PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE Dba SANTA CLARA UNIVERSITY

PUBLIC DISCLOSURE COPY

RETURN OF EXEMPT ORGANIZATION

PERIOD ENDED JUNE 30, 2019

			-	PUBLIC DISCLOSURE C							
	Ω	00		Drganization Exempt			OMB No. 1545-0047				
For	n H	90	Under section 501(c), 527	, or 4947(a)(1) of the Internal Revenu	ie Code (exc	cept private foundation	¹⁵⁾ 2018				
Depa	rtment o	of the Treasury	Do not enter	social security numbers on this form	n as it may b	be made public.	Open to Public				
		enue Service	Go to www	v.irs.gov/Form990 for instructions ar	nd the latest		Inspection				
AF	or th	e 2018 calend	lar year, or tax year beginn	ing JUL 1, 2018 an	d ending	<u>JUN 30, 2019</u>					
Bo	heck if pplicab	le.	of organization			D Employer identifie	cation number				
		PRES	SIDENT-BOARD OF								
	_Addre	ge SAN'I	A CLARA COLLEG								
Name change Doing business as SANTA CLARA UNIVERSITY 94-1156617											
Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number											
	Final return termii	0	EL CAMINO REAL			408-	554-4398				
_	ated	City or t		ntry, and ZIP or foreign postal code		G Gross receipts \$	978,635,335.				
	Amen return Applio	SANI		5053		H(a) Is this a group re					
	tion pendi	F Name a		er:MICHAEL ENGH, S.J.		for subordinates					
		SAME	AS C ABOVE			H(b) Are all subordinates in					
		empt status: [) ◀ (insert no.) _ 4947(a)(1) or 🔝 527	-	list. (see instructions)				
			SCU.EDU			H(c) Group exemptio					
	orm o art I		X Corporation Trust	Association Other	L Year	of formation: 1851 N	State of legal domicile: CA				
Га		Summary					7 7 7 7				
e	1	Briefly describ	e the organization's mission כווא לי	or most significant activities: SANT		LA UNIVERSII I FADNIN					
Governance											
/ern	2	Check this bo	-	on discontinued its operations or dispo			47				
ğ	3		ting members of the governi	of the governing body (Part VI, line 1b)			44				
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	45			alendar year 2018 (Part V, line 2a)			5415				
ties	6			cessary)			900				
Activities &				rt VIII, column (C), line 12			-3,755,267.				
Ă				om Form 990-T, line 38			0.				
						Prior Year	Current Year				
	8	Contributions	and grants (Part VIII, line 1h	)		49,809,440.	98,087,106.				
nue	9		ice revenue (Part VIII, line 2g			118,761,216.	436,458,721.				
Revenue	10	Investment in	come (Part VIII, column (A), I	ines 3, 4, and 7d)		55,750,912.	71,257,907.				
Ĕ	11	Other revenue	e (Part VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)		-828,181.	-831,980.				
	12	Total revenue	- add lines 8 through 11 (mu	ust equal Part VIII, column (A), line 12)		523,493,387.	604,971,754.				
	13	Grants and si	milar amounts paid (Part IX,	column (A), lines 1-3)	1	L03,289,049.	108,540,553.				
			to or for members (Part IX, c			0.	0.				
ŝ	15	Salaries, othe	r compensation, employee b	enefits (Part IX, column (A), lines 5-10)	2	223,153,832.	234,628,196.				
Expenses	16a	Professional f	fundraising fees (Part IX, colu			0.	0.				
xpe	b		ing expenses (Part IX, colum								
ш	''	•	es (Part IX, column (A), lines	, , , , , , , , , , , , , , , , , , , ,		47,104,631.	155,971,507.				
	18	-		ual Part IX, column (A), line 25)		473,547,512.	499,140,256.				
	19	Revenue less	expenses. Subtract line 18 f	rom line 12		49,945,875.	105,831,498.				
t Assets or d Balances					Be	eginning of Current Year	End of Year				
Sset	20				6	2241961916.	2349429622.				
Net A	21					5 <u>11,305,789</u> . 1630656127.	<u>614,601,912.</u> 1734827710.				
	22 art II			21 from line 20		1030030127.	1/3402//10.				
				his return, including accompanying schedul	ac and statem	ente and to the best of my	knowledge and belief it is				
				than officer) is based on all information of v			knowledge and bench, it is				
<u>uu</u> ,	COILC		PUBLIC DISCLOS	*							
Sig	n	Signatur	e of officer			Date					
Her		,	SICA MATSUMORI,	ASSISTANT TREASURE	R						
	-		print name and title								
		Print/Type pre	parer's name	Preparer's signature		Date Check	PTIN				
Paid			- PAGLIA	TRACY S. PAGLIA		)5/21/20 self-employ	P00366884				
Prep		Firm's name	MOSS ADAMS L			Firm's EIN ►	91-0189318				
Use	Only		s 3121 W MARCH								

Use Only	Firm's address	3121 W MARCH LN, STE 200	
		STOCKTON, CA 95219-2367	Phone no. 209-955-6100
May the IF	RS discuss this r	eturn with the preparer shown above? (see instructions)	X Yes
832001 12-3	1-18 LHA Fo	r Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990</b> (

LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	PRESIDENT-BOARD OF TRUSTEES		-
	n 990 (2018) SANTA CLARA COLLEGE art III Statement of Program Service Accomplishments	94-1156617	Page <b>2</b>
га			X
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were no		
	prior Form 990 or 990-EZ?	Yes	X No
-	If "Yes," describe these new services on Schedule O.		<b>v</b> .
3	Did the organization cease conducting, or make significant changes in how it conducts, any pr	ogram services? Yes	
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest proc	ram convision on macoured by expension	
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and al		Ч
	revenue, if any, for each program service reported.	locations to others, the total expenses, and	u
4a		553.) (Revenue \$ 436,458,7	721.)
	SANTA CLARA UNIVERSITY IS AN INSTITUTION OF HIGH		/
	DEGREES AT THE UNDERGRADUATE AND GRADUATE LEVEL	AND LAW DEGREES. THE	
	UNIVERSITY CONSISTS OF THE COLLEGE OF ARTS AND S	SCIENCES, THE SCHOOL C	)F
	ENGINEERING, THE LEAVEY SCHOOL OF BUSINESS, THE		ND
	COUNSELING PSYCHOLOGY, THE SCHOOL OF LAW, AND TH		
	THEOLOGY OF SANTA CLARA UNIVERSITY. CURRENT ENRO		
	STUDENTS CONSISTING OF 5,520 UNDERGRADUATE, 2,28		
	STUDENTS. IN 2019, THE UNIVERSITY AWARDED 2,135	DEGREES AT ALL ACADEM	110
	LEVELS.		
4b	(Code:) (Expenses \$ including grants of \$		)
		) (novenue o	/
4c	(Code:) (Expenses \$ including grants of \$		)
70		) (nevenue ¢	/
<u></u>	Other program services (Describe in Schedule O.)		
40	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Reven	10 <b>\$</b>	
4e			
		Form <b>9</b> 9	<b>90</b> (2018)
83200	02 12-31-18		,,)

11560521 146892 621509

4 2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

PRESIDENT-BOARD OF TRUSTEES 
 Form 990 (2018)
 SANTA
 CLARA
 COLLEGE

 Part IV
 Checklist of Required Schedules

94-1156617	Page 3
------------	--------

1         the organization described in sectors 501(c)(3) or 4947(q)(1) (there than a private foundation)?         1         X           2         the organization requiped in the omplete Schedule 9. Schedule 47 Combibutors?         2         X           3         X         2         the organization requiped in theory infect or indirect policitical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule 0, Part I         3         X           4         Sectors 501(q)(2) organizations. D dt the organization requipe in tobbying activities, or have a section 50(t)() exection in effect         4         X           5         Is the organization maxima and yobor advised that receives membership dues, assessments, or an annum to a dona constra on assement , holding easienents to preveave open space.         5         X           9         D dth eorganization maxima and annum to Part X, ince 21, historical trassures, or other similar assets? If "Yes," complete Schedule 0, Part II         6         X           9         D dth eorganization reserve or through a maximum to Part X, ince 21, historical trassures, or other similar assets? If "Yes," complete Schedule 0, Part II         8         X           10         D dth eorganization reserve or any of the following questions is 'Yes," then complete Schedule 0, Part V, IVI, VII, VI, VI, VII, VI, VI, VII, VI, V				Yes	No
2         Is the organization engage in direct o index to pill a campaign activities on bahal of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I         3         X           3         Deft be organization engage in direct o index to pill calcampaign activities on bahal of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II         3         X           4         Section 501(b)(a) equations. Did the organization engage in lookying activities, or have a section 501(b) election in effect         4         X           5         Is the organization a soction 501(b) election in effect         6         X           6         Ut the organization and valued funds or any similar funds or accounts? If "Yes," complete Schedule C, Part II         6         X           7         X         The organization martian collections of autoxis in soci funds or accounts? If "Yes," complete Schedule C, Part II         7         X           8         Did the organization martian collections of autoxis in soci funds or accounts? If "Yes," complete Schedule C, Part II         8         X           9         Did the organization martian collections of works of at, historical treasures, or other similar assets? If "Yes," complete Schedule C, Part II         8         X           9         Did the organization martian collections of works of at, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part X         1         X           9	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3         Det the organization engage in direct or indirect political campaign activities on bahalf of or in opposition to candidates for public offic? If "Yes," complete Schedule C, Part II         3         X           4         Section 501(QS) organizations. Did the organization ingage in lobbying activities, or have a section 501(h) election in effect of the organization match and the organization match and the offect QL (SC). Part III         4         X           5         Did the organization match and organization indice or any similar touchs or accountifie or which domors have the right to provide activice on the distribution or investment of amounts in such funds or any similar funds or account for the visit or which domors have the right to provide activice on the distribution or investment or amounts in such funds or account for the visit or annoxes or other similar assets? If "Yes," complete Schedule D, Part II         6         X           9         Did the organization mattine and accession of outside of art, line 10 manues, or outside account liability, serve as a custodian for amounts not listed in Part X, ine 12, for escore or custodial account liability, serve as a custodian for amounts on the organization, hold assets in temporarily restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part VI         9         X           10         X         10         X         10         X           11         If the organization report an amount for investments - order an classet in temporarily restricted endowments, Part X, ine 12 // Yes," complete Schedule D, Part VI         10         X           11         If the org		If "Yes," complete Schedule A			
public office? If 'Ves,' complete Schedule C, Part I         3         X           4 Section 50((kg) organizations. Dd the organization engage in lobbying activities, or have a section 50((k)) election in effect         4         X           5 Is the organization a section 501((k)) 501((	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4         Section 501(q)3 organizations. Did the organization agage in tobbying activities, or have a section 501(h) election in effect during the tax year? (h ⁺ Yes, ⁺ complete Schedule C, Part I)         4         X           5         is the organization a section 501(h), 501(c)(i), or 501(	3				
during the tax year? If Yes," complete Schedule C, Part II     4     X       5     Is the organization a section 50(16)(4), 50(16)(3), 50(16)(3), 50(16)(3), 50(16)(3), 50(16)(3), 50(16)(3), 50(16)(3), 50(16)(3), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16), 50(16),			3		<u> </u>
5         Is the organization a sector 501(c)(4, 001(c)(5, or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99197 in Yes, "complete Schedule C, Part II         5         X           6         Did the organization maximum and upper advised funds or any similar indus or accounts for which downshave the right to provide advice on the distribution or investment of amounts in such funds or accounts for which downshave the right to provide advice on the distribution or investment of amounts in such funds or accounts for which downshave the right to provide advice on the distribution or investment of amounts in such funds or account lability, service complete Schedule D, Part II         6         X           7         X         B         Did the organization maximum collections of works of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part II         7         X           10         Did the organization, finctly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? II "Yes," complete Schedule D, Part V         10         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, ime 167 II "Yes," complete Schedule D, Part V         11a         X           10         Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 II "Yes," complete Schedule D, Part X         11a         X <td< td=""><td>4</td><td></td><td></td><td></td><td></td></td<>	4				
similar amounts as defined in Revenue PROcedure 98-197 # Yeg,* complete Schedule C, Part II         5         X           6         Did the organization maintain any doorn advised funds or any semilar funds or accounts? If Yeg,* complete Schedule D, Part I         6         X           7         Did the organization necessor of hold a conservation easement, including seasements to preserve open space, the environment, historical treads or historica treatment, including seasements to preserve open space, the environment, historical treads or historical treasures, or other similar assets? If Yeg,* complete Schedule D, Part II         7         X           8         Did the organization report an amount in Part X, line 21, for sercew or custodal account liability, serve as a custodin for amounts not listed in Part X. or provide credit consinting, detit mangagement, credit repart, or debt negotiation services?         8         X           9         Did the organization, directly or through a related organization, hold assets in temporality restricted endowments, permanent endowments? If Yeg,* complete Schedule D, Part V         10         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yeg,* complete Schedule D, Part V         10         X           11         It he organization report an amount for investments - program related in Part X, line 10? If Yeg,* complete Schedule D, Part V         10         X           12         Did the organization report an amount for investments - program related in Part X, line 10? If Yeg,* complete Schedule D, Part X			4	<u>X</u>	
6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part II       6       X         7       Did the organization reside or fold a conservation assement, including easement, incl	5		_		37
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       X         9       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part IV       8       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       X         12       Did the organization report an amount for investments - organized and Part X, line 13? If "Yes," complete Schedule D, Part XI       11       X         13       X       III       X       11       X         14       Ub the organization report an amount for investments - organized and Part X, line 13? If "Yes," complete Schedule D, Part XIIIII       11       X	-		5		
7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization mathina collections of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       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, ine 21, with the organization save and any of the following questions as: "Yes," toomplete Schedule D, Part V       10       X         10       If the organization report an amount for investments- offer securities in Part X, line 107 If "Yes," complete Schedule D, Part VI       11       X         11       Did the organization report an amount for investments- organ related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "ys," complete Schedule D, Part VI       11       X         11       Did the organization report an amount for investments- program related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If "ys," complete Schedule D, Part VI       11       X         11       Did the or	6				v
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.       8       X         9       Did the organization report an amount In Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments? If "ves," complete Schedule D, Part V       10       X         11       If the organization report an amount for investments - other securities in Part X, line 10? If "ves," complete Schedule D, Part VI       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "ves," complete Schedule D, Part VII       11a       X         13       Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "ves," complete Schedule D, Part X       11a       X         14       Did the organization report an amount for investments or the tax year include a foothorte that addresses the organization separate in deceder and/offed financial statements for the tax year?       114	_		6		
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Pert III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         10       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part X, UII, VIII, VII, VX, or X as applicable.       11a       X         a       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI       11a       X         b       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         c       Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       11d       X         11d       X       Its bas of againzation negote an amount for the Pais N, line 25? If "Yes," complete Schedule D, Part X <t< td=""><td>1</td><td></td><td>_</td><td></td><td>v</td></t<>	1		_		v
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services?       9       X         9       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes," complete Schedule D, Part V       10       X         11       If the organization is nower to any of the following questions is Yes," then complete Schedule D, Part SV, VII, VIII, XV X as applicable.       9       X         20       Did the organization report an amount for inde, buildings, and equipment in Part X, line 127 If Yes," complete Schedule D, Part VII       11       X         4       Did the organization report an amount for investments - organs related in Part X, line 121 that is 5% or more of its total assets reported in Part X, line 167 If Yes," complete Schedule D, Part X VIII       11       X         5       Did the organization report an amount for investments - organs related in Part X, line 125 that is 5% or more of its total assets reported in Part X, line 167 If Yes," complete Schedule D, Part X       116       X         6       Did the organization report an amount for inder sabetin Part X, line 125 thi is 5% or more of its total assets reported in Part X, line 167 If Yes," complete Schedule D, Part X       116       X         11       Did the organiza	~				
9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, detit management, credit repair, or dobt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? (#'Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? (#'Yes,' complete Schedule D, Part V, VIII, VIII, VIII, VIII, VX, or X as applicable.       111       X         12       Did the organization report an amount for investments - other securities in Part X, line 12? (#'Yes,' complete Schedule D, Part V)       111       X         13       Did the organization report an amount for investments - other securities in Part X, line 13? that is 5% or more of its total assets reported in Part X, line 16? (#'Yes,' complete Schedule D, Part V)       111       X         14       Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? (#'Yes,' complete Schedule D, Part X)       111       X         14       Did the organization neither 15? (#'Yes,' complete Schedule D, Part X)       112       X         14       Did the organization neither 15? (#'Yes,' complete Schedule D, Part X)       112       X         14       Did the organizati	8			v	
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?       y       X         If "Yes," complete Schedule D, Part IV       10       X       10       X         If the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasiendowments? If "Yes," complete Schedule D, Part V       10       X         If the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11       11       X         D Dd the organization report an amount for investments - other asset in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11       X         D Dd the organization report an amount for investments - other asset in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11       X         D Dd the organization report an amount for other asset in Part X, line 25? If "Yes," complete Schedule D, Part X       114       X         D Dd the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       114       X         D Dd the organization asset agenzate or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       114       X         D Dd the o	•		8	<u></u>	
# 'Yes, ' complete Schedule D, Part IV       9       X         10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? # 'Yes, ' complete Schedule D, Part V       10       X         11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? # 'Yes, ' complete Schedule D, Part VI       11       X       11         2 Did the organization report an amount for investments - other securities in Part X, line 10? # 'Yes, ' complete Schedule D, Part VI       11       X       11         3 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? # 'Yes,' complete Schedule D, Part VI       11       X         11 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? # 'Yes,' complete Schedule D, Part X       11       X         11 Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X.       11       X         11 Did the organization report an amount for other labilities in Part X, line 25? # 'Yes,' complete Schedule D, Part X       11       X         12 Did the organization report an amount for other labilities in Part X, line 25? # 'Yes,' complete Schedule D, Part X       111       X         12 Did the organization report an amount for otherel labilities in Part X, line 25? # 'Yes,'	9				
10       Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? // "Yes," complete Schedule D, Part V       10       X         11       If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X       10       X         a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11c       X         c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         12       Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X       11d       X         12       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         12       Did the organization report an			0		x
endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes,'' then complete Schedule D, Parts VI, VIII, VIII, IX, or X       as applicable.         a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,'' complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 13? If 'Yes,'' complete Schedule D, Part VII       11b       X         c) Did the organization report an amount for investments - other securities in Part X, line 13? If 'Yes,'' complete Schedule D, Part VIII       11c       X         d) Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,'' complete Schedule D, Part VIII       11d       X         d) Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,'' complete Schedule D, Part X       11d       X         e) Did the organization report an amount for other liabilities in Part X, line 15? If 'Yes,'' complete Schedule D, Part X       11e       X         11d       X       11d       X       11d       X         12a       Did the organization induced in consolidated, independent audited financial statements for the tax year?       11f       X         12a	10		9		
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.       11       Image: Complete Schedule D, Part VI         2       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         4       Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VIII       11b       X         5       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         6       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         9       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         12       Did the organization aspearate, independent audited financial statements for the tax year? (If "Yes," complete Schedule D, Part X       11f       X         13       X       11d       X       11d       X       11d       X         14a       Did the organization aspearate, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Part X       11	10		10	x	
as applicable.       a) bid the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c) Did the organization report an amount for investments - orgonare related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d) Did the organization report an amount for ruber assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11e       X         e) Did the organization report an amount for ruber assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f) Did the organization sibility for uncertain tax positions under FIN 48 (ASC 740? If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization nearce activities outside the United States?       Did the organization as chool described in eaction 170(b)(1)(4)(i)? If "Yes," complete Schedule E       13a       X         14a       X       Did the organization nearce activities outside the United States?       13a       X <td>44</td> <td></td> <td></td> <td></td> <td></td>	44				
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes, * complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? // *Yes, * complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // *Yes, * complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part X       11c       X         e Did the organization report an amount for other lassets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part X       11e       X         e Did the organization report an amount for other lassets in Part X, line 15 // *Yes,* complete Schedule D, Part X       11e       X         12a Did the organization separate, independent audited financial statements for the tax year?       11f       X         13 Is the organization nation an office, employees, or agents outside of the United States?       12a       X         14a Did the organization nation an office, employees, or agents or other assistance to or for any foreign organization report on Part IX, line 3, more than \$5,000 of garsts or other assistance to or for any foreign organization report on Part IX, col	••				
Part V/       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16' // "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16' // "Yes," complete Schedule D, Part VII       11b       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16' // "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other liabilities in Part X, line 25' // "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       X       Na the organization aschool described in section 170(b)(1)(A)(ii)?       1'Yes," complete Schedule E       12a       X         13       Is the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals?       14a       X         14a       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or or or any foreign i	а				
b       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° // "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° // "Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° // "Yes," complete Schedule D, Part X       11c       X         d       Did the organization report an amount for other assets in Part X, line 25° // "Yes," complete Schedule D, Part X       11e       X         f       Did the organization is aparate or consolidated financial statements for the tax year?       // "Yes," complete       11e       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       // "Yes," complete       11e       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)?       // "Yes," complete Schedule E       13       X         14a       Did the organization aservice activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization aservice activities outside the United States, or aggregate grants or other assistance to o	u		11a	x	
assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other labilities in Part X, line 25? /f "Yes," complete Schedule D, Part X       11t       X         112       X       11t       X       11t       X         113       Did the organization's separate or consolidated financial statements for the tax year?       /f "Yes," complete Schedule D, Part X       11t       X         114       X       11d       X       11t       X       11t       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       /f "Yes," complete Schedule D, Part X       11t       X       11t       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       13t       X       14a       X       14a       X       14a       X       14a       X       14a       X         14a	b				
c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11e       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization otalin separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         14a       Did the organization answered "No" to line 12a, then completing Schedule D, Part X and XII soptional       11g       X         14a       Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business, investment, and program service activities outside the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or	2		11b	х	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11d       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11d       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         14       Did the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule D, Part X and XII is optional       12b       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gyrants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gyregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       17       X         14b       X       10d the organization report on Part IX,	с				
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11f       X         12a Did the organization obtain separate, independent audited financial statements for the tax year?       If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12a       X         13 Is the organization aschool described in section 170(bi(1)/A)(iii)? If "Yes," complete Schedule E       13a       X         14a Did the organization nantain an office, employees, or agents outside of the United States?       14a       X       14b       X         15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts I and IV       16       X         16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garges parte generation assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17 Did the organization report more than \$15,000			11c		х
Part X, line 16? /f "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X       11e       X         f Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? /f "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization included in consolidated financial statements for the tax year? /f "Yes," complete Schedule D, Part X and XII       12a       X         b Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization a school described in section 170(b)(1)/Wi0? /f "Yes," complete Schedule E       13       X         14a       Did the organization naixe and program service activities outside the United States?       14a       X         b Did the organization nave aggregate revenues or expenses of more than \$5,000 of grants or other assistance to or for any foreign organization?       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign inganization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? /f "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part	d				
e       Did the organization report an amount for other liabilities in Part X, line 25? // f "Yes," complete Schedule D, Part X       11e       X         f       Did the organization 's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," and if the organization aschool described in section 170(b(1)(4)(0)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X       14a       X         b       Did the organization report on Part IX, column (A), line 3, more than \$10,000 form grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued a \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garats or other assistance to or for any foreign organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete			11d		х
f       Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? /f "yes," complete Schedule D, Part X       11f       X         12a       Did the organization separate, independent audited financial statements for the tax year? // ff "yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       1ff "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization included in section 170(b)(1)(A)(II)? // ff "Yes," complete Schedule E       13       X         14a       Did the organization navwered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       11a       X         14a       Did the organization navwered "No" to line 12a, then completing Schedule E       13       X       14a       X         b       Did the organization navwered "No" to line 12a, then completing Schedule E       13       X       14a       X	е		11e	Х	
<ul> <li>12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII</li> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional</li> <li>13 Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</li> <li>14 Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</li> <li>13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li> <li>14 Did the organization naintain an office, employees, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report a total of more than \$10,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I</li> <li>17 Did the organization report more than \$15,000 of grants in gross income and contributions on Part VIII, lines for and \$2,000 of grants or other assistance to or part VIII, lines and the organization report more than \$15,000 of grants and graves income and contributions on Part VIII, lines and the organization report more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II</li> <li>19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>19 Did the organization report</li></ul>	f				
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         f       "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization aschool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       14a       X         b       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neport on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       17       X         16       X       17       X       18       X       17       X         18       Did the organiz		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       Image: the organization included in consolidated, independent audited financial statements for the tax year?         If       "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule F, Parts I and IV       Image: the organization report on Part IX, column (A), line 3, more than \$5,000 of garsts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       Image: the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       Image: the organization report and tal of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II       Image: the organization report more than \$15,	12a				
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1       18<		Schedule D, Parts XI and XII	12a		X
<ul> <li>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li> <li>14 Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II</li> <li>19 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization report more than \$5,000 of grants or other assistance to any advise organization or part IX, column (A), line 1? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization</li></ul>	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
<ul> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," and IX</li> <li>18 Zid the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b 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 H. Parts I and IV</li> </ul>		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> 14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> 17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       18       X         19       Did the organization orport more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       X       20a       X       20a       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
<ul> <li>investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000</li> <li>or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14b X</li> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV</li> <li>16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> <li>17 Did the organization report more than \$15,000 otal of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II</li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"</li> <li>19 X</li> <li>20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b</li> <li>21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II</li> </ul>	14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
<ul> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a 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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21 X</li> </ul>		investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       XX         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       20a       X			14b	Х	
<ul> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>19</i></li> <li>20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a 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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21 X</li> </ul>	15				
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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       20a       X			15	X	
17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       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       20       X	16				
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X			16	X	
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines         12       and 8a? If "Yes," complete Schedule G, Part II         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H         20a       X         20b       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	17				37
1c and 8a? // "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       19       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? // "Yes," complete Schedule I. Parts I and II       21       X		column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization operate one or more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	18				
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X			18	X	
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	19				v
b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	••				
21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X					<u> </u>
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			20b		<u> </u>
	21			v	
	0005-				0010

