000		00	Return of Organization Exempt Fro	om lu	ncome Tax	OMB No. 1545-0047
Form 990		90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenu benefit trust or private foundation)	le Code		2012
		of the Treasury enue Service	The organization may have to use a copy of this return to satisfy		eporting requirements	Open to Public Inspection
					UN 30, 2013	inspection
	heck if		organization		D Employer identific	
	pplicab	le:	organization			
	Addre chang Name	BABS	ON COLLEGE		0.4 0.7	100544
	_chang	pe Doing Bu	usiness As			103544
	_returr]Termi		and street (or P.O. box if mail is not delivered to street address) Roor FOREST ST.	m/suite	E Telephone number 781	235.1200
	Jated	dod	/n, or post office, state, and ZIP code		G Gross receipts \$	238,026,362.
F	⊥returr]Appli _tion		ON PARK, MA $02457 - 0310$		H(a) Is this a group re	
	pend		nd address of principal officer: LEONARD SCHLESINGER		for affiliates?	Yes X No
		231 F	OREST STREET, BABSON PARK, MA 02457	7	H(b) Are all affiliates incl	
<u> </u>	ax-ex	empt status:		527	.,	list. (see instructions)
			BABSON.EDU		H(c) Group exemption	
		f organization:		L Year o		State of legal domicile: MA
	rt I	Summary		-		
<u> </u>	1		e the organization's mission or most significant activities: ${{{{f SEE}}}}$ SCH	HEDU	LE O	
nce						
Governance	2	Check this bo	x 🕨 🛄 if the organization discontinued its operations or disposed of	of more	than 25% of its net as	sets.
Nel	3		ing members of the governing body (Part VI, line 1a)			36
ğ	4		ependent voting members of the governing body (Part VI, line 1b)			30
Š	5		of individuals employed in calendar year 2012 (Part V, line 2a)			2191
itie	6		of volunteers (estimate if necessary)			2586
Activities			d business revenue from Part VIII, column (C), line 12			1,217,828.
Ř			business taxable income from Form 990-T, line 34			-110,554.
	~	The amolated			Prior Year	Current Year
•	8	Contributions	and grants (Part VIII, line 1h)		22,033,031.	11,275,700.
Revenue	9		ce revenue (Part VIII, line 2g)		79,699,975.	188,299,609.
Sve	10	-	come (Part VIII, column (A), lines 3, 4, and 7d)	··· – –	3,707,010.	8,284,641.
ď	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,245,467.	2,515,153.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		07,685,483.	210,375,103.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		31,608,136.	32,996,104.
	14				0.	0.
"	45	Colorian atlan	componenties analyses havefits (Deut IV, column (A), lines 5 10)		90,226,253.	95,661,791.
ses	16-	Drofossional f	indraising foos (Part IX, column (A), line 110)	–	0.	0.
Expense	lua h	Total fundraisi	and raising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) \blacktriangleright 3,863,620			
ň	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	- —	69,841,417.	70,147,921.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	···	91,675,806.	198,805,816.
	19	-	expenses. Subtract line 18 from line 12		16,009,677.	11,569,287.
es	19	Nevenue less	expenses. Subtract line to non line 12		ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (F	Part X lina 16)		63,027,872.	497,548,639.
Asse Bal	20	-		··· 1	59,747,713.	151,965,895.
Vet , und	21		(Part X, line 26) fund balances. Subtract line 21 from line 20		03,280,159.	345,582,744.
	rt II	Signature] J	~~, <u>~</u> ~~, <u>~</u>),•	545,502,744.
		-	I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the best of my	knowledge and belief, it is
			Declaration of preparer (other than officer) is based on all information of which p			

Sign Here	Signature of officer PHILIP N. SHAPIRO, VP Type or print name and title	FINANCE & CFO	[Date				
Paid	Print/Type preparer's name GWEN SPENCER	Preparer's signature	Date	Check PTIN if self-employed P00641463				
Preparer	Firm's name PRICEWATERHOUSEC	OOPERS LLP	F	irm's EIN 13-4008324				
Use Only	Firm's address 125 HIGH STREET							
BOSTON, MA 02110				Phone no. (617)530-5000				
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)							
232001 12-1	32001 12-10-12LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2012)							

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Ι.

