Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning JUL 1, 2022 and e	ending ਹਾ	JN 30, 2023				
	heck if pplicable	C Name of organization	D Employer ide	ntificat	tion number			
	Addres	BABSON COLLEGE						
	Name change			04-2103	544			
	Initial return Final	,	Room/suite	E Telephone nui				
	return/ termin	231 FOREST STREET		781-239-5	298	F.CC 010 F0.4		
_	ated Ameno	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		566,210,784.		
	_return □Applic	BABSON PARK, MA 02437-0310	H(a) Is this a gro	•				
	⊥tion pendir	F Name and address of principal officer: STEFFEN SFINEDLE		for subordin		····· — —		
				H(b) Are all subordina				
		empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) o	r 527	1		t. See instructions		
	Vebsit		I Veer	H(c) Group exem				
		organization: X Corporation Trust Association Other Summary	L Year	of formation: 1919	M S	State of legal domicile: MA		
1 0		-	EDIII'E O					
e	1	Briefly describe the organization's mission or most significant activities: SEE SCH	IDODE O					
ıаи	2	Check this box if the organization discontinued its operations or dispose	nd of more	than 25% of its no	t accot			
Governance					3	29		
Ĝ		Number of independent voting members of the governing body (Part VI, line 1b)			4	28		
ళ		Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	2266			
Activities &		Total number of volunteers (estimate if necessary)		6	1891			
cţi		Total unrelated business revenue from Part VIII, column (C), line 12		7a	-82,832.			
ď		Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.			
				Prior Year		Current Year		
ø.	8	Contributions and grants (Part VIII, line 1h)	64,936,5	66.	48,818,122.			
ű	9	Program service revenue (Part VIII, line 2g)		244,383,9	07.	269,429,722.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		84,990,1	24.	22,533,869.		
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		397,619,4	50.	344,014,371.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	80. 62,386,411.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		124,241,3	16.	138,954,324.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.					
xbe	b	Total fundraising expenses (Part IX, column (D), line 25) 11,436,9						
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		97,982,0				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		280,964,7	-	305,464,086.		
	19	Revenue less expenses. Subtract line 18 from line 12		116,654,6		38,550,285.		
s or	20 21 22		Ве	ginning of Current Y		End of Year		
sset 3ala	20	Total assets (Part X, line 16)		1,081,136,4		1,116,080,345.		
let A	21	Total liabilities (Part X, line 26)		262,968,4 818,168,0		249,328,947. 866,751,398.		
Pa	rt II	Net assets or fund balances. Subtract line 21 from line 20		010,100,0	00.	000,731,330.		
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nte and to the heet	of my kr	nowledge and helief it is		
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			71 IIIY KI	lowicage and boller, it is		
ii uo,	001100	Katherine P. Craven	on propuror	5/14/2	2024			
Sigr	,	Signature of officer		Date				
Her		KATHERINE CRAVEN, CAO/CFO						
	_	Type or print name and title						
		Print/Type preparer's name Preparer's signature	1	Date Chec	:k	PTIN		
Paid		CRAIG KLEIN	0 !	5/10/24 if self-	employed	P00734640		
	arer	Firm's name CBIZ MHM, LLC		Firm's EIN		-3753134		
Use		Firm's address 500 BOYLSTON STREET						
		BOSTON, MA 02116		Phone no.	617-7	61-0600		
May	the IF	RS discuss this return with the preparer shown above? See instructions				X Yes No		

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: BABSON COLLEGE EDUCATES ENTREPRENEURIAL LEADERS WHO IMPACT COMMUNITIES	
	EVERYWHERE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur	ed by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the t revenue, if any, for each program service reported.	otal expenses, and
4a	(Code:) (Expenses \$ 262,708,597. including grants of \$ 62,386,411.) (Revenue \$	269,262,536.)
	BABSON COLLEGE ENROLLS APPROXIMATELY 2,800 UNDERGRADUATE AND NEARLY	
	1,200 GRADUATE STUDENTS FROM THE UNITED STATES AND MORE THAN 80	
	COUNTRIES WORLDWIDE. THE COLLEGE OFFERS EDUCATION IN BUSINESS AND	
	LIBERAL ARTS, AND IT GRANTS THE BACHELOR OF SCIENCE DEGREE THROUGH ITS	
	UNDERGRADUATE PROGRAM. THE COLLEGE ALSO GRANTS MASTER OF BUSINESS	
	ADMINISTRATION DEGREES AND CUSTOM MASTER OF SCIENCE DEGREES THROUGH THE	
	F.W. OLIN GRADUATE SCHOOL OF BUSINESS AT BABSON COLLEGE. ADDITIONALLY,	
	BABSON OFFERS DISTINCT EXECUTIVE EDUCATION PROGRAMS TO HELP COMPANIES	
	REACH THEIR STRATEGIC GOALS.	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$) (Revenue \$))
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 262,708,597.	
		Form 990 (2022)

04-2103544 Page 3

Form 990 (2022) BABSON COLLEGE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7		-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza	,	12a		x
L	Schedule D, Parts XI and XII	IZa		
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	406	х	
40	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		
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
•	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		х

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04-2103544

Form 990 (2022) | Part IV | Checklist of Required Schedules (continued)

	· (continued)						
22	Did the expenization report more than \$5,000 of grants or other assistance to or for demostic individuals on		Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	х				
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22	21				
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	, · · ·	23	х				
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23					
24 a							
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	040	х				
L	Schedule K. If "No," go to line 25a	24a 24b	21	х			
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240					
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		x			
	any tax-exempt bonds?	24c		X			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>			
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	050		x			
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>			
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	054		x			
00	Schedule L, Part I	25b		\vdash			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	1		1			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x			
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		\vdash			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,						
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>			
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,						
	instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		x			
	"Yes," complete Schedule L, Part IV	28a		X			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b					
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00-		x			
~~	"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	Λ				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x			
•	contributions? If "Yes," complete Schedule M	30		X			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x			
~~	Schedule N, Part II	32					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v				
0E -	Part V, line 1	34	X	\vdash			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	\vdash			
Ø	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	254	х				
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Λ	\vdash			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		x			
27	If "Yes," complete Schedule R, Part V, line 2	36		_			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization						
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI						
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		Х	1			
Pa	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ				
. u	Check if Schedule O contains a response or note to any line in this Part V						
	Shook is contidued to containe a responde of flote to any line in this fact v		Yes	No			
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	INO			
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 390 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 590	-					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
٠	(gambling) winnings to prize winners?	10	х				

Page **5** 04-2103544

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 2266									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х							
	Ba Did the organization have unrelated business gross income of \$1,000 or more during the year?									
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	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		х						
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).									
	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	х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х						
g										
h	· · · · · · · · · · · · · · · · · ·									
8										
	sponsoring organization have excess business holdings at any time during the year?									
9										
а	a Did the sponsoring organization make any taxable distributions under section 4966?									
b										
10	Section 501(c)(7) organizations. Enter:									
а	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:									
а	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
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									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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			х						
	excess parachute payment(s) during the year?									
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X				
Sec	tion A. Governing Body and Management									
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	29							
	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 on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	28							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other							
	officer, director, trustee, or key employee?			2	X					
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision							
				3		х				
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		Х				
6	Did the organization have members or stockholders?			6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	one or							
	more members of the governing body?			7a		х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st									
	persons other than the governing body?			7b		х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year									
а	The governing body?			8a	Х					
b	Each committee with authority to act on behalf of the governing body?			8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the							
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)							
	, , , , , , , , , , , , , , , , , , , ,		,		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such ch									
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b						
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
b										
12a										
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe							
	on Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	Х	<u> </u>				
15	Did the process for determining compensation of the following persons include a review and approva	I by in	dependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official			15a	X					
b	Other officers or key employees of the organization			15b	Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a							
	taxable entity during the year?			16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's							
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed CA, MA									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (section 501(c)(3)s	only)	availal	ble				
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website X Another's website X Upon request Other (explain	on Sc	hedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict c	of interest policy, and	l financ	cial					
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records							
	GAIL WILSON - 781-239-5692									
	231 FOREST STREET, BABSON PARK, MA 02457-0310									