5 2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

SANTA CLARA COLLEGE

Form 990 (2018)

Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	X	37
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			v
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OFh		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes."			
		26	х	
27	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		-
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Х	
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		37	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
<b>0-</b>	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	200	х	
Par	Note. All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	л	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 921			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	Х	
832004	12-31-18	Form	990	(2018)
	6			

# 11560521 146892 621509

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

94-1156617 Page 4

94-11	56617	Page 5
-------	-------	--------

Form	990 (2018) SANTA CLARA COLLEGE 94-1156	617	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			-
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5415			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country:  EL SALVADOR			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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		X
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	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 1			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	4.6		v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		- -
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2018)

832005 12-31-18

SANTA CLARA COLLEGE

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

Form 990 (2018)

94-1156617 Page 6

X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

				,		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		47			
	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		44			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other				
	officer, director, trustee, or key employee?				2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervisior	n			
	of officers, directors, or trustees, or key employees to a management company or other person?				3		X
4				1	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		X
6	Did the organization have members or stockholders?				6		X
7a							
<ul> <li>of officers, directors, or trustees, or key employees to a management company or other person?</li> <li>4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</li> <li>5 Did the organization become aware during the year of a significant diversion of the organization's assets?</li> <li>6 Did the organization have members or stockholders?</li> </ul>			7a		x		
b							
					7b		x
8					1.5		
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 0.       Ib       Ib       44         Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees?       Ib       Ib       44         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?       Ib       Ib       44         Did the organization become aware during the year of a significant diversion of the organization's assets?       Did the organization have members or stockholders?       Ib       Ib       Ib       44         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?       Ib       Ib			8a	Х			
					8b	X	
					55		
9					9		x
ec					3		
	If there are material afferences in voting rights among members of the governing body, or if the governing bady delgated broad authority to an executive committee or similar committee, explain in Schedule 0.       In         In any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?       In       44         In dary officer, director, trustee, or key employees to a management company or other person?       In       44         In dary officer, directors, or trustees, or key employees to a management company or other person?       In       In       44         In dary officer, directors, or trustees, or key employees to a significant diversion of the organization have members or stockholders?       In       In       44         In due organization nake any significant changes to its governing documents since the prior Form 990 was filed?       In       In       In       44         In due organization nake members or stockholders?       In       In       In       In       In       In       44         In due organization nake members or stockholders?       In       In				Yes	No	
00	Did the examination have level chapters, branches, or efficience?			1	10a	162	No X
					IUa		
D		•			104		
					10b	Х	
		/ before	e filling the fo	orm?	11a	~	
						37	
2a					12a	X	
					12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," de	scribe				
				1	12c	X	
3					13	X	
4					14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by ind	ependent				
а	The organization's CEO, Executive Director, or top management official				15a	Х	
b	, , , ,				15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
l6a		nent wit	h a				
	taxable entity during the year?				16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its pa	rticipation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization'	s				
				<u></u>	16b		
ec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed <b>CA</b>						
8		d 990-T	(Section 5	01(c)(3)s	only) a	availat	ble
		in Sch	edule ()				
9			,	icy, and t	inanc	ial	
-							
20		ks and	records				
	JESSICA MATSUMORI - (408)554-4397			·			
	500 EL CAMINO REAL, SANTA CLARA, CA 95053						

PRESI	DENT-BC	DARD	OF	TRUSTEES
SANTA	CLARA	COLI	LEGE	5

Form 990 (2	2010/			COLLEGE	-	4 - 11
Part VII	Compensation	of Office	rs, Direct	ors, Trustees,	Key Employees, Highest Compensa	ted
	Employees, and	d Indeper	ndent Co	ntractors		

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

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

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

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

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

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

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

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

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

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

(A)	(B)	l			C)		out	(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
	hours per	(do not check more than one box, unless person is both an						compensation	compensation	amount of
	week					or/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dire	e			ted		organization	(W-2/1099-MISC)	from the
	related	stee (	ruste			pensa		(W-2/1099-MISC)		organization
	organizations	ial tru	onal t		ploye	com				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JON ABOITIZ	2.00	-	<u> </u>	Of	Αŝ	동코	오			
TRUSTEE (THRU 11/18)	2.00	x						0.	0.	0.
(2) ERICK BERRELLEZA, S.J.	2.00	21								
TRUSTEE	2.00	х						0.	0.	0.
(3) KRISTI M. BOWERS	2.00									
TRUSTEE		х						0.	0.	0.
(4) MARGARET (PEGGY) M. BRADSHAW	5.00									
VICE CHAIR		х		х				0.	0.	0.
(5) MATTHEW (MATT) E. CARNES, S.J.	2.00									
TRUSTEE		х						0.	0.	0.
(6) WILLIAM (BILL) S. CARTER	2.00									
TRUSTEE		Х						0.	0.	0.
(7) LOUIS (LOU) M. CASTRUCCIO	4.00									
TRUSTEE	3.00	Х						0.	0.	0.
(8) HOWARD S. CHARNEY	4.00									
TRUSTEE		Х						0.	0.	0.
(9) GERALD (JERRY) T. COBB, S.J.	2.00									
TRUSTEE		Х						0.	0.	0.
(10) WILLIAM DUFFY	2.00									
TRUSTEE		Х						0.	0.	0.
(11) MICHAEL ENGH, S.J.	70.00									
PRESIDENT, EX OFFICIO	3.00	Х		Х				0.	0.	0.
(12) ROBERT J. FINOCCHIO, JR.	4.00									
TRUSTEE		Х						0.	0.	0.
(13) HENRY J. GAGE, III	2.00									
TRUSTEE		Х						0.	0.	0.
(14) PAUL F. GENTZKOW	13.00									
TRUSTEE		Х		Х				0.	0.	0.
(15) PETER C. GOTCHER	2.00									
TRUSTEE		Х						0.	0.	0.
(16) REBECCA M. GUERRA	2.00									
TRUSTEE		х				<u> </u>		0.	0.	0.
(17) SALVADOR (SAL) O. GUTIERREZ	4.00									
TRUSTEE		Х						0.	0.	0.
832007 12-31-18										Form <b>990</b> (2018)

832007 12-31-18

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

94-1156617 Page 8

Form 990 (2018) SANTA CLA	ARA COLL	۶G	E						94-1:	156	517	Page <b>8</b>
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	ploy	ees,	anc	d Hig	ghes	st C	ompensated Employee	s (continued)			
(A) Name and title	<b>(B)</b> Average hours per week	box	not ch , unles cer an	Pos neck i is per	rson i	than o is both	n an	<b>(D)</b> Reportable compensation from	(E) Reportable compensatio from related	n	Est ame	<b>(F)</b> imated ount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fro orga and	ensation om the nization related nizations
(18) TIMOTHY (TIM) HALEY TRUSTEE	2.00	x						0.		ο.		0.
(19) RICHARD (RICH) D. HAUGHEY TRUSTEE	2.00	x						0.		0.		0.
(20) RICHARD (RICK) J. JUSTICE TRUSTEE	2.00	x						0.		0.		0.
(21) WILLIAM (BILL) P. LEAHY, S.J. TRUSTEE	1.00	x						0.		0.		0.
(22) HEIDI LEBARON LEUPP TRUSTEE	4.00	x						0.		0.		0.
(23) JOHN (JACK) C. LEWIS TREASURER	4.00	x		x				0.		0.		0.
(24) ARTHUR F. LIEBSCHER, S.J.	30.00			<u> </u>		$\left  \right $		0.				
RECTOR, EX OFFICIO (25) ROBERT LLOYD	2.00	X								0.		0.
TRUSTEE (26) RONNIE LOTT	1.00	X						0.		0.		0.
TRUSTEE 1b Sub-total	<u> </u>	X			L			0.		0.		0.
c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)								6,725,219. 6,725,219.		0.		1976. 1976.
2 Total number of individuals (including but no compensation from the organization ►							o re	eceived more than \$100,	000 of reportable	e		533
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for su	-				•	•		•			3	Yes No X
<ul> <li>For any individual listed on line 1a, is the su and related organizations greater than \$150</li> </ul>	m of reportabl	e co	mpe	nsa	tion	and	oth	ner compensation from th	ne organization		4	x
5 Did any person listed on line 1a receive or a	ccrue compen	Isati	on fr	om	any	unre	elate	ed organization or individ	lual for services			x
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	e J fo	or su	<u>ch i</u>	bers	son					5	
1 Complete this table for your five highest con the organization. Report compensation for t	-									oensat	ion fror	m
(A) Name and business				0				(B) Description of s		С	(C) ompen	
DEVCON CONSTRUCTION, INC. 690 GIBRALTAR DRIVE, MILP		A	95(	03	5			CONSTRUCTION		46	,832	,892.
BON APPETIT - SANTA CLARA 301 MARKET STREET, SANTA		CA	9!	50	53			FOOD SERVICES	5	16	,163	,532.
BUILD GROUP, INC 1210 COLEMAN AVE, SANTA C								CONSTRUCTION		11	<u>,362</u>	,449.
BLACH CONSTRUCTION COMPAN PLACE, SUITE 100, SAN JOS	E, CA 9	51	31					CONSTRUCTION		10	,521	,107.
FTG BUILDERS, INC, 2975 S 100, SANTA CLARA, CA 9505	4							CONSTRUCTION		7	<u>,680</u>	,037.
<ol> <li>Total number of independent contractors (ir \$100,000 of compensation from the organiz</li> </ol>	-	ot lin	nıted	to	thos 81		ted	above) who received mo	ore than			