	990 (2012) BABSON COLLEGE	04-2103544 Page	, 2
Pai	rt III Statement of Program Service Accomplishments	_	_
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission: BABSON COLLEGE EDUCATES MEN AND WOMEN TO BE ENTREPRENI		
	A RAPIDLY CHANGING WORLD. WE PREPARE THEM, IDENTIFY OF		
	INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMEN	Ľ•	
2	Did the organization undertake any significant program services during the year which were not listed on		—
2	the prior Form 990 or 990-EZ?	Yes X N	10
	If "Yes," describe these new services on Schedule O.		0
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servic	es? Yes X N	ю
•	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services	s, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to		
	revenue, if any, for each program service reported.	100 010 000	
4a		evenue \$ 188,310,692.	•)
	BABSON COLLEGE ENROLLS APPROXIMATELY 2,000 UNDERGRADUA	-	
	GRADUATE STUDENTS FROM THE UNITED STATES AND MORE THAN		
	WORLDWIDE. THE COLLEGE OFFERS EDUCATION IN BUSINESS AN AND IT GRANTS THE BACHELOR OF SCIENCE DEGREE THROUGH		
	PROGRAM. THE COLLEGE ALSO GRANTS MASTER OF BUSINESS AI		—
	DEGREES AND CUSTOM MASTER OF SCIENCE DEGREES THROUGH		—
	GRADUATE SCHOOL OF BUSINESS AT BABSON COLLEGE. ADDITIC		—
	OFFERS DISTINCT EXECUTIVE EDUCATION PROGRAMS TO HELP (—
	THEIR STRATEGIC GOALS.		—
			—
			—
4b	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	_)
			_
			_
			—
4c	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	<u></u>
			- '
			_
			_
			_
4d	Other program services (Describe in Schedule O.)		
40	(Expenses \$ including grants of \$) (Revenue \$	١	
4e	Total program service expenses ► 173,121,755.		
		Form 990 (20	12)
232002 12-10-			· -/
	2	_	

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3 2012.04030 BABSON COLLEGE

e 3 No

rm	990 (2012) BABSON COLLEGE 04-2103	544	P	age 3
	t IV Checklist of Required Schedules		-	<u></u>
			Yes	No
I	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
ŀ	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
,	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		x
3	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
)	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		x
)	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	x	
I	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	

	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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	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		

Form 990 (2 Part IV

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b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			37
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Х	
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2012)

Part IV Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete

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

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

Schedule J

Schedule K. If "No", go to line 25

any tax-exempt bonds?

disqualified person during the year? If "Yes," complete Schedule L, Part I

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

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

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22

23

24a

24b

24c

24d

25a

Yes

Х

Х

Х

Х

X

X

х

No

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 346			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming	1		
	(gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 2191			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,	3a	X	
			3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	•	4a		x
b	b If "Yes," enter the name of the foreign country:				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X
	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 t				
	any contributions that were not tax deductible as charitable contributions?	v	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribu				
	were not tax deductible?	•	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				
	to file Form 8282?		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	1 1			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F		7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	id the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	e O	14b		

BABSON COLLEGE

Form 990 (2012)