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) STEPHEN SPINELLI	50.00	1								
PRESIDENT	0.00	Х		Х				831,897.	0.	110,216.
(2) EDWARD CHIU	40.00	-								
SR. VP OF ADVANCEMENT. SEE SCH. O.	0.00						Х	767,077.	0.	91,572.
(3) KATHERINE CRAVEN	40.00	1								
CHIEF ADMIN./FINANCIAL OFFICER	0.00			Х				531,608.	0.	34,263.
(4) RICHARD BLISS	40.00	1								
PROFESSOR	0.00					Х		503,840.	0.	45,506.
(5) KELLY LYNCH	40.00	-								
SENIOR VICE PRESIDENT	0.00					Х		512,455.	0.	36,443.
(6) JAY RAO	40.00	-								
PROFESSOR	0.00					Х		483,510.	0.	62,516.
(7) D. R. WIDDER	40.00	-								
VP OF INNOVATION	0.00					Х		428,323.	0.	64,089.
(8) BEN CHEVRETTE	40.00	-								
VICE PRESIDENT, DEVELOPMENT	0.00					Х		387,934.	0.	63,296.
(9) KENICHI MATSUNO	40.00	-								
VP ACADEMIC AFFAIRS & DEAN	0.00			Х				408,772.	0.	34,252.
(10) MICHAEL LAYISH	40.00	-								
SECRETARY & CLERK	0.00			Х				276,646.	0.	72,170.
(11) HARSHA AGADI	1.20	1								
TRUSTEE	0.00	Х						0.	0.	0.
(12) CHRISTINE ANGELAKIS	1.20	-								
TRUSTEE	0.00	Х						0.	0.	0.
(13) PATRICK BAIRD	1.20	-								
TRUSTEE (UNTIL 6/30/23)	0.00	Х						0.	0.	0.
(14) THE HONORABLE CRAIG BENSON	1.20	-								
VICE CHAIR, BOARD OF TRUSTEES	0.00	Х		Х				0.	0.	0.
(15) ETTORE V. BIAGIONI	1.20	-								
TRUSTEE	0.00	Х				_		0.	0.	0.
(16) ANDREW J. BUTLER	1.20	-								
TRUSTEE	0.00	Х						0.	0.	0.
(17) STEVE CANNON	1.20	1_								
TRUSTEE	0.00	Х		<u> </u>				0.	0.	0. Earm 990 (2022)

232007 12-13-22

Form 990 (2022) BABSON COLLE	3E								04-210354	4 Page 6	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	Estimated	
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of	
	week		cer an	id a d	d a director/trustee)			from	from related	other	
	(list any hours for	recto						the	organizations	compensation	
	related	or di	ee			ated		organization	(W-2/1099-MISC/	from the	
	organizations	ustee	trust		e e	ubeus		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related	
	below	dual tr	tional	١.	yoldı	st con yee	_	1099-1420)		organizations	
	line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			organizations	
(18) CYRIL CAMUS	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(19) ANTHONY CHIASSON	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(20) WARREN CROSS, JR.	1.20										
VICE CHAIR, BOARD OF TRUSTEES	0.00	Х		Х				0.	0.	0.	
(21) RICHELIEU DENNIS, JR.	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(22) DEBORAH DE SANTIS	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(23) CRAIG M. DONALDSON	1.20										
TRUSTEE (UNTIL 10/21/22)	0.00	Х						0.	0.	0.	
(24) BRETT A. GORDON	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(25) BRUCE HERRING	1.20										
TRUSTEE	0.00	Х						0.	0.	0.	
(26) ERIC JOHNSON	1.20										
VICE CHAIR, BOARD OF TRUSTEES	0.00	Х		Х				0.	0.	0.	
1b Subtotal								5,132,062.	0.	614,323.	
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)		5,132,062.	0.	614,323.							

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

379

			res	NO			
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on						
	line 1a? If "Yes," complete Schedule J for such individual	3	Х				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization						
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services						
	rendered to the organization? f "Yes." complete Schedule J for such person	5		X			
One then D. In the conduct On the state							

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WILEY EDU, LLC, 1415 WEST 22N STREET,		
SUITE 500, OAK BROOK, IL 60523-2084	ADVERTISING	2,913,698.
ASPIRE TECHNOLOGY PARTNERS, LLC, P.O. BOX		
789172, PHILADELPHIA, PA 19178-9172	IT CONSULTING	533,670.
HURON CONSULTING SERVICES, LLC, 550 WEST		
VAN BUREN STREET, CHICAGO, IL 60607	CONSULTING	504,083.
BEACON HILL STAFFING GROUP, LLC		
152 BOWDOIN STREET, BOSTON, MA 02108	STAFFING	477,342.
HH RUSSELL CONSULTING, LLC, 3112 WINDSOR		
ROAD, #102, AUSTIN, TX 78703-2350	CONSULTING	319,418.
2 Total number of independent contractors (including but not limited to those list \$100,000 of compensation from the organization 21	ed above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 BABSON COLLEGE 04-2103544

Form 990 BABSON COL	LEGE								04-21035	,
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Position				Reportable	Reportable	Estimated
	hours	(cl	heck	all :	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	ndividual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(27) JOHN JOHNSON	1.20									
TRUSTEE	0.00	Х						0.	0.	0.
(28) FRED S.C. KIANG	1.20									
TRUSTEE	0.00	Х						0.	0.	0.
(29) MICHAEL S. LORBER	1.20									
TRUSTEE	0.00	х						0.	0.	0.
(30) WASI MAHI	1.20							-		
TRUSTEE	0.00	Х						0.	0.	0.
(31) JEFFREY MCLANE	1.20									
TREASURER	0.00	Х		x				0.	0.	0.
(32) CHRISTOPHER MALONE	1.20									
TRUSTEE	0.00	х						0.	0.	0.
(33) RAMON MENDIOLA	1.20									-
TRUSTEE	0.00	х						0.	0.	0.
(34) GEOFFREY MOLSON	1.20								•	
TRUSTEE (UNTIL 3/16/23)	0.00	х						0.	0.	0.
(35) JEFFERY PERRY	1.20								•	
CHAIR, BOARD OF TRUSTEES	0.00	х		x				0.	0.	0.
(36) KENNETH G. ROMANZI	1.20								•	
TRUSTEE	0.00	х						0.	0.	0
(37) JAMES A. RULLO	1.20									-
TRUSTEE	1.20	х						0.	0.	0.
(38) SOMIA FARID SILBER	1.20									-
TRUSTEE	0.00	Х						0.	0.	0
(39) AMANDA STRONG	1.20									-
TRUSTEE	0.00	х						0.	0.	0
(40) DAVIDE VISCO	1.20									-
TRUSTEE	0.00	Х						0.	0.	0
(41) ROBERT E. WEISSMAN	1.20									
TRUSTEE (UNTIL 4/4/23)	0.00	х						0.	0.	0.
(42) RACHEL ZELCER	1.20									-
TRUSTEE	0.00	х						0.	0.	0.
									•	
		-								
		1								
		1								
		1								
	•	•		_	•	-	-			

Page 9

Form 990 (2022) BABSON COLD
Part VIII Statement of Revenue 04-2103544 BABSON COLLEGE

		Charle if Cabadula O contains a response	or note to envilin	o in this Dort VIII			
		Check if Schedule O contains a response	or note to any lin	e in this Part VIII	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
				Total Tovellae		business revenue	from tax under
							sections 512 - 514
ts ts	1 a	Federated campaigns 1a					
ran Cun	b	Membership dues 1b					
Ω̈́B	c	Fundraising events 1c					
ifts r A	d	Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	٥	Government grants (contributions) 1e	1,212,988.				
Sin	f	All other contributions, gifts, grants, and					
e ti	'		47 605 134				
ĕξ		similar amounts not included above 1f	47,605,134.				
ont od (9	Noncash contributions included in lines 1a-1f	2,780,246.	40 010 100			
<u>0</u> 6	h	Total. Add lines 1a-1f		48,818,122.			
			Business Code				
ė	2 a	TUITION & FEES	900099	213,557,980.	213,557,980.		
e Č	b	ROOM & BOARD	900099	39,658,008.	39,658,008.		
S	c	ED/NON-ED PROGRAM REV.	900099	16,213,734.	16,046,548.	167,186.	
am	d						
Program Service Revenue	е						
Prc	f	All other program service revenue					
		Total. Add lines 2a-2f		269,429,722.			
	3	Investment income (including dividends, intel		, , ,			
	3		·	7,373,052.		-314,302.	7,687,354.
		,		7,373,032.		314,302.	7,007,334.
	4	Income from investment of tax-exempt bond	•				
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a 3,234,522					
	b	Less: rental expenses 6b 0					
	С	Rental income or (loss) 6c 3,234,522	•				
	d Net rental income or (loss)		3,234,522.			3,234,522.	
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 237, 349, 196					
	b	Less: cost or other basis					
<u>o</u>		and sales expenses 7b 222,188,379	.				
an C	_	Gain or (loss) 7c 15,160,817					
Revenue		Net gain or (loss)	•	15,160,817.		64,284.	15,096,533.
er B		Gross income from fundraising events (not				,	,,
Othe	0 a	· ·					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188					
		Less: direct expenses 8	b				
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 199	a 6,170.				
	b	Less: direct expenses 9	8,034.				
	С	Net income or (loss) from gaming activities_		-1,864.			-1,864.
		Gross sales of inventory, less returns					
		and allowances 10					
	h	Less: cost of goods sold					
		Net income or (loss) from sales of inventory	•				
		Net income of (loss) from sales of inventory	Business Code				
sn	44		Business Code				
eo er	11 a						
Miscellaneous Revenue	b						
Sel Sev	С						
Mis	d	All other revenue					
_	е	Total. Add lines 11a-11d					
	12	Total revenue. See instructions		344,014,371.	269,262,536.	-82,832.	26,016,545.