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2018)

832008 12-31-18

SANTA CLARA COLLEGE

94-1156617

Part VII Section A. Officers, Directors, Tru		nplo	yee			lighe	est (		· ,	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours	(c	heck	Posi all t			ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per					a		from	from related	other
	week (list any	tor				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				ed em		(W-2/1099-MISC)	(112/1000 11100)	organization
	related	tee or	ustee			ensate		(		and related
	organizations	l trust	nal tru		lo yee	ompe				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	pul	Ins	Offi	Key	Hig	For			
(27) ELIZABETH (LIBBY) GATES MACPHEE	2.00									
TRUSTEE		Х						0.	0.	0
(28) JOSEPH M. MCSHANE, S.J.	2.00								•	
TRUSTEE		Х						0.	0.	0
(29) JEFFREY (JEFF) A. MILLER	8.00								•	
		Х						0.	0.	0
(30) KAPIL K. NANDA	2.00								•	^
		Х						0.	0.	0
(31) BRYAN NEIDER	2.00								0	•
	C 00	Х						0.	0.	0
(32) EDWARD (ED) A. PANELLI	6.00							•	0	•
		Х						0.	0.	0
(33) ELIZABETH (BETSY) S. RAFAEL	2.00							•	0	0
IRUSTEE	2 00	Х						0.	0.	0
(34) WILLEM (WIM) P. ROELANDTS	2.00	x						0	0	0
IRUSTEE	2.00	~						0.	0.	0
(35) STEPHEN C. SCHOTT TRUSTEE	2.00	x						0.	0.	0
(36) ROBERT H. SMITH	2.00	Δ						0.	0.	0
IRUSTEE	2.00	x						0.	0.	0
(37) TIMOTHY (TIM) SMITH	2.00	^						0.	0.	0
IRUSTEE	2.00	x						0.	0.	0
(38) JOHN A. SOBRATO	2.00	Δ						0.	0.	0
TRUSTEE	2.00	х						0.	0.	0
(39) JOHN M. SOBRATO	4.00	23								
CHAIRMAN		x						0.	0.	0
(40) LARRY W. SONSINI	2.00									
SECRETARY		х		х				0.	0.	0
(41) STEVEN (STEVE) J. SORDELLO	2.00									
TRUSTEE		х						0.	Ο.	0
(42) MARY STEVENS	2.00									
TRUSTEE		х						0.	0.	0
(43) GILBERT SUNGHERA, S.J.	2.00									
, TRUSTEE		х						0.	0.	0
(44) WILLIAM (BILL) E. TERRY	2.00									
TRUSTEE		х						0.	0.	0
(45) SUSAN VALERIOTE	2.00									
TRUSTEE		х						0.	0.	0
(46) GREGORY (GREG) VAUGHAN	1.00									
TRUSTEE		х						0.	Ο.	0

832201 04-01-18

Form 990

SANTA CLARA COLLEGE

X Individual trustee or director	Institutional trustee	all t	ition		Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
X Individual trustee or director	Institutional trustee	all t	that a	app		compensation from the organization	compensation from related organizations	amount of other compensation from the organization and related
X Individual trustee or director	Institutional trustee	Officer				from the organization	from related organizations	other compensation from the organization and related
x			Key employee	Highest com pensated em ployee	Former	the organization	organizations	compensation from the organization and related
x			Key employee	Highest compensated employe	Former	organization	U U	from the organization and related
x			Key em ployee	Highest com pen sated em	Former	-	(	organization and related
x			Key em ployee	Highest com pen sat	Former	· · · ·		
x			Key employee	Highest comp	Former			organizations
x			Key emp	Highest	Former			
x			Ke	Hig	Fo			
						•	•	•
x						0.	0.	0.
						0	0	•
-		<u>,</u>				0.	0.	0.
						220 450	0	<b>C1</b> 434
-		X				338,458.	0.	61,434.
	1 1					151 554	0	24 276
	-	Х				151,554.	0.	34,276.
							0	
		Х				548,034.	0.	59,211.
-		x				261 700	0	77 206
<u> </u>		Δ				264,780.	0.	77,206.
-		x				60 500	0	11 207
<u> </u>		^				68,523.	0.	11,387.
-		x				101 017	0.	52 636
		^				421,247.	0.	52,636.
1			x			484,641.	0.	55,549.
						101,011.		
1			x			445,996.	0.	69,849.
						11375500		
-			x			412,021.	0.	58,812.
						,•	•••	
1			x			311,763.	0.	49,852.
<u> </u>						,		
1			x			242,951.	0.	55,173.
						<b>/</b> = =		
1			x			293,975.	0.	65,341.
								<b>r</b>
1				х		352,622.	Ο.	78,596.
						-		
				х		382,350.	Ο.	47,525.
				Х		373,998.	0.	43,645.
1				Х		320,636.	0.	47,563.
╞				Х		757,565.	0.	102,656.
					Х	195,107.	0.	51,826.
					]			
		-			x		x 320,636. x 757,565.	x 320,636. 0. x 757,565. 0.

Form 990

PRESII	)ENT-BC	DARD	OF	TRUSTEES
SANTA	CLARA	COLI	EGI	2

94-115661
-----------

Form 990 SANTA CLA									94-115	6617
Part VII Section A. Officers, Directors, Tru		nplo I	yee			ligh	est (		, ,	<i>(</i> <b>_</b> )
(A) Name and title	<b>(B)</b> Average hours	Average Posi hours (check all t					ly)	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
67) S. ANDREW STARBIRD ORMER DEAN, LEAVEY SCHOOL OF BUSINE	40.00						x	248,292.	0.	56,620
68) ATOM YEE	40.00						x			
ORMER DEAN, COLLEGE OF ARTS & SCIEN							A	110,706.	0.	62,819
		-								
		-								
		-								
otal to Part VII, Section A, line 1c	1	<u> </u>	<u> </u>	I	<u> </u>	<u> </u>	L	6,725,219.	1	,141,976

832201 04-01-18

# PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

		2018) SANTA	A CLAR		RD OF TRU OLLEGE	01220		94-1156	617 Page
art V	/111								_
		Check if Schedule O cont	tains a res	ponse (	or note to any line	in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue exclud from tax unde sections 512 - 514
2 1	а	Federated campaigns		1a	50,292.				
	b	Membership dues		1b					
	с	Fundraising events		1c	2,033,672.				
5		Related organizations		1d	481,082.				
	е	Government grants (contribut	ions)	1e	1,503,692.				
0	f	All other contributions, gifts, gran	nts, and						
		similar amounts not included abo	ve	1f	94,018,368.				
	g	Noncash contributions included in lines	1a-1f: \$		4,655,767.				
0	h	Total. Add lines 1a-1f			····· •	98,087,106.			
					Business Code				
2	-	TUITION FEES			525990	376,423,229.	376,423,229.		
D	~	AUXILIARY ACTIVITIES			611710	43,859,666.	43,859,666.		
	•	PROGRAM FEES			611710	6,354,151.	6,354,151.		
2		FED GRANTS & CONTRACTS			900099	5,936,746.	5,936,746.		
	-	PROGRAM SALES INCOME			453000	3,414,103.	3,414,103.	470.000	
		All other program service reve			611710	470,826.		470,826.	
		Total. Add lines 2a-2f				436,458,721.			
3		Investment income (including other similar amounts)		<i>.</i>	►	19,155,332.		-4,455,080.	23,610,4
<ul> <li>4 Income from investment of tax-exempt bond</li> <li>5 Royalties</li> </ul>					50,000.			50,0	
5		Royanies				50,000.			50,0
6	~	Gross rents	(i) R	ear	(ii) Personal				
		Less: rental expenses							
		Rental income or (loss)							
		Net rental income or (loss)	-						
		Gross amount from sales of	(i) Secu		(ii) Other				
1	u	assets other than inventory	424,031						
	h	Less: cost or other basis		, .					
	~	and sales expenses	371,929	421.					
	c	Gain or (loss)	52,102						
		Net gain or (loss)	<u> </u>			52,102,575.		228,987.	51,873,58
8		Gross income from fundraisin including \$ 2,033	g events (	not		, , ,		, -	, ,
		contributions reported on line		•					
		Part IV, line 18		а	844,900.				
	b	Less: direct expenses							
		Net income or (loss) from fund			►	-889,260.			-889,20
		Gross income from gaming ad							
		Part IV, line 19							
	b	Less: direct expenses							
		Net income or (loss) from gam							
		Gross sales of inventory, less							
		and allowances		a					
	b	Less: cost of goods sold							
		Net income or (loss) from sale							
		Miscellaneous Revenu			Business Code				
11	а	OTHER REVENUE			900099	7,280.			7,28
	b								
	с								
	d	All other revenue							
		Total. Add lines 11a-11d				7,280.			
		Total revenue. See instructions				604,971,754.	435,987,895.	-3,755,267.	74,652,02

14

# PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Form 990 (2018) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

0000	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respor		this Part IX	(C)	(D)
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	Management and	(ط) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	245,723.	245,723.		
2	Grants and other assistance to domestic				
2		109 229 530	109 229 530		
		100,220,550.	108,228,530.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	66,300.	66,300.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ŭ	trustees, and key employees	5,465,948.	460,552.	4,455,985.	549,411.
•		5,105,510.	400,552.	4,455,505.	545,411.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	112,766.	112,766.		
7	Other salaries and wages	171,943,009.	149,693,421.	13,901,194.	8,348,394.
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	14.530.056.	12,576,933.	1,241,606.	711,517.
•		30 801 062	26,488,636.	2,859,676.	1,542,751.
9	Other employee benefits	$11 COE 2E^{4}$	<u>40,400,030</u>		$\frac{1, J \neq 4, / J \perp \bullet}{1, J \neq 4, / J \perp \bullet}$
10	Payroll taxes	11,685,354.	9,925,643.	1,175,856.	583,855.
11	Fees for services (non-employees):				
а	Management				
b	Legal	738,525.	57,409.	681,116.	
	Accounting	461,525.		461,525.	
	Lobbying	4,300.		4,300.	
	Professional fundraising services. See Part IV, line 17			1,0000	
e	-	3,531,452.	27,964.	3,498,488.	5,000.
t	Investment management fees	3,331,432.	27,904.	5,490,400.	5,000.
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)		17,547,446.	4,498,663.	1,271,321.
12	Advertising and promotion	2,409,974.	2,077,898.	138,009.	194,067.
13	Office expenses	7,030,894.	4,439,556.	1,987,495.	603,843.
14	Information technology				· · ·
15	Royalties	16 204 122	12,603,289.	3,675,918.	4,916.
16	Occupancy				
17	Travel	9,167,489.	7,881,909.	749,698.	535,882.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,429,738.	6,942,672.	1,784,752.	702,314.
20		15,962,303.	15,320,718.	641,585.	
	Payments to affiliates			,	
21		46,443,652.	43,121,329.	3,322,323.	
22	Depreciation, depletion, and amortization				01 704
23	Insurance	6,421,564.	5,045,308.	1,354,552.	21,704.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	REPAIR & MAINTENANCE	8,214,600.	7,013,451.	1,196,349.	4,800.
b	LIBRARY ACQUISITIONS	4,975,974.	4,975,974.	, ,	0.
u -	INDIRECT COSTS SPONSORE	533,060.	533,060.	0.	0.
C					
d	SUBSCRIPTIONS & PUBLICA	449,486.	362,450.	87,036.	
е	All other expenses	595,418.	124,101.	432,637.	38,680.
25	Total functional expenses. Add lines 1 through 24e	499,140,256.	435,873,038.	48,148,763.	15,118,455.
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)	1			
832010	0 12-31-18	15			Form <b>990</b> (2018)

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

# PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

_ar	990 (2 t X	2018) SANTA CLARA COL Balance Sheet	LEC	E		94-	1156617 Page 1
- <b>u</b> i		Check if Schedule O contains a response or note	to anv	line in this Part X			
		· · ·			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			84,672,507.	1	81,503,631.
	2	Savings and temporary cash investments			11,079,997.	2	71,921,070.
	3	Pledges and grants receivable, net			75,469,107.	3	80,790,266.
	4	Accounts receivable, net			6,132,991.	4	8,592,969.
	5	Loans and other receivables from current and form					
		trustees, key employees, and highest compensate	d em	oloyees. Complete			
		Part II of Schedule L			927,768.	5	460,831
	6	Loans and other receivables from other disqualifie	d per	sons (as defined under			
		section 4958(f)(1)), persons described in section 4					
		employers and sponsoring organizations of sectio					
Ŋ		employees' beneficiary organizations (see instr). C				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			854,745.	8	768,847
	9					9	
	10a	Land, buildings, and equipment: cost or other					
			10a	1375821116.			
	b	Less: accumulated depreciation	10b	414,037,148.	879,865,874.		961,783,968
	11	Investments - publicly traded securities			380,490,757.	11	452,873,949
	12	Investments - other securities. See Part IV, line 11			681,482,731.		641,071,272
	13	Investments - program-related. See Part IV, line 11	6,138,697.	13	4,862,210		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			114,846,742.	15	44,800,609
	16	Total assets. Add lines 1 through 15 (must equal			2241961916.	16	2349429622
	17	Accounts payable and accrued expenses			60,187,123.	17	66,182,228
	18	Grants payable				18	
	19	Deferred revenue		24,918,495.	19	28,599,838	
	20	Tax-exempt bond liabilities			352,812,047.	20	350,776,088
	21	Escrow or custodial account liability. Complete Pa			21		
s	22	Loans and other payables to current and former o					
Liabilities		key employees, highest compensated employees,					
abil		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelate			5,670,000.	23	
	24	Unsecured notes and loans payable to unrelated t	hird p	arties		24	
	25	Other liabilities (including federal income tax, paya	bles t	o related third			
		parties, and other liabilities not included on lines 1	7-24).	Complete Part X of			
		Schedule D			167,718,124.	25	169,043,758
	26	Total liabilities. Add lines 17 through 25			611,305,789.	26	614,601,912
		Organizations that follow SFAS 117 (ASC 958),	checl	k here 🕨 🚺 and			
ŝ		complete lines 27 through 29, and lines 33 and	34.				
nce	27	Unrestricted net assets			736,408,367.		746,513,324.
ala	28	Temporarily restricted net assets			592,183,102.		671,000,997.
d B	29	Permanently restricted net assets		<u></u> .	302,064,658.	29	317,313,389.
۲ <u>۲</u>		Organizations that do not follow SFAS 117 (ASC	C 958	), check here 🕨 📃			
P.		and complete lines 30 through 34.					
∋ts	30	Capital stock or trust principal, or current funds				30	
ığ	31	Paid-in or capital surplus, or land, building, or equi	pmer	t fund		31	
<u>s</u>	32	Retained earnings, endowment, accumulated inco	me c	r other funds		32	
et As		<b>e</b> ,	o, e				
Net Assets or Fund Balances	33	Total net assets or fund balances			1630656127. 2241961916.		<u>1734827710</u> 2349429622

