIN ST OBERLIN, OH 44074 34-1658407 (2) COLLEGE PROPERTIES OF SOUTHWEST FLORIDA PROPERTY HOLDING ОН 501(c)(3) OBERLIN COLLEGE Line 12a, I Yes 173 WLORAIN ST OBERLIN, OH 44074 34-1568219 (3) COLLEGE PROPERTIES OF NORTHERN OHIO INC PROPERTY HOLDING ОН OBERLIN COLLEGE 501(c)(3) Line 12a, I Yes 173 WLORAIN ST OBERLIN, OH 44074 34-0960554 (4) OBERLIN SHANSI MEMORIAL ASSOCIATION **EDUCATIONAL** ОН 501(c)(3) Line 12c, III-FI No 173 WLORAIN ST N/A OBERLIN, OH 44074 34-0768350 (5) OBERLIN COLLEGE BROADCASTING INC BROADCASTING EDUCATION ОН 501(c)(3) Line 12a, I OBERLIN COLLEGE Yes 70 NPROFESSOR ST OBERLIN, OH 44074 26-3344852 Line 12a, I (6) THE FIVE COLLEGES OF OHIO EDUCATIONAL CONSORTIUM ОН 501(c)(3) No 209 CHASE AVENUE EATON CENTER N/A GAMBIER, OH 43022 31-1440434 (7) GREAT LAKES COLLEGES ASSOCIATION EDUCATIONAL CONSORTIUM ΜI 501(c)(3) Line 12a, I No 535 WEST WILLIAM N/A ANN ARBOR, MI 48103 38-1678376

Cat No 50135Y

hedule R (Form 990) 2016	Page
Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because in one or more related organizations treated as a partnership during the tax year.	t had

(d) Direct controlling entity Predominous income(re unrelat excluded tax un sections 514 POLLO HEATER OLDINGS INC	ominant ((related, slated, led from under ins 512-14)	Share of end- of-year assets	Yes	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	aging tner?	(k) Percentage ownership
POLLO EXCLUDED	<u> </u>	0 7,479,152				_	_	98 800 %
HEATER	-388,66i	0 7,479,152		No		Yes		98 800 %
								<u> </u>

Part IV Identification of Related Orbecause it had one or more rel					nswered "Yes	on Form 990	, Part IV, line 3	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(13) co	512(b) ntrolled ity?
(1)APOLLO THEATER HOLDINGS INC 173 W LORAIN ST OBERLIN, OH 44074 45-3181852	HOLDING CO	ОН	OBERLIN COLLEGE	С	-526,573	-226,533	100 000 %	Yes	NO
(2)CHARITABLE REMAINDER TRUSTS (32) 173 W LORAIN ST OBERLIN, OH 44074	CHARITABLE TRUST	ОН		T					No
(3)CHARITABLE REMAINDER TRUSTS (1) 173 W LORAIN ST OBERLIN, OH 44074	CHARITABLE TRUST	МА		T					No
(4)CHARITABLE REMAINDER TRUSTS (1) 173 W LORAIN ST OBERLIN, OH 44074	CHARITABLE TRUST	NY		Т					No
(5)CHARITABLE REMAINDER TRUSTS (1) 173 W LORAIN ST OBERLIN, OH 44074	CHARITABLE TRUST	WA		Т					No
						S	hedule R (Form	990) 20	016

Sched	ule R (Form 990) 2016		Pa	ge 3
Par	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 Du	ring the tax year, did the orgranization 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		No
b	Gift, grant, or capital contribution to related organization(s)	1 b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1р		No
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	

l Performance of services or membership or fundraising solicitations for related organization(s)				1l Yes
m Performance of services or membership or fundraising solicitations by related organization(s)				Lm No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Yes
o Sharing of paid employees with related organization(s)				lo No
p Reimbursement paid to related organization(s) for expenses				Lp No
q Reimbursement paid by related organization(s) for expenses				lq Yes
${f r}$ Other transfer of cash or property to related organization(s)				Lr No
s Other transfer of cash or property from related organization(s)			[1	Ls No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered r	elationships and trai	nsaction thresholds	_
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	int involved
(1)COLLEGE PROPERTIES OF NORTHERN OHIO	D	18,060,533	FMV	

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No	! ,		Yes	No		Yes	No	
										Schedul	e R (Form	1 990	0) 2016

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 34-0714363

Primary activity

PROPERTY HOLDING

PROPERTY HOLDING

PROPERTY HOLDING

EDUCATIONAL

BROADCASTING

IEDUCATION

IEDUCATIONAL

CONSORTIUM

EDUCATIONAL

CONSORTIUM

(d)

Exempt Code

section

501(c)(3)

501(c)(3)

501(c)(3)

501(c)(3)

501(c)(3)

501(c)(3)

501(c)(3)

(e)

Public charity

status

(if section 501(c)

(3))

Line 12a, I

Line 12a, I

Line 12a, I

Line 12c, III-FI

Line 12a, I

Line 12a, I

Line 12a, I

(g)

Section 512

(b)(13)

controlled entity?

No

No

No

No

Yes

Yes

Yes

Yes

Yes

Direct controlling

entity

OBERLIN COLLEGE

OBERLIN COLLEGE

OBERLIN COLLEGE

OBERLIN COLLEGE

N/A

N/A

IN/A

(c)

Legal domicile

(state

or foreign country)

ОН

ОН

ОН

ОН

ОН

ОН

ΜI

(1)

(1)

(4)

(5)

173 WLORAIN ST OBERLIN, OH 44074 34-1658407

173 WLORAIN ST OBERLIN, OH 44074 34-1568219 (2)

173 WLORAIN ST OBERLIN, OH 44074 34-0960554 (3)

173 WLORAIN ST OBERLIN, OH 44074 34-0768350

70 NPROFESSOR ST OBERLIN, OH 44074 26-3344852

GAMBIER, OH 43022 31-1440434 (6)

535 WEST WILLIAM ANN ARBOR, MI 48103

38-1678376

209 CHASE AVENUE EATON CENTER

Name: OBERLIN COLLEGE

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

Name, address, and EIN of related organization