04-2103544

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).

	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	57,460,046.	57,460,046.		
3	Grants and other assistance to foreign	, ,	, ,		
_	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	4,926,365.	4,926,365.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	2,842,796.	588,254.	1,738,440.	516,102
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	980,027.	980,027.		
7	Other salaries and wages	107,325,457.	85,808,929.	16,169,161.	5,347,367
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,939,265.	6,347,607.	1,196,093.	395,565
9	Other employee benefits	12,907,150.	10,319,534.	1,944,532.	643,084
0	Payroll taxes	6,959,629.	5,564,368.	1,048,506.	346,755
1	Fees for services (nonemployees):				
а	Management				
b	Legal	491,341.		491,341.	
С	Accounting	427,489.	25,300.	402,189.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	1,462,686.		1,462,686.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	425,198.	132,253.	290,648.	2,297
2	Advertising and promotion	8,545,995.	7,982,483.	475,342.	88,170
13	Office expenses	7,648,338.	6,250,935.	846,498.	550,905
14	Information technology	7,281,244.	6,812,315.	268,996.	199,933
15	Royalties	16 561 556	16 200 771	210 072	CO 713
6	Occupancy	16,561,556.	16,288,771.	210,072.	62,713
7	Travel	10,061,743.	7,866,303.	907,989.	1,287,451
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	3,232,385.	3,232,385.		
9	Conferences, conventions, and meetings	6,072,229.	6,072,229.		
20	Interest	0,072,223.	0,072,223.		
21	Payments to affiliates	18,842,325.	18,532,134.	238,879.	71,312
2	Insurance	20,012,020.	20,002,101.	200,015.	, 1 , 312
.s :4	Other expenses. Itemize expenses not covered				
.7	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	FOOD & BEVERAGE SERVICE	12,380,141.	12,358,428.	15,267.	6,446
b	PROFESSIONAL CONSULTING	7,657,085.	4,182,940.	3,285,806.	188,339
c	BAD DEBT EXPENSE	941,864.	32,965.	318,980.	589,919
d	AWARDS	253,210.	253,210.		
е	All other expenses	1,838,522.	690,816.	7,113.	1,140,593
25	Total functional expenses. Add lines 1 through 24e	305,464,086.	262,708,597.	31,318,538.	11,436,951
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)				

Form 990 (2022)
Part X Balance Sheet

Part A	Check if Schedule O con	tains a response or no	te to any	line in this Part Y			
	Oriect ii Ochedule O Colf	a response of the	ne to arry	mic ii uio i alt A	(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearin	ıg			64,166,035.	1	66,640,113.
2	2 Savings and temporary c				5,341,236.	2	5,309,117.
3	Pledges and grants receivable, net				63,577,026.	3	71,011,576.
4					4,972,275.	4	4,670,983.
5							
	trustee, key employee, cr	eator or founder, subs	stantial co	ontributor, or 35%			
	controlled entity or family	member of any of the	ese persoi	ns		5	
6	Loans and other receivab	les from other disqua	lified pers	ons (as defined			
	under section 4958(f)(1)),	and persons describe	ed in secti	on 4958(c)(3)(B)		6	
<i>ι</i> 7	Notes and loans receivab	le, net			1,002,842.	7	579,256.
Assets						8	
g \$		Comment of the comment			8,268,853.	9	9,539,982.
10:	a Land, buildings, and equi	pment: cost or other					
	basis. Complete Part VI o	f Schedule D	10a	588,741,159.			
	b Less: accumulated depre			324,580,812.	261,794,259.	10c	264,160,347
11	Investments - publicly tra	ded securities			148,395,192.	11	186,562,085
12					514,036,096.	12	499,202,379
13	Investments - program-re	ated. See Part IV, line	11			13	
14	Intangible assets					14	
15		Other assets. See Part IV, line 11				15	8,404,507
16					1,081,136,455.	16	1,116,080,345
17	Accounts payable and ac	Accounts payable and accrued expenses					38,555,299
18	Grants payable	Grants payable				18	
19					60,504,485.	19	56,742,942
20		Tax-exempt bond liabilities			138,169,915.	20	130,322,651
21						21	
ທ 22	Loans and other payable	s to any current or for	mer office	er, director,			
Liabilities	trustee, key employee, cr	eator or founder, subs	stantial co	ontributor, or 35%			
ᇢ	controlled entity or family	member of any of the	ese perso	ns		22	
ے 23 ا	Secured mortgages and	notes payable to unre	lated third	d parties	17,280,000.	23	15,915,000
24	Unsecured notes and loa	ns payable to unrelate	ed third pa	arties		24	
25	Other liabilities (including	federal income tax, p	ayables to	o related third			
	parties, and other liabilities	es not included on line	es 17-24).	Complete Part X			
	of Schedule D	of Schedule D				25	7,793,055.
26	Total liabilities. Add line	s 17 through 25			262,968,455.	26	249,328,947.
	Organizations that follow	w FASB ASC 958, ch	eck here	X			
Se	and complete lines 27, 2	28, 32, and 33.					
<u>k</u> 27	Net assets without donor	restrictions			308,419,492.	27	323,593,323.
<u>R</u> 28	Net assets with donor res	strictions			509,748,508.	28	543,158,075.
밀	Organizations that do n	ot follow FASB ASC	958, ched	ck here			
로	and complete lines 29 tl	rough 33.					
Net Assets or Fund Balances 22 28 29 31 32 32			s	L		29	
30						30	
Ϋ́ 31						31	
를 32					818,168,000.	32	866,751,398.
2 33					1,081,136,455.	33	1,116,080,345.

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		014,		
2						
3	Revenue less expenses. Subtract line 2 from line 1	3	38,550,285			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		168,		
5	Net unrealized gains (losses) on investments	5	10	033,	113.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
_	column (B))	10	866	751,	398.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				Щ	
				Yes	No	
1	Accounting method used to prepare the Form 990:					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.				
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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	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 Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х		
			Form	990	(2022)	

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

BABSON COLLEGE 04-2103544 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). Х A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

Schedule A (Form 990) 2022 BABSON COLLEGE 04-2103544 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support		•	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	. ,	` ,	. ,	()	, ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	37,575,035.	49,080,302.	37,979,875.	64,936,566.	48,818,122.	238,389,900.
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	37,575,035.	49,080,302.	37,979,875.	64,936,566.	48,818,122.	238,389,900.
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)						52,717,598.
6	Public support. Subtract line 5 from line 4.						185,672,302.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	37,575,035.	49,080,302.	37,979,875.	64,936,566.	48,818,122.	238,389,900.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,459,529.	6,390,163.	6,480,507.	8,794,527.	10,921,876.	39,046,602.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	46,775.			50,040.	6,170.	102,985.
11	Total support. Add lines 7 through 10						277,539,487.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12 1	,161,182,015.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (li	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	66.90 %
15	Public support percentage from 2021	Schedule A, Part I	I, line 14			15	67.03 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on li	ne 13 or 16a, and l	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	k this box and sto	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	, 16b, 17a, or 17b,	, check this box ar	nd see instructions	s
						Schedule A	(Form 990) 2022

Schedule A (Form 990) 2022 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.)