832011 12-31-18

Form 390 (2018)       SANTA CLARA COLLEGE       94-1156617       Page 12         PartXI       Reconciliation of Net Assets       X         Check if Schedule O contains a response or note to any line in this Part XI       X       X         1       Total revenue (must equal Part VII, column (A), line 12)       1       604, 971, 754.         2       Total expenses (must equal Part X, column (A), line 25)       3       Revenue less expenses. Subtract line 2 from line 1       3       105, 831, 498.         4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))       4       1, 630, 655, 127.         5       Total expenses       5       -1, 012, 797.       6         6       0       5       -1, 012, 797.         7       7       8       8       9       -647, 118.         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647, 118.         9       Other changes in net assets or nucle bany line in this Part XII       -       -         1       Accounting method used to prepare the Form 990:       Cash       Accrual       Other         1       Accounting from a prior year or checked "Other," explain in Schedule O.       -       2a       X         1       Accounting from a prior yea		PRESIDENT-BOARD OF TRUSTEES					
Part XI       Reconciliation of Net Assets       X         Check if Schedule O contains a response or note to any line in this Part XI       X         1       Total revenue (must equal Part VII, column (A), line 12)       1       604,971,754.         2       499,140,256.       2       499,140,256.         3       105,831,498.       4       1,630,655,127.         5       Revenue less expenses Subtract line 2 from line 1       3       105,831,498.         4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))       4       1,630,655,127.         5       Net unrealized gains (losses) on investments       6       -1,012,797.         6       Donated services and use of facilities       7       8         7       Investment expenses       7       8         9       Other changes in net assets or fund balances (explain in Schedule O)       10       1,734,827,710.         Part XII       Financial Statements and Reporting       10       1,734,827,710.         Check if Schedule O contains a response or note to any line in this Part XII       1       Accounting method used to prepare the Form 990:       Cash X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash X Accrual       Other       2a       X	Form	990 (2018) SANTA CLARA COLLEGE	94	-115	5617	Pa	_{ge} 12
1       Total revenue (must equal Part VIII, column (A), line 12)       1       604,971,754.         2       Total expenses (must equal Part X, column (A), line 25)       2       499,140,2556.         2       A provide less expenses. Subtract line 2 from line 1       3       105,831,498.         4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))       4       1,630,656,127.         5       Net unrealized gains (losses) on investments       6       -1,012,797.         6       0       -1,012,797.         7       1       Nestment expenses       7         8       Prior period adjustments       6       -         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647,118.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       10       1,734,827,710.         7       2       Part XII       1       1,734,827,710.         9       Check if Schedule 0 contains a response or note to any line in this Part XII       1       1,734,827,710.         9       Check if Schedule 0 contains a response or note to any line in this Part XII       1       2         1       Accounting method used to prepare the Form 990:       Cash       X <th>Pa</th> <th>rt XI Reconciliation of Net Assets</th> <th></th> <th></th> <th></th> <th></th> <th></th>	Pa	rt XI Reconciliation of Net Assets					
2       Total expenses (must equal Part IX, column (A), line 25)       2       499,140,256.         3       Revenue less expenses. Subtract line 2 from line 1       3       105,831,498.         4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))       4       1,630,656,127.         5       -1,012,797.       Donated services and use of facilities       6       -1,012,797.         6       Donated services and use of facilities       6       -1,012,797.         7       Donated services and use of facilities       6       -1,012,797.         8       Prior period adjustments       8       9         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647,118.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       10       1,734,827,710.         Yets No         Yets No         Check if Schedule O contains a response or note to any line in this Part XII       ////////////////////////////////////		Check if Schedule O contains a response or note to any line in this Part XI					X
2       Total expenses (must equal Part IX, column (A), line 25)       2       499,140,256.         3       Revenue less expenses. Subtract line 2 from line 1       3       105,831,498.         4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))       4       1,630,656,127.         5       -1,012,797.       Donated services and use of facilities       6       -1,012,797.         6       Donated services and use of facilities       6       -1,012,797.         7       Donated services and use of facilities       6       -1,012,797.         8       Prior period adjustments       8       9         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647,118.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       10       1,734,827,710.         Yets No         Yets No         Check if Schedule O contains a response or note to any line in this Part XII       ////////////////////////////////////							
3       Revenue less expenses. Subtract line 2 from line 1 <ul> <li>a</li> <li>105,831,498.</li> </ul> 4         Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) <ul> <li>a</li> <li>105,831,498.</li> <li>4</li> <li>1,630,656,127.</li> <li>5</li> <li>-1,012,797.</li> <li>6</li> <li>-647,118.</li> <li>9</li> <li>-647,118.</li> <li>9</li> <li>-647,118.</li> <li>10</li> <li>1,734,827,710.</li> </ul> <li>Part XII Financial Statements and Reporting</li>	1	Total revenue (must equal Part VIII, column (A), line 12)	1				
4       Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) <ul> <li>4</li> <li>1, 630, 656, 127.</li> <li>5</li> <li>1, 012, 797.</li> <li>6</li> <li>-1, 012, 797.</li> <li>6</li> <li>7</li> <li>8</li> <li>Prior period adjustments</li> <li>9</li> <li>-647, 118.</li> <li>10</li> <li>1, 734, 827, 710.</li> </ul> <li>Part XII</li> <li>Financial Statements and Reporting             <ul> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> </ul> </li> <li>Part XII</li> <li>Financial Statements compiled or reviewed by an independent accountant?             <ul> <li>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis</li> <li>Osolidated basis, or both:                 <ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis, consolidated basis</li> <li>Both consolidated and separate basis, consolidated basis</li> <li>Both consolidated and separate basis, consolidated basis</li> <li>Consolidated basis, or both:                  <ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both</li></ul></li></ul></li></ul></li>	2		2	49	9,14	0,2	56.
5 Net unrealized gains (losses) on investments   6   7   6   7   7   8   9   9   9   9   0   1   Accounting method used to prepare the Form 990:   Cash   X   1   Accounting method used to prepare the Form 990:   Cash   X   1   Accounting method used to prepare the Form 990:   Cash   X   1   Accounting method used to prepare the Form 990:   Cash   X   1   Accounting firm ancial statements compiled or reviewed by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis   S   Consolidated basis, or both:   Separate basis   Cincid firmacial statements and separate basis   b   Were the organization of its financial statements and separate basis   consolidated basis, or both:   Separate basis   Separate basis   Consolidated basis   Check if Yes," to line 2 ao 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and separate basis   Consolidated basis, or both:   Separate basis   Separate basis   C   If "Yes," to line 2 ao 2b	3	Revenue less expenses. Subtract line 2 from line 1	-				
6       Donated services and use of facilities       6         7       Investment expenses       7         8       Prior period adjustments       9       -647,118.         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647,118.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       10       1,734,827,710.         Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII         Other charges in net assets or fund balances (explain from a prior year or checked "Other"         If the organization changed its method of accounting from a prior year or checked "Other"       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				
7       Investment expenses       7         8       Prior period adjustments       9         9       Other changes in net assets or fund balances (explain in Schedule O)       9       -647,118.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       10       1,734,827,710.         Part XII       Financial Statements and Reporting       10       1,734,827,710.         Check if Schedule O contains a response or note to any line in this Part XII       14       Yes         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       1         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b	5	Net unrealized gains (losses) on investments	5	- 1	1,01	2,7	97.
<ul> <li>8 Prior period adjustments</li> <li>9 Other changes in net assets or fund balances (explain in Schedule O)</li> <li>9 -647, 118.</li> <li>9 0ther changes in net assets or fund balances (explain in Schedule O)</li> <li>9 -647, 118.</li> <li>10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</li> <li>Part XIII Financial Statements and Reporting</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>1 Accounting method used to prepare the Form 990: Cash X Accrual Other</li> <li>If the organization's financial statements compiled or reviewed by an independent accountant?</li> <li>14 Yes, "check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis</li> <li>b Were the organization's financial statements audited by an independent accountant?</li> <li>16 Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis.</li> <li>b Were the organization's financial statements audited by an independent accountant?</li> <li>17 Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis.</li> <li>b Were the organization's financial statements and selection of an independent accountant?</li> <li>18 '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 process during the tax year, explain in Schedule O.</li> <li>3a As a result of a federal award, was the organization required outdorgo an audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or au</li></ul>	6	Donated services and use of facilities	6				
<ul> <li>9 Other changes in net assets or fund balances (explain in Schedule O)</li> <li>9 -647, 118.</li> <li>10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</li> <li>10 1, 734, 827, 710.</li> <li>Part XII Financial Statements and Reporting</li> <li>Check if Schedule O contains a response or note to any line in this Part XII</li> <li>1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.</li> <li>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</li> <li>16 "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis Consolidated basis Both consolidated and separate basis</li> <li>b Were the organization's financial statements and independent accountant?</li> <li>17 "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Consolidated basis Both consolidated and separate basis</li> <li>b Were the organization of its financial statements and selection of an independent accountant?</li> <li>17 "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?</li> <li>17 the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</li> <li>3a X</li> <li>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit abdit, explain why in Schedule O and describe any steps taken to undergo such audits</li> </ul>	7	Investment expenses	7				
10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))       1, 734, 827, 710.         Part 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:       Cash       X       Accrual       Other	8	Prior period adjustments	8				
column (B)       10       1,734,827,710.         Part XII       Financial Statements and Reporting	9	Other changes in net assets or fund balances (explain in Schedule O)	9		-64	7,1	18.
Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
Check if Schedule O contains a response or note to any line in this Part XII       Yes         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       Image: Consolidation of the organization is financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       Separate basis       Consolidated basis       Both consolidated and separate basis         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       both consolidated basis       both consolidated and separate basis         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         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?       2c       X </td <td></td> <td></td> <td>10</td> <td>1,73</td> <td>4,82</td> <td>7,7</td> <td>10.</td>			10	1,73	4,82	7,7	10.
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other	Pa	rt XII Financial Statements and Reporting					
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other		Check if Schedule O contains a response or note to any line in this Part XII					
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?   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis Consolidated basis   B Were the organization's financial statements audited by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis   b Were the organization's financial statements audited by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:   Separate basis X   If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:   Separate basis X   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?   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 Audit Act and OMB Circular A-133?   b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organizat						Yes	No
2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         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?       2c       X         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 Audit       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       3b       X	1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Image: Consolidated basis		If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
separate basis, consolidated basis, or both:   Separate basis   Separate basis   Consolidated basis   Both consolidated and separate basis   Were the organization's financial statements audited by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:   Separate basis   Separate basis   X   Consolidated basis, or both:   Separate basis   X   Separate basis   X   Consolidated basis, or both:   Separate basis   X   Separate basis   X   Consolidated basis, or both:   Separate basis   X   Consolidated basis, or both:   Separate basis   X   Consolidated basis   Both consolidated and separate basis   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?   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 Audit   Act and OMB Circular A-133?   b   If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit   or audits, explain why	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:         <ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> </ul> </li> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</li> </ul> <li>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</li> <li>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</li>		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         Separate basis       X       Consolidated basis       Both consolidated and separate basis       1         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?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.       2a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       3b       X		separate basis, consolidated basis, or both:					
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       Image: Consolidated basis       Image:		Separate basis Consolidated basis Both consolidated and separate basis					
consolidated basis, or both:       Separate basis       X       Consolidated basis       Both consolidated and separate basis         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?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.       Image: Consolidated basis       Image: Consolidated basis<	b				2b	Х	
<ul> <li>Separate basis X Consolidated basis Both consolidated and separate basis</li> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</li> <li>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</li> <li>If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</li> </ul>		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis	,			
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?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.       2c       X         3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       3b       X							
review, or compilation of its financial statements and selection of an independent accountant?          If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.       Image: Comparison of the 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 Audit Act and OMB Circular A-133?       3a X         b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       3b X		Separate basis X Consolidated basis Both consolidated and 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 Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	С						
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit       3a       X         Act and OMB Circular A-133?       3a       X         b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       3b       X		review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
Act and OMB Circular A-133?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       3a       X							
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a		gle Au	dit			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits					3a	Х	
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red au	dit			
		or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2018)

832012 12-31-18

SCHEDULE A							OMB No. 1545-0047
(Form 990 or 990-EZ)		rity Status an					2010
		nization is a section 501 47(a)(1) nonexempt cha			or a section		2010
Department of the Treasury	▶	Attach to Form 990 or F	orm 990-E	Ζ.			Open to Public
Internal Revenue Service		v/Form990 for instructio		e latest in	formation.	Employer	
Name of the organization	PRESIDENT-BOAR SANTA CLARA CO		5				identification number 4-1156617
Part I Reason f	or Public Charity Status		molete this	part.) Se	e instructions		±-1130017
	private foundation because it is: (						
	vention of churches, or association				YAYi).		
	ribed in section 170(b)(1)(A)(ii).				<i>N' N N</i>		
	a cooperative hospital service org				i).		
	earch organization operated in co		•			)(iii). Enter t	he hospital's name,
city, and state	:						
5 🗌 An organizatio	on operated for the benefit of a co	llege or university owned	or operate	d by a go	vernmental u	nit describe	d in
section 170(	b)(1)(A)(iv). (Complete Part II.)						
6 A federal, stat	e, or local government or governr	nental unit described in	section 170	)(b)(1)(A)	(v).		
	on that normally receives a substa	ntial part of its support fr	om a gover	nmental u	unit or from th	ne general p	ublic described in
	)(1)(A)(vi). (Complete Part II.)						
	trust described in section 170(b)		-			1 1	
-	I research organization described			-		-	-
university:	r a non-land-grant college of agric	culture (see instructions).	Enter the ha	ame, city,	, and state of	the college	or
· _	on that normally receives: (1) more	than 33 1/3% of its supr	ort from co	ontributio	ns memberst	nin fees and	d aross receipts from
	ed to its exempt functions - subje						
	nrelated business taxable income						-
	i09(a)(2). (Complete Part III.)	. , , , , , , , , , , , , , , , , , , ,		·	, .		·
11 An organizatio	on organized and operated exclus	ively to test for public saf	ety. See s	ection 50	9(a)(4).		
12 An organizatio	on organized and operated exclus	ively for the benefit of, to	perform the	e functior	ns of, or to ca	rry out the p	ourposes of one or
more publicly	supported organizations describe	ed in <b>section 509(a)(1)</b> o	r section 5	09(a)(2).	See section &	5 <b>09(a)(3).</b> C	heck the box in
lines 12a thro	ugh 12d that describes the type of	f supporting organization	and comp	lete lines	12e, 12f, and	12g.	
	pporting organization operated, s	-	•	-			-
	ed organization(s) the power to re		majority of	the direc	tors or truste	es of the su	pporting
	. You must complete Part IV, S						
	upporting organization supervised			• •	•		•
	anagement of the supporting org n(s). You must complete Part IV,		ime person	s that cor	itroi or manaç	ge the supp	oned
<u> </u>	ctionally integrated. A supportir		n connectio	on with a	nd functional	lv integrate	d with
	d organization(s) (see instructions			,		ly integrates	
	i-functionally integrated. A sup	· ·	-	-	-	ted organiz	ation(s)
that is not f	unctionally integrated. The organi	zation generally must sati	sfy a distrib	oution req	uirement and	an attentiv	eness
requirement	(see instructions). You must co	mplete Part IV, Sections	A and D, a	and Part V	V.		
e 🗌 Check this I	box if the organization received a	written determination from	n the IRS th	hat it is a	Туре I, Туре	II, Type III	
functionally	integrated, or Type III non-function	nally integrated supportir	ng organiza	tion.			
	of supported organizations						
g Provide the following (i) Name of support	ng information about the supporte	ed organization(s). (iii) Type of organization	(iv) Is the organi	ization listed	(v) Amount of	monetany	(vi) Amount of other
organization		(described on lines 1-10	in your governing Yes	g document? <b>No</b>	support (see ir	-	support (see instructions)
		above (see instructions))	163	NO			
Total							
LHA For Paperwork Red	luction Act Notice, see the Instr	uctions for Form 990 or	990-EZ.	832021 10-	11-18 Sche	dule A (Fori	m 990 or 990-EZ) 2018

# Schedule A (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE

94-1156617 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support											
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	60435123.	47316295.	87677355.	<u>49761390.</u>	<u>98030173.</u>	343220336					
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf											
3	The value of services or facilities											
	furnished by a governmental unit to											
	the organization without charge											
4	Total. Add lines 1 through 3	60435123.	47316295.	87677355.	49761390.	98030173.	343220336					
5	The portion of total contributions											
	by each person (other than a											
	governmental unit or publicly											
	supported organization) included											
	on line 1 that exceeds 2% of the											
	amount shown on line 11,											
	column (f)						43782588.					
	Public support. Subtract line 5 from line 4.						299437748					
Se	ction B. Total Support		1									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total					
7	Amounts from line 4	60435123.	<u>47316295.</u>	87677355.	<u>49761390.</u>	<u>98030173.</u>	343220336					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources $\dots$	10680285.	<u>10776201.</u>	12171831.	<u>14824379.</u>	<u>19205332.</u>	67658028.					
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on	14,200.					14,200.					
10	Other income. Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI.)											
11	Total support. Add lines 7 through 10						410892564					
	Gross receipts from related activities,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,885,960.					
13	First five years. If the Form 990 is fo	-			•							
60	organization, check this box and <b>sto</b> ction C. Computation of Publ	p here	oontogo									
	-		-				70 07					
	Public support percentage for 2018 (		•			14	72.87 %					
	Public support percentage from 2017					15	70.95 %					
168	33 1/3% support test - 2018. If the						N V					
	stop here. The organization qualifies		-									
C	<b>33 1/3% support test - 2017.</b> If the											
47	and <b>stop here.</b> The organization qua											
1/8	17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,											
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization											
L												
C	10% -facts-and-circumstances test	-										
	more, and if the organization meets the						" ▶ □					
10	organization meets the "facts-and-circ		-									
10	Private foundation. If the organization	on did hot check a		a, 100, 17a, 0f 17b		edule A (Form 990						
					00110	200 F (1 01 11 330						

Part II

# Schedule A (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organ	ization,
check this box and stop here	-				-	
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2018 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2017	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves						
17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)				17	%	
<b>18</b> Investment income percentage from		B			18	%
19a 33 1/3% support tests - 2018. If the					33 1/3%, and line	17 is not
more than 33 1/3%, check this box a						<b>&gt;</b>
b 33 1/3% support tests - 2017. If the	-	•		•••••		, and
line 18 is not more than 33 1/3%, che	-					
20 Private foundation. If the organization						
832023 10-11-18		· · · ·				90 or 990-EZ) 2018
		20	)		•	-

^{2018.05091} PRESIDENT-BOARD OF TRUSTE 621509_1

Schedule A (Form 990 or 990 EZ) 2018 SANTA CLARA COLLEGE

# 94-1156617 Page 4

1

Yes No

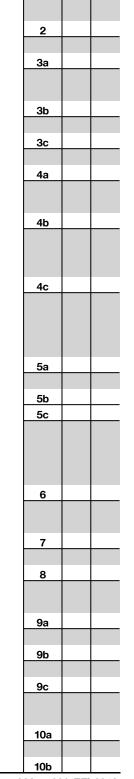
# Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

832024 10-11-18



Schedule A (Form 990 or 990-EZ) 2018

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

21 010 C

94-1156617	Page 5
------------	--------

Sche		94-115661	7 ра	age 5
Par	T IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
<u> </u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0.00	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
-	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
		······		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions).		
a L	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below.</i>			
c	L The organization supported a governmental entity. <i>Describe in</i> <b>Part VI</b> how you supported a government entit Activities Test. <b>Answer (a) and (b) below.</b>	y (see instructions,	Yes	No
2			res	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 <b>Part VI identify</b>			
	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	2a		
h	that these activities constituted substantially all of its activities.	<u>2a</u>		
U	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?			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	54		
5	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
		00		

22

832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

11560521 146892 621509

#### Schedule A (Form 990 or 990 EZ) 2018 SANTA CLARA COLLEGE Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b 1c c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 **3** Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 4 see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions)

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

#### Schedule A (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 **5** Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 1 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 **d** From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2018 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2019. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

		PRESI	DENT-	BOARD	OF	TRUSTEES					
Schedule A	(Form 990 or 990-EZ) 2018	SANTA	CLAR	A COL	LEGE				94-11566	17 F	age 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, li Section D, lines 5, 6, and 8 (See instructions.)	n <b>ation.</b> Pr 2, 3b, 3c, 4l nes 2 and 3	rovide the o, 4c, 5a, ; Part IV,	e explanati , 6, 9a, 9b, Section E,	ions requ 9c, 11a , lines 1c	uired by Part II, , 11b, and 11c; c, 2a, 2b, 3a, an	Part IV, Section d 3b; Part V, line	ne 17a or 1 B, lines 1 a e 1; Part V,	7b; Part III, line nd 2; Part IV, So Section B, line 1	12; ection C	3
832028 10-11-1	8				25			Schedule	A (Form 990 or	990-EZ	2018

# Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

**	PUBLIC	DISCLOSURE	COPY	*
----	--------	------------	------	---

# Schedule of Contributors

Attach to Form 990. Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

number

Name of the organization	1	Employer identification			
	PRESIDENT-BOARD OF TRUSTEES				
	SANTA CLARA COLLEGE	94-1156617			
Organization type (chec	k one):				
Filers of:	Section:				
Form 990 or 990-EZ	$\fbox{X}$ 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
501(c)(3) taxable private foundation					
, ,	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> .				
Note: Only a section 501	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.			

### General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B	(Form 990,	990-EZ, d	or 990-PF)	(2018)	
------------	------------	-----------	------------	--------	--

Name of organization

PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

94-1156617

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u>38,718,527.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>15,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>3,500,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$2,221,953.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Page 2

823452 11-08-18

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

27

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional snace is needed	
(a) No	<i>*</i> \	(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I			
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	p.	(See instructions.)	
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	- , · · · · · · · · · · · · · · · · · ·	(See instructions.)	
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
		\$	_
(a)		(-)	
No.	(b)	(c)	(d)
from Part I	Description of noncash property given	<b>FMV (or estimate)</b> (See instructions.)	Date received
		\$	

28

823453 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

# 11560521 146892 621509

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2018)		Page <b>4</b>		
	rganization DENT-BOARD OF TRUSTEES		Employer identification number		
	CLARA COLLEGE		94-1156617		
Part III		through (e) and the following line ent	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year ry. For organizations		
	Use duplicate copies of Part III if additional	space is needed.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, an		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(2) Transfer of sift	[		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
	Handleree e hame, addreed, at				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, ar		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift nd ZIP + 4	Relationship of transferor to transferee		
823454 11-08	3-18		Schedule B (Form 990, 990-EZ, or 990-PF) (2018)		

), 990-EZ, or 9 **р** (г PF) (2018)

29 2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

SCHEDULE C	Political Campaign and Lobbying Activities					OMB No. 1545-0047
(Form 990 or 990-EZ)       For Organizations Exempt From Income Tax Under section 501(c) and section 527         Department of the Treasury Internal Revenue Service       Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ         ● Go to www.irs.gov/Form990 for instructions and the latest information.						2018 Open to Public Inspection
<ul> <li>Section 501(c)(3) org</li> <li>Section 501(c) (other</li> <li>Section 527 organization answ</li> <li>Section 501(c)(3) org</li> <li>Section 501(c)(3) org</li> <li>If the organization answ</li> <li>Tax) (see separate instruction 501(c)(4), (5)</li> <li>Name of organization</li> </ul>	anizations: Com than section 50 ations: Complete vered "Yes," or anizations that I anizations that I vered "Yes," or ructions), then , or (6) organizat PRESIDE SANTA C	Form 990, Part IV, line 3, or Form plete Parts I-A and B. Do not comp 01(c)(3)) organizations: Complete Part Part I-A only. Form 990, Part IV, line 4, or Form nave filed Form 5768 (election under nave NOT filed Form 5768 (election Form 990, Part IV, line 5 (Proxy ions: Complete Part III. NT-BOARD OF TRUST LARA COLLEGE panization is exempt under	blete Part I-C. arts I-A and C below. I <b>m 990-EZ, Part VI, lin</b> er section 501(h)): Cor n under section 501(h) <b>Tax) (see separate in</b> EES	Do not complete Part <b>e 47 (Lobbying Activ</b> mplete Part II-A. Do no ): Complete Part II-B. <b>structions) or Form</b>	I-B. bt comp Do not o 990-EZ Employ	hen blete Part II-B. complete Part II-A. , Part V, line 35c (Proxy ver identification number 94 – 1156617
2 Political campaign	<ul> <li>Provide a description of the organization's direct and indirect political campaign activities in Part IV.</li> <li>Political campaign activity expenditures</li> <li>Volunteer hours for political campaign activities</li> </ul>					
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3	).		
2 Enter the amount o	f any excise tax ncurred a sectio ade?	incurred by the organization under incurred by organization managers n 4955 tax, did it file Form 4720 fo	s under section 4955 r this year?			
		anization is exempt under	section 501(c), e	except section 5	01(c)(3	3).
<ol> <li>Enter the amount o exempt function ac</li> <li>Total exempt function</li> </ol>	1       Enter the amount directly expended by the filing organization for section 527 exempt function activities       ▶ \$					
<ul> <li>4 Did the filing organi</li> <li>5 Enter the names, armade payments. For contributions received</li> </ul>	zation file <b>Form</b> ddresses and en or each organiza ved that were pro	<b>1120-POL</b> for this year? nployer identification number (EIN) tion listed, enter the amount paid for omptly and directly delivered to a s additional space is needed, provide	of all section 527 politi rom the filing organiza separate political organ	tical organizations to v ation's funds. Also ent nization, such as a sep	which th er the a	mount of political
(a) Name		(b) Address	(c) EIN	(d) Amount paid fr filing organizatior funds. If none, ente	n's c	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

LHA	
832041	11-08-18

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

Schedule C (Form 990 or 990-EZ) 2018

94-1156617	Page 2
------------	--------

Schedule C (Form 990 or 990-EZ) 2018 SAN	TA CLARA	COLLEGE		94-1	156617 Page 2
Part II-A Complete if the organiza section 501(h)).	ition is exer	mpt under sectioi	1 501(C)(3) and file	a Form 5768 (el	ection under
A Check  Check  Grift if the filing organization be	longs to an aff	iliated aroup (and list in	Part IV oach affiliatod	aroup mombor's par	
expenses, and share of expenses			IT all IV each annialed	group member s nan	ie, address, Liiv,
B Check ► if the filing organization ch	, ,	• •	ovisions apply		
	obbying Expe	enditures		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence		(grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influence	-				
c Total lobbying expenditures (add lines 1a					
e Total exempt purpose expenditures (add					
f Lobbying nontaxable amount. Enter the a					
If the amount on line 1e, column (a) or (b) is		bying nontaxable am			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,0	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,00	0 \$225,0	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
g Grassroots nontaxable amount (enter 259	% of line 1f)				
h Subtract line 1g from line 1a. If zero or les					
i Subtract line 1f from line 1c. If zero or les					
j If there is an amount other than zero on e	either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this year?					Yes No
(Some organizations that ma		eraging Period Under i01(h) election do not		of the five columns b	elow.
	See the separ	rate instructions for li	nes 2a through 2f.)		
	obbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2015	(b) 2016	(c) 2017	<b>(d)</b> 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

832042 11-08-18

# Schedule C (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE

### 94-1156617 Page 3

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	lobbying activity.	Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X	_	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		Х		
d	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i	Other activities?	X			1,300.
j	Total. Add lines 1c through 1i			4	<u>4,300.</u>
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5	5), or se	ction	
	501(c)(6).			_	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sectio				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OR	(b) Parl	III-A, line	e 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
с	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	and 2 (see	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.				
	T II-B, LINE 1, LOBBYING ACTIVITIES:				
SCU	PAYS ANNUAL DUES TO MEMBERSHIP ORGANIZATIONS; A PC	RTION	OF TH	Έ	
		-			
ANN	UAL DUES ARE USED BY THE ORGANIZATIONS FOR LOBBYING	ACTIV	TTIES	5.	

Schedule C (Form 990 or 990-EZ) 2018

			al Financial Statements		OMB No. 1545	<u>-0047</u>	
(Forr	n 990)	Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		<b>ZU</b> Open to F	O	
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest information	on.	Inspectio		
	e of the organizatio		r identification	number			
	SANTA CLARA COLLEGE 94						
Pa	t I Organiza	itions Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts.	Complete if the		
	organizatior	n answered "Yes" on Form 990, Part IV, lin		<u></u>			
			(a) Donor advised funds	(b) Funds an	d other account	is	
1		nd of year					
2		contributions to (during year)					
3 4		f grants from (during year)					
-+ 5		end of year	writing that the assets held in donor advised t	funds			
Ŭ	-		exclusive legal control?		Yes	No	
6			dvisors in writing that grant funds can be use				
	for charitable purpe	oses and not for the benefit of the donor o	r donor advisor, or for any other purpose con	ferring			
					Yes	No	
Pa	t II Conserva	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, Par	t IV, line 7.			
1	Purpose(s) of cons	ervation easements held by the organization	on (check all that apply).				
		of land for public use (e.g., recreation or e		• •			
	_	f natural habitat	Preservation of a certifie	d historic struct	ure		
•		of open space				1	
2	•	• • •	ied conservation contribution in the form of a				
2	day of the tax year				at the End of the	Tax real	
a b							
c	•		ucture included in (a)				
d			after 7/25/06, and not on a historic structure				
	listed in the Nation	al Register	·	2d			
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished, or terminated by the org	ganization during	g the tax		
	year 🕨						
4		where property subject to conservation eas					
5		ion have a written policy regarding the per					
•	,	procement of the conservation easements it				No	
6	Staff and volunteer	r nours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	ation easement	s during the yea	ſ	
7	Amount of expense		lling of violations, and enforcing conservation	essements dur	ing the year		
'	► \$	es incurred in monitoring, inspecting, nanc		reasements du	ing the year		
8	· · ·	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4	-)(B)(i)			
					Yes	No No	
9			on easements in its revenue and expense sta		ance sheet, and		
	include, if applicab	le, the text of the footnote to the organizat	tion's financial statements that describes the	organization's a	accounting for		
	conservation easer						
Pa		_	Art, Historical Treasures, or Othe	r Similar As	sets.		
	-	the organization answered "Yes" on Form					
<b>1</b> a	0	, , , , , , , , , , , , , , , , , , , ,	C 958), not to report in its revenue statement			,	
			hibition, education, or research in furtherance	of public servic	e, provide, in Pa	art XIII,	
h		note to its financial statements that descri		d balance aboat	works of ort bi	atorical	
b	-		C 958), to report in its revenue statement and ducation, or research in furtherance of public				
	relating to these ite	-	ducation, of research in furtherance of public	Service, provide	e the following a	mounts	
	-			▶ \$		0.	
				<b>N A</b>			
2	.,		asures, or other similar assets for financial ga				
		ints required to be reported under SFAS 1					
а	Revenue included	on Form 990, Part VIII, line 1	·····	▶ \$			
				🕨 \$			
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.	Sche	dule D (Form 9	90) 2018	
83205	10-29-18		33				

5.	,	
Q	05001	וחדסססס

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

	PRESIDE	NT-BOARD OF	F TRU	JSTEES						
Sche	dule D (Form 990) 2018 SANTA C	LARA COLLEC	ΞE					94-11	L5661	7 Page 2
Par	t III Organizations Maintaining C	ollections of Art	t, Histo	orical Tre	asures,	or Othe	r Simi	lar Asset	s (contir	nued)
3	Using the organization's acquisition, accession (check all that apply):									
2										
b										
c	X Preservation for future generations	e								
_	Provide a description of the organization's co	lloations and avalain	bow th	ov furthor th		tion'n ovo	mot our	nono in Dor	• VIII	
4 5	During the year, did the organization solicit of							use in Fai	L AIII.	
5	to be sold to raise funds rather than to be ma							Г	Yes	X No
Par	t IV Escrow and Custodial Arrang									
1 41	reported an amount on Form 990, Par			organizatio	n answered		Forms	190, Fait IV	iii e 9, 0i	
10	Is the organization an agent, trustee, custodia		ion for a	ontributions	or other a	ecote not	includo	4		
Id			•					_	Vee	No
<b>h</b>	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a	and complete the fel	louring t					∟	Yes	
D	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing ta	able:					A	
	De sinsis a la dese								Amount	[
	Beginning balance									
	Additions during the year									
	Distributions during the year									
	Ending balance						. <b>1</b> 1			
	Did the organization include an amount on Fo						lity?	L	Yes	No
Par	If "Yes," explain the arrangement in Part XIII.									
Fai	t V   Endowment Funds. Complete i								1 ( ) 5	
_		(a) Current year		Prior year	(c) Two ye			e years back		years back
	Beginning of year balance	943,597,741.		<u>,039,598.</u>		42,267.		,807,356	-	514,732.
	Contributions	17,973,970.		<u>,246,005.</u>	,	76,047.		,595,446		775,787.
	Net investment earnings, gains, and losses	64,253,445.		<u>,911,647.</u>	,	60,075.		,486,553		217,472.
	Grants or scholarships	15,416,940.	14	,253,518.	13,3	68,128.	12	,369,915	. 11,	547,849.
е	Other expenditures for facilities									
	and programs	22,715,094.		,211,991.	,	38,663.		,121,119		139,942.
f	Administrative expenses	5,572,000.		,134,000.		32,000.		,582,948	_	012,843.
g	End of year balance	982,121,122.		,597,741.		39,598.	816	,842,267	. 854	807,356.
2	Provide the estimated percentage of the curr		e (line 1g	, column (a)	) held as:					
а	Board designated or quasi-endowment	18.50	_%							
	Permanent endowment  31.25	%								
С	Temporarily restricted endowment  5	0 <u>.25</u> %								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that	t are held an	id administ	ered for th	ne orgar	nization	r	
	by:									Yes No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on So	chedule R?					. 3b	
4	Describe in Part XIII the intended uses of the		wment f	unds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990	), Part IV	', line 11a. S	ee Form 99					
	Description of property	(a) Cost or o	ther	(b) Cost	or other		ccumul		( <b>d)</b> Bool	k value
		basis (investr	,	basis			preciati			
1a	Land				<u>3,813</u> .				-	7,779.
b	Buildings	9,431,								
	Leasehold improvements			109,62						1,146.
	Equipment			148,05						8,357.
	Other		688.	68,71	0,388.	. 4,	591,	788.	54,119	9,288.
Tota	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part 2	X. colur	nn (B). line 10	)c.)		<u></u>	🕨 90	51,783	3,968.
									e D (Form	n 990) 2018

PRESI	DENT-BO	DARD	OF	TRUSTEES
SANTA	CLARA	COLI	EGE	2

Schedule L	(FOIII 990) 2016	DANIA	
Part VII	Investments -	Other Secu	rities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12

	on on 530, raitiv, line				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value			
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) VENTURE CAPITAL & PRIVATE					
(B) EQUITY	267,717,348.	END-OF-YEAR MARKET VALUE			
(C) OTHER ALTERNATIVE					
(D) INVESTMENTS	106,687,468.	END-OF-YEAR MARKET VALUE			
(E) HEDGE FUNDS	246,610,890.	END-OF-YEAR MARKET VALUE			
(F) NOTES RECEIVABLE	1,990,481.	END-OF-YEAR MARKET VALUE			
(G) PENDING TRADES	18,065,085.	END-OF-YEAR MARKET VALUE			
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	641,071,272.				
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	on Form 990, Part IV, line [.]	11c. See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value			

	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

# Part IX Other Assets.

(8) (9)

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	AMOUNTS HELD ON BEHALF OF OTHERS	94,542,915.
(3)	ANNUITY OBLIGATIONS	7,411,513.
(4)	REFUNDABLE ADVANCES - US	
(5)	GOVERNMENT	6,869,177.
(6)	ASSET RETIREMENT OBLIGATION	2,814,656.
(7)	OBLIGATIONS UNDER CAPITALIZED	
(8)	LEASE	57,405,497.
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	169,043,758.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

PRESIDENT-BOARD OF	' TRUSTEES
--------------------	------------

SANTA CLARA COLLEGE

Sche	dule D (Form 990) 2018 SANTA CLARA COLLEGE	94-1156617	Page 4	
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	)		
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements With Exper	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
с	Other losses			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 1			
Pa	rt XIII Supplemental Information.			

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

# PART III, LINE 1A:

THE	UNIVERSITY'	S	COLLECTIONS	ARE	MADE	UP	OF	ARTIFACTS	OF	HISTORICAL	

SIGNIFICANCE AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL, RESEARCH, AND

CURATORIAL PURPOSES. THE COLLECTIONS, WHICH HAVE BEEN ACQUIRED THROUGH

CONTRIBUTIONS SINCE THE UNIVERSITY'S INCEPTION, ARE NOT RECOGNIZED AS

ASSETS IN THE ACCOMPANYING CONSOLIDATED STATEMENT OF FINANCIAL POSITION.

PART III, LINE 4:

THE UNIVERSITY MAINTAINS THE DE SAISSET MUSEUM FOR STUDENTS WHICH IS ALSO

OPEN TO THE PUBLIC. THE DE SAISSET MUSEUM SUPPORTS SANTA CLARA

UNIVERSITY'S GOAL OF EDUCATING THE WHOLE PERSON THROUGH A DIVERSE AND

ACCESSIBLE RANGE OF EXHIBITIONS, COLLECTIONS, AND EDUCATIONAL PROGRAMS

832054 10-29-18

36

Part XIII Supplemental Information (continued)

THAT HIGHLIGHT THE ART AND HISTORY OF THE SAN FRANCISCO BAY AREA AND THE

# LOCAL SANTA CLARA VALLEY.

PART V, LINE 4:

Schedule D (Form 990) 2018

ENDOWED GIFTS ARE MEANT TO EXIST IN PERPETUITY, AND ARE INVESTED FOR

LONG-TERM GROWTH. EACH YEAR, A PORTION OF THE FUND'S EARNINGS IS MADE

AVAILABLE IN THE FORM OF AN ALLOCATION TO SUPPORT STUDENT SCHOLARSHIPS,

FACULTY CHAIRS, AND OTHER ENDOWED PROGRAMS THAT FURTHER THE UNIVERSITY'S

STRATEGIC PRIORITIES.