Se	ction A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business 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						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organization	on,
	check this box and stop here						<u></u>
	ction C. Computation of Publi					т т	
	Public support percentage for 2022 (I		•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					ТТ	
	Investment income percentage for 20					17	%
18	, ,					18	<u>%</u>
19a	a 33 1/3% support tests - 2022. If the						7 is not
-	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2021. If the						
200	line 18 is not more than 33 1/3%, che						H

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Schedule A (Form 990) 2022

Page 3

Schedule A (Form 990) 2022 BABSON COLLEGE 04-2103544 Page **4**

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on 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 on 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 line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	NO
	1		
	-		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	70		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	46:		
_	10b	- 000\	

Т.,

Section 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			
	the supported organization(s).	1		

Section D. All Type III Supporting Organizations

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 2 the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
а	The organization satisfied the Activities Test. Complete line 2 below.

The organization is the parent of each of its supported organizations. Complete line 3 below.

The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions)

Activities Test. Answer lines 2a and 2b below.

а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.

- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a 2b За

Yes No

3

Yes No

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 BABSON COLLEGE 04-2103544 Page **6**

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	g			
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		•				
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
_7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
_3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting orga	nization (see			
	instructions).	. •		•			

Schedule A (Form 990) 2022

Sche	dule A (Form 990) 2022 BABSON COLLEGE			04-2103544	Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)		
Sect	ion D - Distributions		•	Current Y	ear
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)	5		
6	Other distributions (describe in Part VI). See instructions.		6		
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which the	he organization is responsive			
	(provide details in Part VI). See instructions.	8			
9	Distributable amount for 2022 from Section C, line 6		9		
10	Line 8 amount divided by line 9 amount		10		
	•	(i)	(ii)	(iii)	
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2022	Distributa Amount for	
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990) 2022

d Excess from 2021 e Excess from 2022

SCHEDULE C

(Form 990)

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** 04-2103544 BABSON COLLEGE Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

political action committee (PAC). If a	political action committee (PAC). If additional space is needed, provide information in Part IV.									
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0						

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

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

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,

line 17b

Did the filing organization file Form 1120-POL for this year?

Schedule C (Form 990) 2022

LHA

232041 11-08-22

	edule C (F	orm 990) 2022 Complete if the org	BABSON COLLEGE	mnt under section	2 501/c)/3\ and file		103544 Page 2
Ра	I L II-A	section 501(h)).	janization is exe	inpi under section		a Form 5766 (ele	ection under
A (Check		ation belongs to an a	ffiliated group (and list in	n Part IV each affiliated	group member's nam	e, address, EIN,
			re of excess lobbying	•			
В	Check			and "limited control" pro	ovisions apply.		
		Limi	ts on Lobbying Exp			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lob	obying expenditures to infl	uence public opinion	(grassroots lobbying)			
b	Total lob	obying expenditures to infl	uence a legislative be	ody (direct lobbying) .			
С	Total lob	obying expenditures (add li	nes 1a and 1b)				
d		cempt purpose expenditure					
е	Total ex	empt purpose expenditure	es (add lines 1c and 1	d)			
f	Lobbyin	g nontaxable amount. Ente	er the amount from t	ne following table in bot	h columns.		
	If the am	ount on line 1e, column (a) c	or (b) is: The lo	bbying nontaxable am	ount is:		
Not over \$500,000			20% c	f the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000			000 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000			000 plus 10% of the exc	ess over \$1,000,000.		
	Over \$1	,500,000 but not over \$17	,000,000 \$225,	000 plus 5% of the exce	ss over \$1,500,000.		
	Over \$1	7,000,000	\$1,00	0,000.			
	Grassro	ots nontaxable amount (er	iter 25% of line 1f)				
h	Subtrac	t line 1g from line 1a. If zer	o or less, enter -0-				
i	Subtrac	t line 1f from line 1c. If zero	o or less, enter -0				
j	If there i	s an amount other than ze	ro on either line 1h o	r line 1i, did the organiz	ation file Form 4720		
		g section 4911 tax for this					Yes No
			4-Year A	veraging Period Under	Section 501(h)		
		(Some organizations t		501(h) election do not arate instructions for li	•	of the five columns b	elow.
			Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
		Calendar year al year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
	Lobbyin	g nontaxable amount					
		g ceiling amount					
-	•	f line 2a, column(e))					

Schedule C (Form 990) 2022

c Total lobbying expenditures

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

f Grassroots lobbying expenditures

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 e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)		(k	o)
	e lobbying activity.	Yes	ı	No	Amo	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?			Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			Х		
С	Media advertisements?			X		
	Mailings to members, legislators, or the public?			Х		
	Publications, or published or broadcast statements?			Х		
	Grants to other organizations for lobbying purposes?			Х		
	Direct contact with legislators, their staffs, government officials, or a legislative body?			X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			X		
	Other activities?	Х				1.
	Total. Add lines 1c through 1i			v		1.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Х		
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? † III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	<u>5) o</u>	r sec	tion	
	501(c)(6).	00 1(0)(0	,,, -			
					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			3		
_	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 answered "Yes."	"No" OR	(b) I	Part I		3, is
1	Dues, assessments and similar amounts from members			1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cai				
_	expenses for which the section 527(f) tax was paid).			20		
	Current year			2a 2b		
	Carryover from last year Total			2c		
	0000()/()/()			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
	expenditures next year?			4		
5	Taxable amount of lobbying and political expenditures. See instructions			5		
Pai	t IV Supplemental Information					
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group uctions); and Part II-B, line 1. Also, complete this part for any additional information.	list); Part II-	۹, lin	ies 1 ai	nd 2 (See	
	EDULE C, PART II-B, LINE 1					
LOBI	BYING ACTIVITIES					
THE	ORGANIZATION PAYS MEMBERSHIP DUES TO MEMBER ORGANIZATIONS WHICH MAY					
ENG	AGE IN LOBBYING ACTIVITIES. THEREFORE, A PORTION OF THE DUES MAY BE					
∡سسر	RIBUTABLE TO LOBBYING ACTIVITIES.					
7111	ALDOTADED TO DODDITHO ACTIVITIES.					

Schedule C (Form 990) 2022

Page 3

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number BABSON COLLEGE $04 \!-\! 2103544$

Par			Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			(1) = 1 · · · · · · · · · · · · · · · · · ·
		(a) Donor adv	sed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	~		
•	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor or	•	, , ,	
Par	impermissible private benefit?			
1	Purpose(s) of conservation easements held by the organization			artiv, mic 7.
•	Preservation of land for public use (for example, recrea	`	<u>^</u>	a historically important land area
	Protection of natural habitat			a certified historic structure
	Preservation of open space		1 103C1Vation of	a certified historic structure
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contr	ibution in the form o	of a conservation easement on the last
_	day of the tax year.	iod coricor valion com		Held at the End of the Tax Year
а				2a
b				
C	Number of conservation easements on a certified historic stru			
d	Number of conservation easements included in (c) acquired a			
				2d
3	Number of conservation easements modified, transferred, rele			
	year		•	
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspe	ection, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations,	and enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and	enforcing conservati	on easements during the year
				
8	Does each conservation easement reported on line 2(d) above			
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		· · · · · · · · · · · · · · · · · · ·	
	balance sheet, and include, if applicable, the text of the footn	lote to the organization	n's financial stateme	nts that describes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art. Historical T	reasures, or Oth	ner Similar Assets
	Complete if the organization answered "Yes" on Form	-	0000100, 01 01	ioi oiiiliai 7iootoi
12	If the organization elected, as permitted under FASB ASC 95		avonuo statomont ar	and balance shoot works
ıa	of art, historical treasures, or other similar assets held for pub			
	service, provide in Part XIII the text of the footnote to its finar	•	•	•
h	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public	•		
	provide the following amounts relating to these items:	ommoni, caacanon,		station of public convice,
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea			
_	the following amounts required to be reported under FASB A			J , F
а	Revenue included on Form 990, Part VIII, line 1	· ·		\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022

232051 09-01-22

BABSON COLLEGE Schedule D (Form 990) 2022 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply): X Public exhibition Loan or exchange program Scholarly research h Other X Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets X No to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c **d** Additions during the year 1d 1e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (c) Two years back (d) Three years back (a) Current year (b) Prior year (e) Four years back 662,431,288 701,494,830. 489,737,817, 459,393,515 421,920,139. **1a** Beginning of year balance 12,653,399. 8,355,522. 18,573,274. 6,421,834. 7,858,140. Contributions 28,797,419. -34,631,791. 222,208,932, 29,199,827, 44,410,399. Net investment earnings, gains, and losses 3,517,349. 4,074,599. 3,701,040, 3,481,664 3,322,842. Grants or scholarships Other expenditures for facilities 14,600,293. 8,712,674. 13,172,713. 13,947,135. 11,472,321. and programs Administrative expenses 685,764,464. 662,431,288. 701,494,830. 489,737,817, 459,393,515. End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 33.0000 a Board designated or quasi-endowment Permanent endowment 40.3000 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: (i) Unrelated organizations X 3a(i) Х (ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) depreciation 1,600,545.