Schedule D (Form 990) 2018

832055 10-29-18

SC			/IB No. 1545-0047			
(For	m 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990,	2	2018		
		Part IV, line 13, or Form 990-EZ, Part VI, line 48.				
	nent of the Treasury Revenue Service	Attach to Form 990 or Form 990-EZ.			Publi	ic
		Go to www.irs.gov/Form990 for the latest information.		pecti		
Name	e of the organization		ver identifi			mber
Pa	41	SANTA CLARA COLLEGE	94-11	50	5 T /	
Pa	11				YES	NO
	Deservice and the second section of the second seco		Г		TES	NO
1	-	on have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			х	
~		trument, or in a resolution of its governing body?	·····  -	1	<u></u>	
2		on include a statement of its racially nondiscriminatory policy toward students in all its brochures,	hino?	2	Х	
3		er written communications with the public dealing with student admissions, programs, and scholars n publicized its racially nondiscriminatory policy through newspaper or broadcast media during the		2		
3		n for students, or during the registration period if it has no solicitation program, in a way that makes				
		all parts of the general community it serves? If "Yes," please describe. If "No," please explain.				
		pace, use Part II	- E	3		x
	THE UNIVER	SITY MEETS THE CRITERIA UNDER SUBSECTION 4.03.2 OF		Ŭ		
		OCEDURE 1975-50.				
4	Does the organization	on maintain the following?				
а	e e	the racial composition of the student body, faculty, and administrative staff?		4a	Х	
		ng that scholarships and other financial assistance are awarded on a racially nondiscriminatory basi		4b	Х	
с	Copies of all catalog	gues, brochures, announcements, and other written communications to the public dealing with stud	ent			
	admissions, program	ns, and scholarships?	L	4c	Х	
d		al used by the organization or on its behalf to solicit contributions?		4d	Х	
		" to any of the above, please explain. If you need more space, use Part II.				
			I			
	e e	on discriminate by race in any way with respect to:				
		privileges?		5a		X
b	Admissions policies	?	······  -	5b		X
С	Employment of facu	Ity or administrative staff?	L	5c		X
		er financial assistance?		5d		X
		s?		5e		X
				5f		X
				5g		X X
h	Other extracurricula	ir activities?	·····  -	5h		
	If you answered "Ye	es" to any of the above, please explain. If you need more space, use Part II.				
			— I			
			— I			
			— I			
~				•	v	
		on receive any financial aid or assistance from a governmental agency?		6a	Х	v
b		n's right to such aid ever been revoked or suspended?	·····  -	6b		X
-		es" on either line 6a or line 6b, explain on Part II.				
7		on certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of		7	х	
	BEV Proc (5-50 19	975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II		1	Δ	1

 Schedule E (Form 990 or 990-EZ) 2018
 SANTA CLARA COLLEGE
 94-115

 Part II
 Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information.

#### LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

## FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCIES CONSISTS OF STUDENT

### FINANCIAL AID RECEIVED FROM SUCH AGENCIES.

Schedule E (Form 990 or 990-EZ) 2018

11560521 146892 621509

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ites	OMB No. 1545-0047
(Form 990)			n answered "Yes" on Form 990, Part			2018
Department of the Treasury		······	Attach to Form 990.			Open to Public
Internal Revenue Service Name of the organization	GO 10	www.irs.gov/Fc	rm990 for instructions and the latest	imormation.	Emplover id	Inspection lentification number
PRESIDENT-BOARD		FEES				
SANTA CLARA COL					94-115	
		ctivities Out	side the United States. Compl	ete if the organ	ization answer	red "Yes" on
Form 990, Part I <b>1 For grantmakers.</b> Doe:		maintain record	ds to substantiate the amount of its gra	onts and other a	assistance	
-	•		the selection criteria used to award the		-	X Yes No
2 For grantmakers. Des	cribe in Part V the	organization's	procedures for monitoring the use of its	s grants and ot	her assistance	outside the
United States.						
			an be duplicated if additional space is r			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	<ul> <li>(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)</li> </ul>	is a pro describe	vity listed in (d) gram service, specific type (s) in the region	expenditures for and investments
EAST ASIA AND THE						
PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROA	D	837,726.
						,
EUROPE (INCLUDING						
ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDY ABROA	л	4,913,632.
GREENLAND /	0	0	FROMAM SERVICES	STUDI ABROA		4,915,052.
MIDDLE EAST AND					-	25.056
NORTH AFRICA	0	0	PROGRAM SERVICES	STUDY ABROA	LD	37,856.
SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDY ABROA	۱D	53,969.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDY ABROA	۲D.	104,014.
EUROPE (INCLUDING						
ICELAND AND						
GREENLAND)	0	0	INVESTMENTS			21,782,560.
SUB-SAHARAN AFRICA	0	0	INVESTMENTS			7,063,546.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS			184727758.
<b>3 a</b> Subtotal	0	0	THARD INTENIO			219,521,061.
<b>b</b> Total from continuation						, ,
sheets to Part I	1	2				234,966.
c Totals (add lines 3a	1	2				219,756,027.
and 3b)	L 1	4				F_5,750,027.

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

Schedule F (Form 990) 2018

832071 10-31-18

Schedule F (Form 990)	SANTA CL	ARA COLL	OF TRUSTEES EGE • (Schedule F (Form 990), Part I, line 3	94-115661	7 Page
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	<ul> <li>(Schedule F (Form 990), Part I, line 3</li> <li>(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)</li> </ul>	<ul> <li>(e) If activity listed in (d)</li> <li>is a program service,</li> <li>describe specific type</li> <li>of service(s) in region</li> </ul>	<b>(f)</b> Total expenditures for region
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	0	PROGRAM SERVICES	STUDY ABROAD	49,900
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		66,300
CENTRAL AMERICA AND THE CARIBBEAN	1	2	PROGRAM SERVICES	STUDY ABROAD & OUTREACH	118,766.
Totals	1	2			234,966.

832181 04-01-18

# PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Schedule F (Form 990) 2018

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		CENTRAL AMERICA	DONATIONS TO SUPPORT PROGRAMS THAT BENEFIT STUDENTS AND COMMUNITIES IN EL	60,000.	CASH PAYMENTS TO RECIPIENT ORGANIZATIONS	0.		воок	
by the IRS, or for whic	<ul> <li>2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt</li> <li>by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter</li> <li>3 Enter total number of other organizations or entities</li> <li>Construction</li> <li>Const</li></ul>								

SEE PART V FOR COLUMN (D) DESCRIPTIONS

94-1156617

Schedule F (Form 990) 2018

SANTA CLARA COLLEGE

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

94-1156617

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other
	CENTRAL AMERICA						
	AND THE CARIBBEAN						
	- ANTIGUA &						
ONATION	BARBUDA, ARUBA,	1	6 300	CHECKS	0.		воок
			-,				

Schedule F (Form 990) 2018

Page 3

Sched	ule F (Form 990) 2018 SANTA CLARA COLLEGE	94-1156617	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	·····Yes	X No

Schedule F (Form 990) 2018

PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Schedule F (Form 990) 2018

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.

PART I, LINE 2:

THE UNIVERSITY GRANTS FUNDS TO JESUIT ORGANIZATIONS AND INDIVIDUALS IN

THE CENTRAL AMERICAN REGION PRIMARILY TO ASSIST STUDENTS WITH LOCAL

LIVING AND EDUCATIONAL EXPENSES. THE GRANTS ARE STRICTLY NEED BASED AND

THEIR USE IS MONITORED THROUGH FREQUENT CONTACT WITH THESE

STUDENTS/COMMUNITIES ON A REGULAR BASIS.

PART II, COLUMN (D):

REGION: CENTRAL AMERICA AND THE CARRIBEAN

(D) PURPOSE OF GRANT: DONATIONS TO SUPPORT PROGRAMS THAT BENEFIT

STUDENTS AND COMMUNITIES IN EL SALVADOR

SCHEDULE G Supplemental Information Regarding Fundraising or Gaming Activities							OMB No. 1545-0047	
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$1				r 19, or if the	2018	
Department of the Treasury		Open to Public Inspection						
Internal Revenue Service		Go to www.irs.gov/Form990 for instructions and the latest information.						
Name of the organizatior	SANTA C	NT-BOARD OF TRUSTE LARA COLLEGE				94-115		
	complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-	EZ filers are not	
<ol> <li>Indicate whether the a Mail solicitat</li> <li>Mail solicitat</li> <li>Internet and</li> <li>Phone solicit</li> <li>In-person so</li> <li>2 a Did the organization key employees lists</li> <li>b If "Yes," list the 10</li> </ol>	e organization rais ions email solicitations tations licitations on have a written o ed in Form 990, P highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Specia or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	ation of ation of I fundra I (includ	non-g gover iising ing of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	ו 🗌 ו	<b>Yes No</b> be	
compensated at le	ast \$5,000 by the	organization.						
(i) Name and address or entity (fund		(ii) Activity	(iii) fundr have ci or con contribu	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained b fundraiser listed in col. (i)	y) to (or retained by)	
			Yes	No				
Total								
		n is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from	registration	
					-			
LHA For Paperwork Re	eduction Act Noti	ice, see the Instructions for Form	990 or	990-E	.Z. 9	Schedule G (Forr	n 990 or 990-EZ) 2018	

832081 10-03-18

### PRESIDENT-BOARD OF TRUSTEES Schedule G (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE

94-1156617 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ. lines 1 and 6b. List events with gross receipts greater than \$5,000.

	of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	ts greater than \$5,000.
		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GOLDEN			(add col. (a) through
		CIRCLE	NCIP EVENT	8	col. (c)
m		(event type)	(event type)	(total number)	
Revenue	Gross receipts	1,862,100.	376,822.	639,650.	2,878,572
2	Less: Contributions	1,521,900.	360,697.	151,075.	2,033,672
3	Gross income (line 1 minus line 2)	340,200.	16,125.	488,575.	844,900
4	Cash prizes			1,300.	1,300
5	Noncash prizes			11,020.	11,020
JIrect Expenses	Rent/facility costs	36,718.	69,157.	94,564.	200,439
7	Food and beverages	408,742.	2,899.	119,312.	530,953
ا 8 ا	Entertainment	592,784.	1,800.	28,678.	623,262
9	Other direct expenses	232,024.		109,457.	367,186
10		9 in column (d)		►	1,734,160
11		ne 3, column (d)			-889,260
Part	<b>III Gaming.</b> Complete if the organization \$\$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
levenue	· · · · · · · · · · · · · · · · · · ·	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c

Ē				bingo/progressive bingo		col. (a) through col. (c))			
Revenue									
ř	1	Gross revenue							
	-								
	2	Cash prizes							
ses	-								
jen (	3	Noncash prizes							
Direct Expenses	3	Noncash prizes							
š	4	Pont/facility acata							
<u>ie</u>	4	Rent/facility costs							
	_								
_	5	Other direct expenses							
			Yes %		Yes %				
	6	Volunteer labor	No No	No No	No No				
	7	Direct expense summary. Add lines 2 through	1 5 in column (d)		►				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		🕨				
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:						
а	ls t	he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No			
b	lf "	No," explain:							
		· · ·							
10a	We	re any of the organization's gaming licenses re	woked suspended or te	rminated during the tax	/ear?	Yes No			
		Yes," explain:		• •					
5									

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

Sch	edule G (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE	94-1	156617	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility		13a	%
	An outside facility		13b	<u> </u>
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			///
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
t	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶\$	ount		
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	I is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i			
	organization's own exempt activities during the tax year 🕨 \$			
Pa	<b>ITTIV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	and Part	III, lines 9, 9	9b, 10b,
8330	83 10-03-18 Schedule	G (Form	990 or 990	-F7) 2019
0020	Sciledule		200 01 220	2010

	PRESI	DENT-BO	DARD OF	TRUSTEES
990 or 990-EZ)	SANTA	CLARA	COLLEG	E

Schedule G	(Form 990 or 990-EZ)	SANTA CLARA	COLLEGE	94-1156617	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (continued)			<u> </u>
	••	(continued)			

Schedule G (Form 990 or 990-EZ)

SCHEDULE I	G	arants and Oth	er Assistan	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)	Go	vernments, an ete if the organization	d Individual	s in the Ŭni	ted States		2018
Department of the Treasury			Attach to Form	m 990.			Open to Public
Internal Revenue Service			s.gov/Form990 fo	r the latest inform	nation.		Inspection
Name of the organization PRESIDENT SANTA CLA							Employer identification number 94-1156617
Part I General Information on Grants a	nd Assistance						
<ol> <li>Does the organization maintain records t criteria used to award the grants or assis</li> </ol>		•		• • • •	<b>v</b>	•	
2 Describe in Part IV the organization's pro	cedures for monit	oring the use of grant i	funds in the United	States.			
Part II Grants and Other Assistance to I					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	-					, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CASA DE CLARA							
318 N. 6TH ST							
SAN JOSE, CA 95112	26-3837400	501(C)(3)	6,875.	0.			COMMUNITY SUPPORT
CATHOLIC CHARITIES OF SANTA CLARA COUNTY - 2625 ZANKER ROAD, #200 - SAN JOSE, CA 95134-2107	94-2762269	501(C)(3)	7,870.	0.			COMMUNITY SUPPORT
DIOCESE OF SACRAMENTO 2110 BROADWAY SACRAMENTO, CA 95818	46-2906419	501(C)(3)	6,953.	0.			COMMUNITY SUPPORT
DIOCESE OF SAN JOSE 1150 NORTH FIRST ST #100 SAN JOSE, CA 95112	94-2734503	501(C)(3)	23,652.	0.			COMMUNITY SUPPORT
GLOBAL BRIGADES, INC. 1099 E CHAMPLAIN DR STE A176 FRESNO, CA 93720	37-1551109	501(C)(3)	5,917.	0.			COMMUNITY SUPPORT
INTERNATIONAL FOOD AND							
AGRIBUSINESS MANAGEMENT							
ASSOCIATION - 5775 WAYZATA BLVD,							DONATIONS TO SUPPORT
SUITE 700 - MINNEAPOLIS, MN 55416	74-2585021	501(C)(3)	10,000.	0.			WORLD FORUM
2 Enter total number of section 501(c)(3) and	nd government org	ganizations listed in the	e line 1 table				
3 Enter total number of other organizations	s listed in the line 1	I table					

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

Schedule I (Form 990) (2018)

Schedule I (Form 990)

SANTA CLARA COLLEGE

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGNATIAN SOLIDARITY NETWORK							
1 JOHN CARROLL BLVD							
UNIVERSITY HEIGHTS, OH 44118	34-2000767	501(C)(3)	5,449.	0.			COMMUNITY SUPPORT
JESUIT RESTORATIVE JUSTICE							
INITIATIVE - 9309 RAYO AVE - SOUTH							
GATE, CA 60280-3612	80-0404971	501(C)(3)	6,787.	0.			COMMUNITY SUPPORT
MARYKNOLL FATHERS AND BROTHERS							
4001 STONERIDGE DRIVE							DONATIONS TO SUPPORT
PLEASANTON, CA 94588	13-1740144	501(C)(3)	40,000.	0.			IMMERSION PROGRAMS
SACRED HEART COMMUNITY SERVICES							
1381 SOUTH FIRST STREET	22 71 70 70 7	F01 ( g) ( 2 )	12 010	0			
SAN JOSE, CA 95110	23-7179787	501(C)(3)	13,816.	0.			COMMUNITY SUPPORT
SACRED HEART NATIVITY SCHOOL 310 EDWARDS AVENUE							
SAN JOSE, CA 95110	95-2206754	501(C)(3)	9,019.	Ο.			COMMUNITY SUPPORT
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY - 326 GALVEZ STREET - STANFORD, CA							DONATIONS FOR SUPPORT C THE HOOVER INSTITUTION
94305-6105	94-1156365	501(C)(3)	15,000.	0.			AND THE SIEPR
THE PANETTA INSTITUTE FOR PUBLIC POLICY - 100 CAMPUS CENTER,							SPONSORSHIP FOR AWARD GALA & DONATIONS TO SUPPORT LEADERSHIP
BUILDING 86E - SEASIDE, CA 93955	77-0495799	501(C)(3)	35,000.	0.			SEMINARS

Schedule I (Form 990)

Schedule I (Form 990) (2018)

#### SANTA CLARA COLLEGE

94-1156617 Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INANCIAL AID AND SCHOLARSHIPS	4963	106,604,300.	0.	воок	NA
OTHER STUDENT AWARDS	594	1,624,230.	0.	воок	NA

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

PART I, LINE 2:

THE UNIVERSITY PROVIDES GRANTS FOR SCHOLARSHIPS, FELLOWSHIPS, AND STUDENT

LOANS USING GUIDELINES ESTABLISHED BY THE ORGANIZATION'S BOARD OF TRUSTEES

TO ENSURE THEY ARE MADE BASED ON NEED AND OR MERIT. SCU MAKES FINANCIAL AID

GRANTS TO STUDENT ACCOUNT TO OFFSET AMOUNTS THAT STUDENTS OWE THE

UNIVERSITY FOR TUITION AND FEES.