Schedule D (Form 990) 2022

204,154,891.

30,644,947.

27,759,964.

264,160,347.

242,916,674.

53,948,086.

27,716,052.

e Other

b Buildings Leasehold improvements

d Equipment

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

1,600,545

447,071,565.

84,593,033.

55,476,016.

Schedule D (Form 990) 2022 BABSON COLLEGE			04-2103544 Page 3
Part VII Investments - Other Securities.			.
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) ALTERNATIVE INVESTMENTS	499,202,379.	END-OF-YEAR MARKET VALUE	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	499,202,379.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	l l		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
-	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.	7 10.,		I
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability	· · · · ·		(b) Book value
(1) Federal income taxes			
(2) GOVERNMENT ADVANCES FOR STUDENT LOANS			709,335.
(3) INTEREST RATE SWAP LIABILITY			2,761,436.
(4) LEASE LIABILITIES			4,322,284.
(5)			-,,
(6)			
(0) (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		7,793,055.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

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

BABSON COLLEGE 04-2103544 Schedule D (Form 990) 2022 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 a Net unrealized gains (losses) on investments **b** Donated services and use of facilities 2c c Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12. 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c c Other losses d Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART III, LINE 1A: WORKS OF ART. HISTORICAL TREASURES. LITERARY WORKS AND ARTIFACTS. WHICH ARE PRESERVED AND PROTECTED FOR EDUCATIONAL, RESEARCH, AND PUBLIC EXHIBITION PURPOSES. ARE NOT CAPITALIZED. THEY ARE NEITHER DISPOSED OF FOR FINANCIAL GAIN NOR ENCUMBERED IN ANY MANNER. ACCORDINGLY. SUCH COLLECTION ITEMS ARE NOT RECORDED FOR FINANCIAL STATEMENT PURPOSES, PART V, LINE 4:

BABSON COLLEGE'S ENDOWMENT CONSISTS OF OVER 300 INDIVIDUAL FUNDS WHICH

HAVE BEEN ESTABLISHED OVER TIME FOR VARIOUS PURPOSES. INCLUDING

SCHOLARSHIPS, CHAIRS AND PROFESSORSHIPS, FACILITIES, ATHLETICS, AND OTHER

EDUCATIONAL SERVICES.

Schedule D (Form 990) 2022

SCHEDULE E

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

	BABSON COLLEGE	04-210354	14	
Pa	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholars	ships? 2	Х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3		Х
	SEE SUPPLEMENTAL PAGE			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis		Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		х
b	Admissions policies?	5b		Х
	Employment of faculty or administrative staff?			Х
	Scholarships or other financial assistance?			Х
	Educational policies?			Х
	Use of facilities?			Х
	Athletic programs?			Х
	Other extracurricular activities?			Х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	Х	

232061 10-18-22

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

Schedule E (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** BABSON COLLEGE 04-2103544 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN 0 0 INVESTMENTS 20,402,224. EUROPE (INCLUDING ICELAND & GREENLAND) 0 7 PROGRAM SERVICES EXECUTIVE EDUCATION 216,810. 90,000. 0 2 EXECUTIVE EDUCATION SUB-SAHARAN AFRICA PROGRAM SERVICES EXECUTIVE EDUCATION 6 PROGRAM SERVICES 272,000. SOUTH AMERICA 0 MIDDLE EAST AND NORTH AFRICA 0 4 PROGRAM SERVICES EXECUTIVE EDUCATION 199,444. EAST ASTA AND THE PACIFIC 0 2 PROGRAM SERVICES EXECUTIVE EDUCATION 95,275. EUROPE (INCLUDING ICELAND & GREENLAND) 0 0 FUNDRAISING DEVELOPMENT 10,142. EAST ASIA AND THE DEVELOPMENT PACTETO 0 0 FUNDRATSING 48,039. 0 21 21,333,934. 3 a Subtotal **b** Total from continuation 0 9,597,317. 0 sheets to Part I Totals (add lines 3a 30,931,251. and 3b)

232071 10-17-22

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

Schedule F (Form 990) 2022

Schedule F (Form 990) BABSON COLLEGE 04-2103544 Page 1

<u>Schedule F (Form 990)</u> BABSON COLLEGE 04-2103544 Page 1							
Part I Continuatio	n of Activitie	s per Regior	(Schedule F (Form 990), Part I, line	3)			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
CENTRAL AMERICA AND							
THE CARIBBEAN	0	0	FUNDRAISING	DEVELOPMENT	10,370.		
EUDODE / INGLUDING							
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	ELECTIVE ABROAD	446,071.		
SOUTH AMERICA	0	0	PROGRAM SERVICES	ELECTIVE ABROAD	22,213.		
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ELECTIVE ABROAD	65,940.		
bob binimum in kton			I ROSIANI DERVICED		03,310.		
MIDDLE EAST AND							
NORTH AFRICA	0	0	PROGRAM SERVICES	ELECTIVE ABROAD	60,655.		
EAST ASIA AND THE							
PACIFIC	0	0	PROGRAM SERVICES	ELECTIVE ABROAD	22,225.		
EUDODE / TNGI UDING							
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD	3,737,539.		
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD	50,951.		
SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD	14,540.		
EAST ASIA AND THE							
PACIFIC	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD	240,448.		
Totals							

Schedule F (Form 990) BABSON COLLEGE 04-2103544 Page 1

Schedule F (Form 990)	BABSON COLLE			04-2103544	Page 1
Part I Continuatio	n of Activities	s per Regior	(Schedule F (Form 990), Part I, line 3)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS		3,990,671.
EAST ASIA AND THE					044 550
PACIFIC	0	0	GRANTS TO RECIPIENTS		841,572.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS		85,622.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS		0 500
SOUTH AMERICA	0	0	GRANIS TO RECIPIENTS		8,500.
Totals					9,597,317.

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	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the				L	1
			or counsel has provided a sect					

Page 3 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.

Part III can be duplicated if	additional space is needed	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
INSTITUTIONAL	EAST ASIA AND THE					CREDIT TO STUDENT	
GRANTS/SCHOLARSHIPS	PACIFIC	30	0.		841,572.	ACCOUNTS	FMV
INSTITUTIONAL GRANTS/SCHOLARSHIPS	EUROPE (INCLUDING ICELAND & GREENLAND)	182	0.		3,990,671.	CREDIT TO STUDENT	FMV
INSTITUTIONAL GRANTS/SCHOLARSHIPS	SOUTH AMERICA	1	0.		8 500.	CREDIT TO STUDENT ACCOUNTS	FMV
INSTITUTIONAL	SUB-SAHARAN					CREDIT TO STUDENT	
GRANTS/SCHOLARSHIPS	AFRICA	3	0.		85,622.	ACCOUNTS	FMV

Schedule F (Form 990) 2022 BABSON COLLEGE

Part IV Foreign Forms

04-2103544 Page 4

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

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2022

X Yes

6

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.
SCHEDULE F, PART I, LINE 2:
THE PROCEDURES FOR NEED-BASED AWARDS INCLUDE REVIEW AND RESOLUTION OF
ALL FEDERAL-PROCESSOR-IDENTIFIED ELIGIBILITY CONFLICTS, AND 100%
VERIFICATION OF REPORTED PARENT AND STUDENT INCOMES. FOR ALL FUNDS,
THERE IS A SEPARATION OF THE AWARDING AND DISBURSEMENT FUNCTIONS
(DIFFERENT INDIVIDUALS RESPONSIBLE FOR EACH), MONTHLY RECONCILIATIONS
BETWEEN STUDENT ACCOUNTS AND THE COLLEGE'S GENERAL LEDGER, AND AN
ANNUAL AUDIT IN ACCORDANCE WITH OMB CIRCULAR A-133.
SCHEDULE F, PART I, LINE 3:
ALL THE NUMBERS ARE BASED ON THE AMOUNTS ASSOCIATED WITH THE ACTIVITY
ON THE ORGANIZATION'S TRIAL BALANCE.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

2022
Open to Public

Inspection

Schedule I (Form 990) 2022

Name of the organization BABSON COLLEGI	Ε						Employer identification number 04-2103544
Part I General Information on Grants a	nd Assistance						
 Does the organization maintain records to criteria used to award the grants or assisted. Describe in Part IV the organization's process. 	stance?				-		
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) a	ı nd government org	I ganizations listed in the	e line 1 table		<u> </u>		
3 Enter total number of other organizations	s listed in the line 1	table					

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

Schedule I (Form 990) 2022 BABSON COLLEGE 04-2103544 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INSTITUTIONAL GRANTS/SCHOLARSHIPS	1797	0.	57,460,046.	FMV	CREDIT TO STUDENT ACCOUNTS
			, ,		
Part IV Supplemental Information. Provide the information rec	ւ quired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
SCHEDULE I, PART I, LINE 2:					
THE PROCEDURES FOR NEED-BASED AWARDS INCLUDE REVIE	W AND RESOLUT	ION OF			
ALL FEDERAL-PROCESSOR-IDENTIFIED ELIGIBILITY CONFL	ICTS, AND 100	8			
VERIFICATION OF REPORTED PARENT AND STUDENT INCOME	S. FOR ALL FU	NDS,			
THERE IS A SEPARATION OF THE AWARDING AND DISBURSE	MENT FUNCTION	S			
(DIFFERENT INDIVIDUALS RESPONSIBLE FOR EACH), MONT	HLY RECONCILI	ATIONS			
BETWEEN STUDENT ACCOUNTS AND THE COLLEGE'S GENERAL					
	,				
ANNUAL AUDIT IN ACCORDANCE WITH OMB CIRCULAR A-133	•				

SCHEDULE J (Form 990)

Compensation Information

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number BABSON COLLEGE $0\,4\,{-}\,2\,1\,0\,3\,5\,4\,4$

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account X Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		х
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
		_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
Ū	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Tom 300 of other organizations			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	
	Participate in or receive payment from an equity-based compensation arrangement?	4c		х
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The second of the second and provide the applicable amounts for each term in that in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		х
	Any related organization?	6b		х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
•	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	Х	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53.4958-6(c)?	9	Х	

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

Schedule J (Form 990) 2022

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-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) STEPHEN SPINELLI	(i)	635,887.	100,000.	96,010.	33,660.	76,556.	942,113.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) EDWARD CHIU	(i)	557,067.	188,838.	21,172.	33,660.	57,912.	858,649.	0.	
SR. VP OF ADVANCEMENT. SEE SCH. O.	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) KATHERINE CRAVEN	(i)	435,840.	76,600.	19,168.	33,660.	603.	565,871.	0.	
CHIEF ADMIN./FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) RICHARD BLISS	(i)	496,925.	0.	6,915.	28,906.	16,600.	549,346.	0.	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) KELLY LYNCH	(i)	406,453.	74,840.	31,162.	33,660.	2,783.	548,898.	0,	
SENIOR VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0,	
(6) JAY RAO	(i)	461,555.	0.	21,955.	22,067.	40,449.	546,026.	0,	
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) D. R. WIDDER	(i)	219,905.	196,059.	12,359.	24,768.	39,321.	492,412.	0.	
VP OF INNOVATION	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) BEN CHEVRETTE	(i)	292,906.	51,242.	43,786.	33,660.	29,636.	451,230.	0.	
VICE PRESIDENT, DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) KENICHI MATSUNO	(i)	406,000.	0.	2,772.	33,660.	592.	443,024.	0.	
VP ACADEMIC AFFAIRS & DEAN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) MICHAEL LAYISH	(i)	259,512.	13,876.	3,258.	29,877.	42,293.	348,816.	0.	
SECRETARY & CLERK	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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.

SCHEDULE J. PART I. LINE 1A:

HOUSING ALLOWANCE AND PERSONAL SERVICES:

THE PRESIDENT IS REQUIRED TO LIVE IN CAMPUS HOUSING AS A CONDITION OF

EMPLOYMENT FOR THE CONVENIENCE OF BABSON COLLEGE. THE FAIR MARKET VALUE

OF THE HOUSING IS INCLUDED AS A NONTAXABLE BENEFIT.

HEALTH OR SOCIAL CLUB:

THE PRESIDENT AND SR. VP OF ADVANCEMENT RECEIVED AN ANNUAL MEMBERSHIP

TO A LOCAL COUNTRY CLUB FOR BUSINESS USE RELATED TO THE COLLEGE.

SCHEDULE J. PART I. LINE 1B:

ALL OF THE ITEMS CHECKED ABOVE ARE INCLUDED AS PART OF THE INDIVIDUAL'S

EMPLOYMENT CONTRACT AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE

BOARD OF TRUSTEES.

SCHEDULE J, PART I, LINE 4B:

EFFECTIVE JULY 1, 2019 THE COLLEGE ENTERED INTO A NON-QUALIFIED SECTION

457(F) ARRANGEMENT WITH ITS PRESIDENT. UNDER THE TERMS OF THE PLAN. THE

PRESIDENT WILL RECEIVE A CREDIT TO HIS ACCOUNT OF NO LESS THAN \$52,500

Schedule J (Form 990) 2022

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. FOR EACH PLAN YEAR HE HOLDS THE TITLE OF THE PRESIDENT OF THE COLLEGE ON JUNE 30TH OF SUCH PLAN YEAR. AMOUNTS AWARDED UNDER THE PLAN WERE 100% VESTED AT THE TIME OF THE AWARD. \$52,500 WAS CREDITED IN 2022 AND IS INCLUDED IN SCHEDULE J. PART II, COLUMN B (III). SCHEDULE J. PART I. LINE 7: CERTAIN LISTED INDIVIDUALS MAY RECEIVE A NON-FIXED PAYMENT BONUS. ALL BONUSES ARE APPROVED BY THE PRESIDENT AND REVIEWED BY HUMAN RESOURCES. SCHEDULE J. PART I. LINE 8: STEPHEN SPINELLI, PRESIDENT AS OF 7/1/2019, IS UNDER HIS INITIAL CONTRACT WITH BABSON COLLEGE.

Page 3

Schedule J (Form 990) 2022

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

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

2022
Open to Public Inspection

Name of the organization

BABSON COLLEGE

Employer identification number 04-2103544

									·		-		
Part I Bond Issues			_					_					
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description	n of purpose	(g) De	feased	(h) On			
										of is	suer	finar	Ť
								Yes	No	Yes	No	Yes	No
A MA DEVELOPMENT FINANCE AGENCY (2022)	04-3431814	57584Y2D0	01/05/22	63,8	72,340.	SEE PART VI			Х		Х		Х
	04 0404044		10/05/17	20.0		ATH/WELLNESS	CENTER		l		_		l
B MA DEVELOPMENT FINANCE AGENCY (2017)	04-3431814	57584YBM0	12/26/17	38,0	92,499.		(0005-) -		Х		Х		Х
MA DEVELOPMENT FINANCE AGENCY	04 2421014	EEEO AMAGO	00/05/15	06.8		REFINANCE DE	3T (2005A) &						١
C (2015A)	04-3431814	57584XCC3	08/05/15	26,7	50,183.	(2007A)			Х	-	Х		Х
MA DEVELOPMENT FINANCE AGENCY	04 2421014	F#F03D###3	04/15/00	26.4	75 000								١
D (2008A)	04-3431814	57583RUW3	04/17/08	36,4	75,000.	SEE PART VI			Х		Х		X
Part II Proceeds									1				
			A	CEE 000		B	<u>C</u>	8,110,000.			D 16,365,0		
				655,000.	2,755,000. 8			10,000	'·		16	, 365,	000
2 Amount of bonds legally defeased				070 240		20, 660, 260	26.71	-0 101	,		2.0	475	000
3 Total proceeds of issue				872,340.		38,669,269.	20,7	50,183	·		36	475,	000
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds													
*				EOE EO <i>E</i>	585,526. 444,320.		312,136		-	+		250	<u> </u>
•				585,526.		444,320.		12,130) ·			250,	
<u> </u>												29,	208
9 Working capital expenditures from proceeds						20 224 040							
· · · · · · · · · · · · · · · · · · ·			63	286,814.	38,224,949.			38,047	,		36	,195,	288
11 Other spent proceeds				200,014.			20,4.	30,04	'•		30	, 195,	200.
12 Other unspent proceeds				2022		2020	20	15				2008	
13 Year of substantial completion					V					V			
14 Were the bonds issued as part of a refunding i	ssue of tax exempt	hands (or	Yes	No	Yes	No	Yes	No		Yes	+	No	
if issued prior to 2018, a current refunding issued		` '	x			x	x			х			
15 Were the bonds issued as part of a refunding is							**				+		
issued prior to 2018, an advance refunding iss		•		Х		x	x						Х
16 Has the final allocation of proceeds been made			х			x	X			Х			
17 Does the organization maintain adequate book		innort the				 +							
			x		х		x			Х			
final allocation of proceeds?			I I		-				I	-1-1-14			