SCHEDULE I, PART III COLUMN (B):

THE NUMBERS OF RECIPIENTS ARE OBTAINED FROM OUR STUDENT FINANCIAL

Schedule I	(Form 990)	S	SANTA	CLARA	COLLEGE		94-1156617	Page <b>2</b>
Part IV	Supplem	ental Inforn	nation					
ACCOUN	TING RE	CORDS.						
832291 04-01-18							Schedule I (F	orm 990)
04-01-18								

SC	CHEDULE J Compensation Information					
(Fo	rm 990)	-	-	00	40	
•		Compensated Employees		20	Ď	j –
_				Open to	Publ	ic
	tment of the Treasury al Revenue Service			•	ction	
Nam	e of the organizatio		Employer	identificati	on nu	mber
		SANTA CLARA COLLEGE	94-1	115661	7	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropr	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
			,			
			nal use			
	Travel for com					
	_					
		n 990)       For certain Officers, Directors, Trustees, Key Employees, and Highest         in of the Trasury       Complete if the organization answered "Yes" on Form 990, Part IV, line 23.         in of the Trasury       So to www.irs.gov/Form990 for instructions and the latest information.         PRESIDENT-BOARD OF TRUSTEES       Employer iden 94-115         1       Questions Regarding Compensation         Pack the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, at VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.         ✓       Firstclass or charter travel         → Travel for companions       Payments for business use of personal use         → Travel for companions       Payments for business use of personal residence         → Travel for companions       Payments for business use of personal residence         → Travel for companions       Personal services (such as maid, chauffeur, chef)         any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or imbursement or provision of all of the expenses deciribed above? If "No," complete Part III to explain         dictare which, if any, of the following the filing organization used to establish the compensation of the organization's EO/Executive Director, pay and the items checked on line 1a?         dictare which, if any, of the following the filing organization used to establish the compensation committee       X       Written				
	,	······································	,,			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	-			1b		x
2						
-				2	х	
3	Indicate which if a	by of the following the filing organization used to establish the compensation of the organization	ation's			
-	,					
			01110			
	· · ·					
			ommittoo			
			ommittee			
4	During the year di	any person listed on Form 000. Part VII. Section A line 1a, with respect to the filing				
4						
-	-	-		10		x
a h						X
d o						X
С				4C		
	If "Yes" to any of III	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only contine E011	1/2, 501(a)(4) and 501(a)(20) organizations must complete lines 5.0				
E			<b>n</b>			
5	-		лт			
-	-			<b>F</b> -		v
						X X
a				<u>5b</u>		
c			<b>n</b>			
6	-		лт			
-	e e			0-		X
						X
a		ation?		<u>6b</u>		
-		or 6b, describe in Part III.				
1	•	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		_	v	
~		nes 5 and 6? If "Yes," describe in Part III		7	X	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v
~				8		X
9		id the organization also follow the rebuttable presumption procedure described in		-		
		53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forr	n 990)	2018

832111 10-26-18

SANTA CLARA COLLEGE

Schedule J (Form 990) 2018

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 aren't 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.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denems	(B)(i)-(D)	reported as deferred on prior Form 990
(1) MICHAEL CROWLEY	(i)	331,958.	0.	6,500.	27,500.	33,934.	399,892.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) HARRY FONG	(i)	143,826.	0.	7,728.	15,645.	18,631.	185,830.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOHN KERRIGAN	(i)	505,516.	35,043.	7,475.	27,500.	31,711.	607,245.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MOLLY MCDONALD	(i)	255,145.	0.	9,635.	26,627.	50,579.	341,986.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOHN OTTOBONI	(i)	388,652.	0.	32,595.	27,500.	25,136.	473,883.	0.
SR. LEGAL COUNSEL & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DENNIS JACOBS	(i)	419,409.	0.	65,232.	27,500.	28,049.	540,190.	0.
PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LISA KLOPPENBERG	(i)	359,631.	0.	86,365.	27,500.	42,349.	515,845.	0.
DEAN, LAW SCHOOL	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JIM LYONS	(i)	360,560.	15,000.	36,461.	27,500.	31,312.	470,833.	0.
VP, UNIVERSITY RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MIKE SEXTON	(i)	293,074.	14,401.	4,288.	27,500.	22,352.	361,615.	0.
VP, ENROLLMENT MANAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) CHRIS SHAY	(i)	241,443.	0.	1,508.	24,915.	30,258.	298,124.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DEBORAH TAHMASSEBI	(i)	229,302.	0.	64,673.	23,784.	41,557.	359,316.	0.
DEAN, COLLEGE OF ARTS & SCIENCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) RENEE BAUMGARTNER	(i)	334,733.	0.	17,889.	27,500.	51,096.	431,218.	0.
EXECUTIVE DIRECTOR, ATHLETICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) CARYN BECK-DUDLEY	(i)	382,350.	0.	0.	27,500.	20,025.	429,875.	0.
DEAN, LEAVEY SCHOOL OF BUSINESS	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) TONY NGUYEN	(i)	276,798.	97,200.	0.	27,500.	16,145.	417,643.	0.
DIRECTOR OF INVESTMENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) SUSAN PARKER	(i)	208,804.	0.	111,832.	21,385.	26,178.	368,199.	0.
ASSOCIATE PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) HERBERT SENDEK	(i)	715,565.	0.	42,000.	27,500.	75,156.	860,221.	0.
HEAD COACH, MEN'S BASKETBALL	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2018

Page 2

94-1156617

# PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Schedule J (Form 990) 2018

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 aren't 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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(17) GODFREY MUNGAL (i	i)	195,107.	0.	0.	20,157.	31,669.	246,933.	0.
FORMER DEAN, SCHOOL OF ENGINEERING (ii		0.	0.	0.	0.	0.	0.	0.
(18) S. ANDREW STARBIRD (i		232,667.	0.	15,625.	23,789.	32,831.	304,912.	0.
FORMER DEAN, LEAVEY SCHOOL OF BUSINE (ii		0.	0.	0.	0.	0.	0.	0.
(19) ATOM YEE (i	i)	110,706.	0.	0.	12,198.	50,621.	173,525.	0.
FORMER DEAN, COLLEGE OF ARTS & SCIEN (ii	i)	0.	0.	0.	0.	0.	0.	0.
(i	i) 🗋							
(ii	i)							
(i	i) 🗌							
(ii	i)							
(i	i) 🗋							
(ii	i)							
(i								
(ii								
(i								
(ii								
(i								
(ii	-							
(i								
(ii								
(i								
(ii								
(i								
(ii								
(i								
(ii								
(i								
(ii								
(i								
(ii								
(i								
(ii	1						1	

Schedule J (Form 990) 2018

Page 2

94-1156617

SANTA CLARA COLLEGE

Schedule J (Form 990) 2018

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### PART I, LINE 1A:

WE PROVIDED FIRST CLASS TRAVEL TO EMPLOYEES FOR INTERNATIONAL TRAVEL IN

ACCORDANCE WITH OUR POLICY. NO PORTION IS TAXABLE TO THE EMPLOYEE.

WE PROVIDED GOLF CLUB MEMBERSHIPS TO THREE INDIVIDUALS WHO HAVE

RESPONSIBILITIES FOR FUNDRAISING. THERE IS NO WRITTEN POLICY REGARDING GOLF

MEMBERSHIPS. THE UNIVERSITY HAS PROCEDURES IN PLACE TO INSURE NO PERSONAL

CHARGES ARE REIMBURSED. NO PORTION IS TAXABLE TO THE EMPLOYEE.

PART I, LINE 7:

JOHN KERRIGAN, JIM LYONS, MIKE SEXTON, AND TONY NGUYEN RECEIVED BONUS

PAYMENTS FOR THEIR SERVICES AND PERFORMANCE DURING THE FISCAL YEAR.

PRESIDENT'S COMPENSATION:

THE PRESIDENT OF THE UNIVERSITY IS A MEMBER OF A RELIGIOUS CONGREGATION AND

IS SUBJECT TO A VOW OF POVERTY. THE FAIR MARKET VALUE OF THE PRESIDENT'S

COMPENSATION FOR HIS SERVICES IS PAID TO THE RELIGIOUS CONGREGATION OF

WHICH HE IS A MEMBER.

Schedule J (Form 990) 2018

Department of the Treasury Internal Revenue Service	► Complete if the organization of the transform the complete if the organization of the complete the complet	explanations, and to www.irs.gov/Fo	d "Yes" on Form anv additional ir	990, Part IV, formation in	, line 24a. Pı ı Part VI.	rovide descrip	tions,			0	20	1545-0047 18 Public ion	
	-BOARD OF TR	USTEES								identifi 1566		numbe	ər
	RA COLLEGE SEE PART VI		N (F) CON	TINUATI	ONG			9	4-1	100	<u>)   /</u>		
	-									(1-) 0-	hahalf	(1) D	
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued		ue price	(f) Description	on of purpose	( <b>g</b> ) De	ereased	(h) On of iss		(i) Poole financir	
								Vee	No				No
CALIFORNIA EDUCATIONAL						CONSTRUC	TTON &	res		res		res r	40
A FACILITIES AUTHORITY	52-1705592	130179BS2	08/28/1	5 11717	-		ENT OF FA		x		x		х
CALIFORNIA EDUCATIONAL	52 1705552	130179002	00/20/13	,, _,		DVANCE		-	- 23				<u></u>
B FACILITIES AUTHORITY	52-1705592	130179JX3	08/10/17	7 3040		RIOR IS			x		x		Х
CALIFORNIA EDUCATIONAL													<u> </u>
c FACILITIES AUTHORITY	52-1705592	130179NF7	12/28/17	7 6309	6951.s	SEE PART	VI		x		x		х
CALIFORNIA MUNICIPAL			· · ·				E TAXABLI	3					
D FINANCE AUTHORITY	20-1563466	NONE	06/12/19	4,875	,127.L	OAN AND	PAY COST	ר	x		x		х
Part II Proceeds				•									
				4		В	C				D		
1 Amount of bonds retired				30,000.									
2 Amount of bonds legally defeased													
3 Total proceeds of issue			. 118,72	24,575.	31,3	99,191.	63,962	<u>,242</u>	•	4	<u>,875</u>	5,12	7.
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds							3,214	<u>,098</u>	•				
6 Proceeds in refunding escrows						04,719.							
7 Issuance costs from proceeds			68	31,874.	1	46,330.	425	,147	•		45	5,12	<u>7.</u>
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceed	s						45 005	0.017					
10 Capital expenditures from proceeds				14,970.		44 004	45,927	,227	•		0.00		
11 Other spent proceeds			. 58,29	97,730.	3,8	44,894.	14 205	700		4	,830	),000	<u>J.</u>
· · · ·				010		3,247.	14,395	,/69	•				
13 Year of substantial completion				2018									
		a ana da (an	Yes	No	Yes	No	Yes	No	_	Yes	+	No	
14 Were the bonds issued as part of a refundir	0	( )		x		x		х				х	
if issued prior to 2018, a current refunding i				A				<u> </u>			+	A	
15 Were the bonds issued as part of a refundir issued prior to 2018, an advance refunding	0		x		x			х		х			
<ul> <li>Issued prior to 2018, an advance refunding</li> <li>Has the final allocation of proceeds been m</li> </ul>			<u>X</u>			x		X		23	+	x	
17 Does the organization maintain adequate b		nnort the	23					- 23			+	- 22	—
final allocation of proceeds?			x		x		x			х			
				1		1			<u> </u>		<u></u>	000) 0	

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

Schedule K (Form 990) 2018

### PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

94-1156617

Par	III Private Business Use								
			A		В		ç		<u> </u>
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?	Х			X		X		X
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?	Х			X		X		X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?	Х							
с	Are there any research agreements that may result in private business use of								
	bond-financed property?	Х			X		X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?	Х							
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		.10 %		.00 %		.00 %		.00 %
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		.00 %		.00 %		.00 %
6	Total of lines 4 and 5		.10 %		.00 %		.00 %		.00 %
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		x		X		x		Х
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
с	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?	Х		Х		Х		х	
Par	IV Arbitrage		1				1		
			A		В		С		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
-	Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?				-				
	Rebate not due yet?	X		X		X		Х	
	Exception to rebate?		X		x		x	X	1
	No rebate due?		X		x		x		x
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed								

Schedule K (Form 990) 2018

Schedule K (Form 990) 2018 SANTA CLARA COLLEGE			94-1	156617				Page 3
Part IV Arbitrage (Continued)								
		4	E	3	0	;	C	)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X		Х		Х		X
<b>b</b> Name of provider								
c Term of hedge		_						
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		Х		Х		X
<b>b</b> Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		Х		X
7 Has the organization established written procedures to monitor the requirements of								
section 148?	X		X		X		X	
Part V Procedures To Undertake Corrective Action							•	
	<i>I</i>	A	E	3	(	;	C	<u> </u>
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?	X		X		X		X	
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	uctions					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: CALIFORNIA EDUCATIONAL FACILITIE	S AUTHO	ORITY						
(F) DESCRIPTION OF PURPOSE:								
CONSTRUCTION & IMPROVEMENT OF FACILITIES & ADVANC	E REFUI	NDING O	F PRIOR	BONDS				

(A) ISSUER NAME: CALIFORNIA MUNICIPAL FINANCE AUTHORITY
(F) DESCRIPTION OF PURPOSE:
REFINANCE TAXABLE LOAN AND PAY COST OF ISSUANCE

#### PART I(F), COLUMN A THE PROCEEDS OF THIS BOND ISSUE WERE USED TO REFUND A PORTION OF THE BORROWER'S SERIES 2008 (ISSUED 12/11/2008).

PART I(F), COLUMN B

THE PROCEEDS OF THIS BOND ISSUE WERE USED TO REFUND A PORTION OF THE BORROWER'S SERIES 2010 (ISSUED 09/15/2010).

### PART I(F), COLUMN C

832123 11-01-18

 PRESIDENT-BOARD OF TRUSTEES

 Schedule K (Form 990) 2018
 SANTA CLARA COLLEGE
 94-1156617
 Page 4

 Part VI
 Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions (Continued)
 THE BONDS ARE BEING ISSUED TO FINANCE THE CONSTRUCTION, RENOVATION,

 REMODELING, FURNISHING AND EQUIPPING OF CERTAIN FACILITIES OF THE
 UNIVERSITY.

PART III, LINE 7

AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS REPORTED IN PART III, LINE 6, IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE.

PART I(F), COLUMN D THE PROCEEDS OF THIS BOND ISSUE WERE USED TO REFINANCE THE BORROWER'S TAXABLE LOAN (ISSUED 06/25/2014).

PART I(E) AND PART II - COLUMNS A, B, C THE DIFFERENCE BETWEEN PART I (E) AND PART II, LINE 3 IS DUE TO INTEREST EARNINGS ON INVESTED PROCEEDS.

SCHEDULE L		Transactio	ns With	Interested	Persons		OMB No.	1545-0047	
(Form 990 or 990-EZ)	Complete in	f the organization an	swered "Yes	s" on Form 990, Part	t IV, line 25a, 25b, 2	6, 27, 28a,	20	18	
Department of the Treasury				-EZ, Part V, line 38a 990 or Form 990-EZ				o Public	
Internal Revenue Service		Go to www.irs.gov/F			latest information.		Inspect		
Name of the organization		ENT-BOARD C		TEES			r identificati	on num	ber
Part I Excess B		CLARA COLLE sactions (section 5		ion 501(c)(4) and 50	1(c)(20) organization		.56617		
		n answered "Yes" on					lh		
1		(b) Relationship bet		lified	· · ·			Correcte	ed?
(a) Name of disqualit	fied person	person and o	rganization	(0	c) Description of tran	saction			lo
2 Enter the amount of	tax incurred by	/ the organization mar	nagers or disc	qualified persons duri	ng the year under				
						> \$			
<b>3</b> Enter the amount of	tax, if any, on I	line 2, above, reimburs	sed by the or	ganization		► \$			
Part II Loans to	and/or From	m Interested Per	sons.						
 Complete if	the organizatio	n answered "Yes" on	Form 990-EZ	, Part V, line 38a or F	orm 990, Part IV, lin	e 26; or if th	e organizatio	on	
reported an	amount on For	m 990, Part X, line 5,	- i						
(a) Name of	(b) Relation		(d) Loan to or from the	(e) Original	(f) Balance due	(g) In	(h) Approved by board or		ten
interested person	with organ	nization of loan	organization?	principal amount		default?	committee?	-	
MICHAEL SEXTO	N KEV E	MPLSHARED F	To From	375,000.	300,000.	Yes No X	Yes No X	Yes X	No
LISA KLOPPENE				250,000.	160,831.	X	X	X	
				-	•				
							+		
								+	
Total	·····		· · · · · · · · · · · · · · · · · · ·	> \$	460,831.				
		e Benefiting Inter							
		n answered "Yes" on				of	(a) Durr		
(a) Name of interes	sted person	(b) Relationship interested per		(c) Amount of assistance	(d) Type assistan		<b>(e)</b> Purp assist		
		the organiz							
LHA For Paperwork Re	eduction Act N	otice, see the Instruc	tions for Fo	rm 990 or 990-EZ.	Sch	edule L (Fo	rm 990 or 99	90-EZ) 2	2018

SEE PART V FOR CONTINUATIONS

832131 10-25-18

### Schedule L (Form 990 or 990-EZ) 2018 SANTA CLARA COLLEGE

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's uues?
				Yes	No
JAMES LEWIS	FAMILY MEMBER OF JO	67,373.	EMPLOYMENT		X
ELIZABETH RAMIREZ	FAMILY MEMBER OF WI	38,228.	EMPLOYMENT		X
SI 53, LLC	ENTITY MORE THAN 35	2,298,598.	LONG-TERM L		X
SI 23, LLC	ENTITY MORE THAN 35	3,499,992.	LONG-TERM L		X

#### Part V Supplemental Information.

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

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: MICHAEL SEXTON

(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE

(C) PURPOSE OF LOAN: SHARED EQUITY

(A) NAME OF PERSON: LISA KLOPPENBERG

(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE

(C) PURPOSE OF LOAN: NOTE RECEIVABLE

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JAMES LEWIS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY MEMBER OF JOHN (JACK) LEWIS, TRUSTEE

(A) NAME OF PERSON: ELIZABETH RAMIREZ

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY MEMBER OF WILLIAM S. CARTER, TRUSTEE

(A) NAME OF PERSON: SI 53, LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

63

Schedule L (Form 990 or 990-EZ) 2018

832132 10-25-18

11560521 146892 621509

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

# Schedule L (Form 990 or 990-EZ) SANT Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

#### ENTITY MORE THAN 35% OWNED BY JOHN A AND JOHN M SOBRATO, TRUSTEES

# (D) DESCRIPTION OF TRANSACTION: LONG-TERM LEASE

(A) NAME OF PERSON: SI 23, LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

ENTITY MORE THAN 35% OWNED BY JOHN A AND JOHN M SOBRATO, TRUSTEES

(D) DESCRIPTION OF TRANSACTION: LONG-TERM LEASE

Schedule L (Form 990 or 990-EZ)

832461 04-01-18

	SCHEDULE M Noncash Contributions							
(Fo	rm 990)						2018	
				answered "Yes" o	n Form 990, Part IV, lines 2	9 or 30.		
	ment of the Treasury Revenue Service	<ul> <li>Attach to Form 990</li> <li>Go to www.irs.gov/</li> </ul>		r instructions and	the latest information.		Open to Public Inspection	
Name	e of the organization	PRESIDENT-BO				Employe	r identification number	
		SANTA CLARA				9	94-1156617	
Par	tl Types of F	Property						
			(a)	(b)	(c)		(d)	
			Check if	Number of contributions or	Noncash contribution amounts reported on		d of determining contribution amounts	
			applicable		Form 990, Part VIII, line 1g	Honcash c	Untribution amounts	
1	Art - Works of art							
2	Art - Historical treas	ures						
3		ests						
4		ons						
5		hold goods						
6		cles						
7								
8								
9		traded	X	80	4,567,576.	AVERAGE	MKT VALUE	
10		held stock						
11	Securities - Partners							
	trust interests	•••••						
12	Securities - Miscella							
13	Qualified conservation							
	Historic structures							
14		on contribution - Other						
15		ntial						
16		ercial						
17								
18								
19								
20		supplies						
21								
22								
23		s						
24		ots						
25	Other (MI	SC SUPPLIES )	X	17	88,191.	SELLING	PRICE	
26	· · —	)						
27	Other (	/						
 28	Other (	/						
29		283 received by the organi	zation during	the tax year for co				
		zation completed Form 82						
			,.				Yes No	
30a	During the year, did	the organization receive b	v contributio	n anv property rep	orted in Part I, lines 1 throug	ah 28. that it		
		-	-	•••••	which isn't required to be u	-		
		•					30a X	
b		e arrangement in Part II.						
31		•	policy that re	equires the review of	of any nonstandard contribu	tions?	31 X	
					cit, process, or sell noncash			
JLU	-	-		-			32a X	
b	If "Yes," describe in							
33			column (c) fo	r a type of property	/ for which column (a) is che	cked		
	describe in Part II.					,		
LHA		eduction Act Notice, see	the Instruc	tions for Form 990	).	Sche	edule M (Form 990) 2018	
-							, , , , , , , , , , , , , , , , , , , ,	

#### PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

## SCHEDULE M, PART I, COLUMN (B):

#### NUMBER OF CONTRIBUTIONS

Schedule M (Form 990) 2018

SCHEDULE M, LINE 32B:

THE UNIVERSITY USES STOCK BROKERS TO SELL DONATED SECURITIES AND REAL

ESTATE BROKERS TO SELL DONATED REAL ESTATE.

Schedule M (Form 990) 2018

832142 10-18-18

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

# Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. PRESIDENT-BOARD OF TRUSTEES

SANTA CLARA COLLEGE

Inspection Employer identification number 94-1156617

OMB No. 1545-0047

Open to Public

18

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CENTRAL FOCUS, PROMOTES FACULTY AND STAFF LEARNING IN ITS VARIOUS

FORMS, AND EXHIBITS ORGANIZATIONAL LEARNING.

FORM 990, PART III, LINE 1:

SANTA CLARA UNIVERSITY IS A CATHOLIC AND JESUIT INSTITUTION THAT MAKES PROMOTES FACULTY AND STAFF LEARNING STUDENT LEARNING ITS CENTRAL FOCUS, IN ITS VARIOUS FORMS, AND EXHIBITS ORGANIZATIONAL LEARNING. STUDENT LEARNING TAKES PLACE AT THE UNDERGRADUATE AND GRADUATE LEVEL IN AN EDUCATIONAL ENVIRONMENT THAT INTEGRATES RIGOROUS INQUIRY AND SCHOLARSHIP, CREATIVE IMAGINATION, REFLECTIVE ENGAGEMENT WITH SOCIETY, AND A COMMITMENT TO FASHIONING A MORE HUMANE AND JUST WORLD. AS AN ACADEMIC COMMUNITY, WE EXPAND THE BOUNDARIES OF KNOWLEDGE AND INSIGHT THROUGH TEACHING, RESEARCH, ARTISTIC EXPRESSION, AND OTHER FORMS OF SCHOLARSHIP. IT IS PRIMARILY THROUGH DISCOVERING, COMMUNICATING, AND APPLYING KNOWLEDGE THAT WE EXERCISE OUR INSTITUTIONAL RESPONSIBILITY AS VOICE OF REASON AND CONSCIENCE IN SOCIETY, WE OFFER CHALLENGING ACADEMIC PROGRAMS AND DEMONSTRATE A COMMITMENT TO THE DEVELOPMENT OF: UNDERGRADUATE STUDENTS WHO SEEK AN EDUCATION WITH A STRONG HUMANISTIC ORIENTATION IN A PRIMARILY RESIDENTIAL SETTING GRADUATE STUDENTS, MANY OF THEM WORKING PROFESSIONALS IN SILICON VALLEY, WHO SEEK ADVANCED DEGREE PROGRAMS THAT PREPARE THEM TO MAKE SIGNIFICANT CONTRIBUTIONS TO THEIR FIELDS. IN ADDITION TO THESE CORE PROGRAMS, WE ALSO PROVIDE A VARIETY OF CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR NON-MATRICULATED STUDENTS.

67

FORM 990, PART VI, SECTION A, LINE 2:

- LARRY W. SONSINI AND ROBERT J. FINOCCHIO HAVE A BUSINESS RELATIONSHIP.

- JOHN A. SOBRATO AND JOHN M. SOBRATO HAVE A FAMILY AND BUSINESS

RELATIONSHIP.

- BETSY RAFAEL AND ROBERT FINOCCHIO HAVE A BUSINESS RELATIONSHIP.

- MICHAEL ENGH, S.J., AND WILLIAM (BILL) P. LEAHY, S.J. HAVE A BUSINESS RELATIONSHIP.

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

THE BOARD OF TRUSTEES HAS DELEGATED THE REVIEW OF THE FORM 990 TO THE AUDIT COMMITTEE. THE ORGANIZATION'S CONTROLLER'S OFFICE WORKED CLOSELY WITH THE OUTSIDE ACCOUNTING FIRM IT ENGAGED TO PREPARE THE RETURN. INFORMATION FOR THE RETURN WAS ALSO OBTAINED THROUGH DISCUSSIONS WITH SENIOR ADMINISTRATION AND THE GENERAL COUNSEL. THE AUDIT COMMITTEE ALSO MET WITH THE CONTROLLER'S OFFICE AND THE ACCOUNTING FIRM HIRED TO PREPARE THE FORM 990 AND THE RETURN WAS ACCEPTED. THE FINAL DRAFT WAS PROVIDED TO THE ENTIRE VOTING BOARD BEFORE THE RETURN WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF TRUSTEES HAS A CONFLICT OF INTEREST POLICY AS PART OF THE BYLAWS. THE ASSISTANT TREASURER IS RESPONSIBLE FOR MONITORING POTENTIAL CONFLICT OF INTEREST. ANNUALLY, A QUESTIONNAIRE IS SENT TO THE BOARD OF TRUSTEES, OFFICERS AND KEY EMPLOYEES ASKING FOR ANY POSSIBLE BUSINESS OR PERSONAL CONNECTION TO THE ORGANIZATION THAT MAY CAUSE A POTENTIAL CONFLICT. THE PROCEDURES FOR ADDRESSING ANY CONFLICT OF INTEREST INCLUDES, BUT IS NOT LIMITED TO, THE FOLLOWING:

(1) THE CONFLICTING INTEREST IS FULLY DISCLOSED TO THE PRESIDENT AND BOARD; 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018) 68

11560521 146892 621509

2018.05091 PRESIDENT-BOARD OF TRUSTE 621509_1

Schedule O (Form 990 or 9	90·EZ) (2018)	Page <b>2</b>
Name of the organization	PRESIDENT-BOARD OF TRUSTEES	Employer identification number
	SANTA CLARA COLLEGE	94-1156617

(2) THE INTERESTED PERSON RESPONDS TO FACTUAL QUESTIONS RELATED TO THE

SUBSTANCE OF THE TRANSACTION OR ARRANGEMENT BEING CONSIDERED, AFTER WHICH

HE/SHE SHALL LEAVE THE MEETING;

(3) THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE

DISCUSSION AND APPROVAL OF SUCH TRANSACTION;

(4) ALTERNATIVES TO THE PROPOSED TRANSACTION ARE INVESTIGATED, COMPETITIVE

BIDS OR COMPARABLE VALUATIONS ARE OBTAINED;

(5) THE TRANSACTION OR ACTION MUST BE APPROVED BY A MAJORITY OF

DISINTERESTED PERSONS.

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

THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES HAS THE AUTHORITY TO REVIEW AND DETERMINE THE PRESIDENT'S COMPENSATION. DISCUSSIONS OF THE PRESIDENT'S COMPENSATION WERE DOCUMENTED IN THE MINUTES OF MEETINGS OF THE EXECUTIVE COMMITTEE. THE COMPENSATION OF THE PROVOST AND VICE PRESIDENTS ARE DETERMINED BY THE PRESIDENT. OTHER KEY EMPLOYEES' COMPENSATION IS DETERMINED BY THE RESPECTIVE VICE PRESIDENT OR PROVOST. IN ALL CASES, COMPARABLE DATA FROM SIMILAR ORGANIZATIONS AND POSITIONS WERE USED TO DETERMINE COMPENSATION LEVELS. THIS INFORMATION COMES FROM INDEPENDENT SURVEY DATA. EACH EMPLOYEE'S COMPENSATION IS DOCUMENTED IN THEIR RESPECTIVE PERSONNEL FILES AND THEY ARE PERSONALLY NOTIFIED OF ANY CHANGES IN COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19: WHILE FEDERAL TAX LAWS DO NOT MANDATE THAT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS BE MADE AVAILABLE FOR PUBLIC INSPECTION, THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST. 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

11560521 146892 621509

Name of the organization PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE	Employer identification numl 94-1156617
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON UNCOLLECTIBLE PLEDGES	-647,118
UNRELATED BUSINESS INCOME/(LOSS) FOR TAX NOT FOR BOOK	
TOTAL TO FORM 990, PART XI, LINE 9	-647,118
832212 10-10-18	Schedule O (Form 990 or 990-EZ) (2
70 60521 146892 621509 2018.05091 PRESIDENT-	BOARD OF TRUSTE 621

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

Name of the organization PRESIDENT-BOARD OF TRUSTEES

		SEE	PART	VII	FOR	CONTINUATIONS
832161 10-02-18	LHA					

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

Schedule R (Form 990) 2018

**Related Organizations and Unrelated Partnerships** 

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

#### 2018 Attach to Form 990. Open to Public Inspection Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. PRESIDENT-BOARD OF TRUSTEES Name of the organization Employer identification number 94-1156617 SANTA CLARA COLLEGE

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
ADOBE MANAGEMENT A LLC - 81-1570359					
500 EL CAMINO REAL					
SANTA CLARA, CA 95053	INVESTING PURPOSES	DELAWARE	0.	2,831,045.	SANTA CLARA UNIVERSITY
MAKENA ABSOLUTE RETURN SPLITTER X, L.P					
80-0804683, 2755 SAND HILL ROAD, SUITE 200,					
MENLO PARK, CA 94025	INVESTING PURPOSES	DELAWARE	12,872.		SANTA CLARA UNIVERSITY
	-				
	-				

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 Part II organizations during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
BRONCO BENCH FOUNDATION - 94-6121957					PRESIDENT-BOARD		
SANTA CLARA UNIVERSITY	7				OF TRUSTEE SANTA		
SANTA CLARA, CA 95053	FUNDRAISING	CALIFORNIA	501(C)(3)	LINE 12B, II	CLARA COLLEGE	x	
JESUIT SCHOOL OF THEOLOGY OF SANTA CLARA -					PRESIDENT-BOARD		
94-1156462, 1735 LE ROY AVE, BERKELEY, CA	7				OF TRUSTEE SANTA		
94709	EDUCATION	CALIFORNIA	501(C)(3)	LINE 1	CLARA COLLEGE	x	
	-						
	-						

OMB No. 1545-0047

### Schedule R (Form 990) 2018 SANTA CLARA COLLEGE

94-1156617 Page 2

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

(b)	(c)	(d)	(e)	(f)	(g)	(ł	ר)	(i)	(j)	(k)
Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets			amount in box 20 of Schedule	managin partner	^{pr} Percentage ownership
	country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	
NVESTING		SANTA CLARA	REVENUE							
URPOSES	DE	UNIVERSITY	EXCLUDED	72,308.	12,623,805.		x	N/A	x	75.00%
	Primary activity	Primary activity     Legal domicile (state or foreign country)       IVESTING	Primary activity     Legal domicile (state or foreign country)     Direct controlling entity       IVESTING     SANTA CLARA	Primary activity     Legal domicile (state or foreign country)     Direct controlling entity     Predominant income (related, unrelated, excluded from tax under sections 512-514)       IVESTING     SANTA CLARA     REVENUE	Primary activity       Legal domicile (state or foreign country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income         IVESTING       SANTA CLARA       REVENUE       Image: state section secti	Primary activity       Legal domicile (state or foreign country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income       Share of end-of-year assets         IVESTING       SANTA CLARA       REVENUE       Image: Country of the section of the sec	Primary activity       Legal domicile (state or foreign country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income       Share of end-of-year assets       Disproplation         IVESTING       SANTA CLARA       REVENUE       REVENUE       Image: section sect	Primary activity       Legal domicile (state or foreign country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income end-of-year assets       Disproportionate allocations?         INVESTING       SANTA CLARA       REVENUE       Image: section se	Primary activity       Legal domicile (state or country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income       Share of end-of-year assets       Disproportionate allocations?       Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)         IVESTING       SANTA CLARA       REVENUE       Image: Code V-UBI income       Image: Code V-UBI income       Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Primary activity       Legal domicile (state or foreign country)       Direct controlling entity       Predominant income (related, unrelated, excluded from tax under sections 512-514)       Share of total income       Share of total income       Disproprionate allocations?       Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)       General of managin partner?         IVESTING       SANTA CLARA       REVENUE       REVENUE       REVENUE       Image: Not section

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	512(i contr	i) tion b)(13) rolled ity?
		country)		or trusty		255615		Yes	No
	-								
CHARITABLE REMAINDER TRUST (22)	HOLDINGS	CA	N/A	TRUST					x
MAKENA ABSOLUTE RETURN BLOCKER Y (CAYMAN),									
LP - 98-1049154, 2755 SAND HILL ROAD, SUITE		CAYMAN	SANTA CLARA						
200, MENLO PARK, CA 94025	INVESTING	ISLANDS	UNIVERSITY	C CORP			100%	X	

Schedule R (Form 990) 2018 SANTA CLARA COLLEGE

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Σ
<b>b</b> Gift, grant, or capital contribution to related organization(s)			2
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)		X	
e Loans or loan guarantees by related organization(s)			2
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	<b>1</b> h		
i Exchange of assets with related organization(s)	<u>1i</u>		
j Lease of facilities, equipment, or other assets to related organization(s)			-
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)		X	
n Performance of services or membership or fundraising solicitations by related organization(s)		X	
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
Sharing of paid employees with related organization(s)		X	
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			+
Other transfer of cash or property to related organization(s)	1r	x	_
	1s		

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) BRONCO BENCH FOUNDATION	С	1,699,655.	FMV
(2) JESUIT SCHOOL OF THEOLOGY OF SANTA CLARA	D	16,419,552.	FMV
(3) JESUIT SCHOOL OF THEOLOGY OF SANTA CLARA	R	1,766,278.	FMV
<u>(4)</u>			
(5)			
<u>_(6)</u>			

Schedule R (Form 990) 2018 SANTA CLARA COLLEGE

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501( org Yes	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(r Dispr tior allocat Yes	opor- late tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes N	or Percentage ownership

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018

#### PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COLLEGE

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

#### PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME OF DISREGARDED ENTITY:

ADOBE MANAGEMENT A LLC

DIRECT CONTROLLING ENTITY: SANTA CLARA UNIVERSITY

NAME OF DISREGARDED ENTITY:

MAKENA ABSOLUTE RETURN SPLITTER X, L.P.

DIRECT CONTROLLING ENTITY: SANTA CLARA UNIVERSITY

Schedule R (Form 990) 2018

832165 10-02-18