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

Schedule K (Form 990) 2022

 Schedule K (Form 990) 2022
 BABSON COLLEGE
 04-2103544
 Page 2

Par	t III Private Business Use										
			Α			В			С		D
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?		Х			Х			Х		X
2	Are there any lease arrangements that may result in private business use of										
	bond-financed property?	Х			Х			Х			Х
За	Are there any management or service contracts that may result in private										
	business use of bond-financed property?	Х				Х		Х			Х
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside										
	counsel to review any management or service contracts relating to the financed property?	Х						Х			
С	Are there any research agreements that may result in private business use of										
	bond-financed property?		Х			Х			Х		Х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other										
	outside counsel to review any research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities								!		
	other than a section 501(c)(3) organization or a state or local government		.00	%		.40	%		.10 %		.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 %		.00 %
6	Total of lines 4 and 5		.00	%		.40	%		.10 %		.00 %
7			Х			Х			Х		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?		Х			Х			Х		X
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			X			Х		Х	
Par	t IV Arbitrage										
			Ą			В		(Ç		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?		Х			Х			Х		X
_2	If "No" to line 1, did the following apply?					_					
a	Rebate not due yet?	Х				Х			Х		Х
	Exception to rebate?		Х			Х			Х		X
	No rebate due?		Х		Х			Х		Х	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								ļ		
	performed					_					
3	Is the bond issue a variable rate issue?		Х			Х			Х	Х	

Schedule K (Form 990) 2022 BABSON COLLEGE 04-2103544 Page **3**

Part IV Arbitrage (contin	nued)
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		Α		В	С		D	
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		X		Х	Х	
b Name of provider							GOLDMAN SA	ACHS
c Term of hedge							2	25.0000000
d Was the hedge superintegrated?								X
e Was the hedge terminated?								X
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		Х		X
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?		Х		Х		Х		X
7 Has the organization established written procedures to monitor the								
requirements of section 148?	X		х		х		х	

Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?

 A
 B
 C
 D

 Yes
 No
 Yes
 No
 Yes
 No

 X
 X
 X
 X
 X
 X

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K, PART I, COLUMN (A)

ISSUER NAME, BOND A. (2022): MASSACHUSETTS DEVELOPMENT FINANCE AGENCY

SCHEDULE K, PART I, COLUMN (A)

ISSUER NAME, BOND B. (2017): MASSACHUSETTS DEVELOPMENT FINANCE AGENCY

SCHEDULE K, PART I, COLUMN (A)

ISSUER NAME BOND C (2015A): MASSACHUSETTS DEVELOPMENT FINANCE AGENCY

SCHEDULE K, PART I, COLUMN (A)

ISSUER NAME, BOND D. (2008): MASSACHUSETTS DEVELOPMENT FINANCE AGENCY

SCHEDULE K, PART I, COLUMN F, BOND A, (2022):

DESCRIPTION OF PURPOSE: REFINANCE DEBT (2015B, 2013, 2011) DATED

8/28/2015, 7/17/2013, AND 7/7/2011.

SCHEDULE K, PART I, COLUMN F, BOND C, (2015A):

DESCRIPTION OF PURPOSE: REFINANCE DEBT (2007A AND 2005A) DATED

10/04/2007 AND 8/31/2005.

Schedule K (Form 990) 2022	BABSON COLLEGE	04-2103544	Page (
Part VI Supplemental Informatio	n. Provide additional information	for responses to questions on Schedule K. See instructions. (continued)	
SCHEDULE K, PART I, COLUMN H	F, BOND D (2008):	, , , , , , , , , , , , , , , , , , , ,	
DESCRIPTION OF PURPOSE: REF	NANCE DEBT (2002A) DATED	6/27/2002 FOR THE	
NEW ASTROTURF ATHLETIC FIELD)		
SCHEDULE K, PART II, COLUMN	B, LINE 3:		
THE TOTAL PROCEEDS EXCEED TH	HE ISSUE PRICE DUE TO INV	ESTMENT EARNINGS ON	
THE PROJECT FUND.			
PART II, COLUMN A, C, AND D	LINE 11:		
THE OTHER SPENT PROCEEDS ARE	THE REFUNDING PROCEEDS	OF THE ISSUE NO	
LONGER IN ESCROW.			
PART IV, COLUMN B, LINE 2C:			
AN ARBITRAGE REBATE COMPUTAT	TION WAS PERFORMED ON 07/	31/2021.	
PART IV, COLUMN C, LINE 2C:			
AN ARBITRAGE REBATE COMPUTAT	TION WAS PERFORMED ON 07/	31/2021.	
PART IV, COLUMN D, LINE 2C:			
AN ARBITRAGE REBATE COMPUTAT	TION WAS PERFORMED IN MAY	2022.	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Inspection Employer identification number

	BABSON COLLEGE				04-2	103544	1	
Par	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		46	2,780,246.	AVG. OF HI & LOW			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (, I						
26	Other (
27	Other ()						
28	Other ()						
29	Number of Forms 8283 received by the org	anization during	g the tax year for c	ontributions				
	for which the organization completed Form			I I			0	
							Yes	No
30a	During the year, did the organization receiv	e by contribution	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date	of the initial co	ntribution, and wh	ich isn't required to be used	for			
	exempt purposes for the entire holding per					30a		х
b	If "Yes," describe the arrangement in Part I							
31	Does the organization have a gift acceptan		equires the review	of any nonstandard contribut	ions?	31	х	
	Does the organization hire or use third part		•	•				
						32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount	in column (c) fo	r a type of property	for which column (a) is chec	ked,			
	describe in Part II.	(-)), (m-p-s)	(-)	•			
LHA		see the Instruc	tions for Form 990).	Schedule N	/ (Form	990)	2022

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BABSON COLLEGE

Employer identification number 04-2103544

BABSON COLLEGE	04-2103544
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
BABSON COLLEGE EDUCATES ENTREPRENEURIAL LEADERS WHO CREATE GREAT	
ECONOMIC AND SOCIAL VALUE EVERYWHERE. BABSON COLLEGE IS A GLOBAL LEADER	_
IN MANAGEMENT EDUCATION WITH APPROXIMATELY 2,800 UNDERGRADUATE AND	
NEARLY 1,200 GRADUATE ENROLLMENT. OUR INNOVATIVE CURRICULA CHALLENGE	
STUDENTS TO THINK CREATIVELY AND ACROSS DISCIPLINARY BOUNDARIES. WE	
CULTIVATE THE WILLINGNESS TO TAKE AND MANAGE RISK, THE ABILITY TO	
ENERGIZE OTHERS TOWARD A GOAL, AND THE COURAGE TO ACT RESPONSIBLY. OUR	
STUDENTS UNDERSTAND THAT LEADERSHIP REQUIRES BOTH TECHNICAL KNOWLEDGE	
AND A SOPHISTICATED APPRECIATION OF INSTITUTIONS, SOCIETIES, CULTURES,	
AND THE SELF. THEY WELCOME THE CHALLENGE OF LEARNING CONTINUOUSLY AND	
TAKING RESPONSIBILITY FOR THEIR CAREERS. OUR STUDENTS WILL BE KEY	
CONTRIBUTORS IN ESTABLISHED ENTERPRISES AS WELL AS EMERGING VENTURES.	
FORM 990, PART VI, SECTION A, LINE 1A:	
PURSUANT TO THE ORGANIZATION'S BYLAWS, THE BOARD OF TRUSTEES SHALL HAVE AN	
EXECUTIVE COMMITTEE WHICH SHALL CONSIST OF THE PRESIDENT OF THE	
CORPORATION, THE CHAIRPERSON OF THE BOARD OF TRUSTEES, THE VICE	
CHAIRPERSON(S) OF THE BOARD OF TRUSTEES, THE CHAIRPERSON-ELECT OF THE BOARD	
OF TRUSTEES AND SUCH OTHER TRUSTEES AS SHALL BE APPOINTED BY THE	
CHAIRPERSON OF THE BOARD OF TRUSTEES OF THE CORPORATION FOR TERMS OF ONE	
(1) YEAR, BUT ANY MEMBER MAY BE REAPPOINTED. DURING THE INTERVALS BETWEEN	
MEETINGS OF THE BOARD OF TRUSTEES, SUBJECT TO SUCH LIMITATIONS AS MAY BE	
PRESCRIBED BY RESOLUTION OF THE BOARD OF TRUSTEES, THE EXECUTIVE COMMITTEE	
SHALL HAVE GENERAL SUPERINTENDENCE AND ADMINISTRATION OF THE CURRENT	
MANAGEMENT OF THE AFFAIRS OF THE CORPORATION, AND MAY EXERCISE ALL THE	_
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2022

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization **Employer identification number** BABSON COLLEGE 04-2103544 AUTHORITY OF THE BOARD OF TRUSTEES WITH RESPECT THERETO INCLUDING THE POWER TO AUTHORIZE THE SEAL OF THE CORPORATION TO BE AFFIXED TO ALL PAPERS THAT MAY REQUIRE IT. FORM 990, PART VI, SECTION A, LINE 2: TRUSTEES JOHN E. JOHNSON AND ERIC G. JOHNSON HAVE A FAMILY RELATIONSHIP. PRESIDENT STEPHEN SPINELLI AND VICE CHAIR/TRUSTEE CRAIG R. BENSON HAVE A BUSINESS RELATIONSHIP. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED AND REVIEWED BY CBIZ MHM, LLC. THE FULL 990 RETURN, INCLUDING SCHEDULE B, IS THEN REVIEWED BY SENIOR MANAGEMENT AND THE AUDIT COMMITTEE. THE FINAL FORM 990, WITH THE EXCEPTION OF SCHEDULE B, IS THEN MADE AVAILABLE TO THE FULL BOARD OF TRUSTEES PRIOR TO FILING WITH THE IRS. SCHEDULE B IS AVAILABLE TO ANY MEMBER OF THE BOARD OF TRUSTEES UPON REQUEST. CBIZ MHM, LLC SIGNS THE RETURN AS PAID PREPARER. FORM 990, PART VI, SECTION B, LINE 12C: EACH YEAR ALL TRUSTEES ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST QUESTIONNAIRE AND STATEMENT OF COMPLIANCE. THEIR RESPONSE TO THE QUESTIONNAIRE IS REVIEWED BY MANAGEMENT. IN ADDITION, PAYROLL AND VENDOR FILES ARE REVIEWED FOR THE EXISTENCE OF TRANSACTIONS WITH RELATED PARTIES. IF A CONFLICT OCCURS, THE BOARD MEMBER WILL RECUSE HIM OR HERSELF FROM ANY MATTERS RELATING TO THE TRANSACTION. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT AND OFFICERS OF THE COLLEGE IS REVIEWED BY HUMAN RESOURCES AT LEAST ONCE A YEAR. THIS REVIEW INCLUDES COMPARING

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** 04-2103544 BABSON COLLEGE RELEVANT, INDEPENDENT MARKET COMPENSATION AND IS DOCUMENTED. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS PROVIDED APPROPRIATE INFORMATION INCLUDING A RECOMMENDATION FOR COMPENSATION (OR INCREASE IN COMPENSATION). ANY CHANGE TO COMPENSATION FOR THE PRESIDENT AND OFFICERS IS APPROVED BY THIS COMMITTEE. FORM 990, PART VI, SECTION C, LINE 19: BABSON COLLEGE'S FINANCIAL STATEMENTS CAN BE FOUND AT WWW.BABSON.EDU. BABSON DOES NOT MAKE AVAILABLE TO THE PUBLIC OUR CONFLICT OF INTEREST POLICY OR OTHER GOVERNING DOCUMENTS. FORM 990, PART VII, SECTION A: EFFECTIVE OCTOBER 2020, BABSON COLLEGE AMENDED ITS BYLAWS TO RE-CLASSIFY CERTAIN POSITIONS. AS SUCH, THEY WILL NO LONGER BE CLASSIFIED AS OFFICERS AND WILL BE LISTED AS FORMER OFFICERS. FORMER OFFICERS DUE TO AMENDED BYLAWS INCLUDE: EDWARD CHIU FORM 990, PART XII, LINE 2C: THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT. THE COMMITTEE REVIEWS AND APPROVES THE AUDITED FINANCIAL STATEMENTS.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization BABSON COLLEGE					F	Employer identific 04-2103544	cation n	umber
Part I Identification of Disregarded Entities. Com	plete if the organization answered "Yes	s" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	or Total inco	me End-of-year		ts Direct c	(f) ontrollinq atity	g
Identification of Related Tax-Exempt Organ	nizations Complete if the organization	n answered "Yes" on Form 99	0 Part IV line 34 I	pecause it had one	or mor	re related tax-exer	nnt	
organizations during the tax year.				T	T 11101			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Dir	(f) rect controlling entity	cont	g) 512(b)(13) rolled tity?
BABSON GLOBAL, INC 27-1642647				501(c)(3))			Yes	No
231 FOREST STREET BABSON PARK, MA 02457	SUPPORTING ORGANIZATION	MASSACHUSETTS	501(C)(3)	LINE 12A, I	BARSO	ON COLLEGE	x	
			301(0)(3)	JIII 1211, 1				

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 BABSON COLLEGE 04-2103544 Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	Percenta ping ownersh er?
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	alloca	itions?				
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No.	
						l						

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
OUADIMADIE DEMAINDED INTERDICE /2)		country)						Yes	No
CHARITABLE REMAINDER UNITRUST (2)	4								
ONE LINCOLN STREET	4								İ
BOSTON, MA 02111	FUNDRAISING	MA	N/A	TRUST					Х

Schedule R (Form 990) 2022 BABSON COLLEGE 04-2103544 Page 3

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		Х
					1b		Х
					1c		Х
					1d	Х	
					1e		X
f	Dividends from related organization(s)				1f		X
					1g		Х
					1h		Х
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
					11	Х	
m	Performance of services or membership or fundraising solicitations by related organ	-:			1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n	Х	
o Sharing of paid employees with related organization(s)							X
р	Reimbursement paid to related organization(s) for expenses				1 p		X
					1q		X
	grant, or capital contribution to related organization(s) grant, or capital contribution from related organization(s) so or loan guarantees to or for related organization(s) so rolan guarantees by related organization(s) so rolan guarantees by related organization(s) dends from related organization(s) dends of assets with related organization(s) dends from related organization(s) dends of assets with related organization(s) dends of assets with related organization(s) dends of facilities, equipment, or other assets from related organization(s) dends of facilities, equipment, or other assets from related organization(s) dends of facilities, equipment, mailing lists, or other assets with related organization(s) ding of paid employees with related organization(s) dends of dends organization(s) dends of dends organization(s) dends						
r	Other transfer of cash or property to related organization(s)				1r		X
					1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the above is "Yes," see the instructions for information on whether the second of the second	ho must complete th	is line, including covered r	elationships and transaction thresholds.			
	(a) Name of related organization	Transaction		(d) Method of determining amount in	volved		
(1) []]	BABSON GLOBAL, INC.	L	1,235,528.	COST PLUS OVERHEAD			
(2) []]	BABSON GLOBAL, INC.	N	0.	INCLUDED ABOVE			
(3) ¹	BABSON GLOBAL, INC.	D	361,070.	BOOK VALUE			
(4)							

Yes No

(5)

Schedule R (Form 990) 2022 BABSON COLLEGE 04-2103544 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocation Yes N	General of managing partner? Yes No	(k) r Percentage ownership