232005 12-10-12

BABSON COLLEGE

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

Check if Schedule	O contains a res	sponse to any (auestion in this	s Part VI

X

Sec	tion A. Governing Body and Management						
			_	Ye	s No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	36				
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	30				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with 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						
	of officers, directors, or trustees, or key employees to a management company or other person?				<u> </u>		
4	Did the organization make any significant changes to its governing documents since the prior Form			_	X		
5							
6	Did the organization have members or stockholders?		6	_	X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a				v		
	more members of the governing body?		78	1	X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				x		
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ye		7t				
8							
a L	The governing body?						
b	Each committee with authority to act on behalf of the governing body?		8t		·		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? <i>If</i> "Yes," <i>provide the names and addresses in Schedule O</i>		9		x		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R		3	-			
000				Ye	s No		
10a	Did the organization have local chapters, branches, or affiliates?		10				
	If "Yes," did the organization have written policies and procedures governing the activities of such c						
-	and branches to ensure their operations are consistent with the organization's exempt purposes?		10	Ь			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo			_	X		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, 0					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12	a X	:		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to conflicts?			:		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ")						
	in Schedule O how this was done		12	c X	:		
13	Did the organization have a written whistleblower policy?		13	3 X			
14	Did the organization have a written document retention and destruction policy?		14	۱ <u> </u>	X		
15	Did the process for determining compensation of the following persons include a review and approv	al by independent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official		15				
b	Other officers or key employees of the organization		15	b X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a			37		
	taxable entity during the year?		16	a	<u> </u>		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	inization's					
800	exempt status with respect to such arrangements?		16				
	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright MA , CA						
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Saction 501(c)(3)s a		abla			
10	for public inspection. Indicate how you made these available. Check all that apply.		iliy) avalı	able			
		n in Schedule O)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		/ and fir	ancial	I		
	statements available to the public during the tax year.		, and m	anoid	•		
20	State the name, physical address, and telephone number of the person who possesses the books a	nd records of the orac	nization				
	RICHARD BOWMAN - 781.239.5298			-			
	NICHOLS BUILDING, BABSON COLLEGE, BABSON PARK, MA	02457-0301					
232000 12-10-			Fo	rm 99	O (2012)		
	6		-		, -/		

^{2012.04030} BABSON COLLEGE

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

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

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

List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

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

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

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

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

(A)	(B)	(C)					(D)	(E)	(F)			
Name and Title	Average	(do	not cl		ition more		one	Reportable	Estimated			
	hours per	box	, unles	ss pei	rson i	is bot	h an	compensation	compensation compensation			
	week			uau		1/		from	from related	other		
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC)	compensation from the		
	related	e or d	stee			Isated		(W-2/1099-MISC)	(00-2/1099-00130)	organization		
	organizations	truste	al trus		yee	mper				and related		
	below	Individual trustee or director	Institutional trustee	er	Key employee	est co loyee	ler			organizations		
	line)	Indiv	Instit	Officer	Key (Highest compensated employee	Former					
(1) MICHAEL J. ANGELAKIS	1.20											
TRUSTEE		Х						0.	0.	0.		
(2) JACQUELINE GIORDANO BEDARD	1.20											
TRUSTEE		Х						0.	0.	0.		
(3) THE HONOR. CRAIG BENSON	1.20											
VICE CHAIR, BOARD OF TRUSTE		Х		Х				0.	0.	0.		
(4) MARLA M. CAPOZZI	1.20											
TRUSTEE	1.20	Х						0.	0.	0.		
(5) PAUL W. CHISHOLM	1.20											
TRUSTEE		Х						0.	0.	0.		
(6) THEODORE A CLARK	1.20											
TREASURER		Х		Х				0.	0.	0.		
(7) ANN-MARIE SWEENEY COPLAND	1.20											
TRUSTEE		Х						0.	0.	0.		
(8) TIMOTHY A. DEMELLO	1.20							_	_	_		
TRUSTEE		Х						0.	0.	0.		
(9) DEBORAH DESANTIS	1.20							_	_	_		
TRUSTEE		Х						0.	0.	0.		
(10) GARY T. DICAMILLO	1.20											
TRUSTEE		х						12,630.	0.	0.		
(11) FRANK M. FISCHER	1.20											
TRUSTEE		Х						0.	0.	0.		
(12) MARCO A. GARGUREVICH	1.20									•		
TRUSTEE (STARTING 10/12)	1 00	X						0.	0.	0.		
(13) THOMAS F. GILBANE, JR.	1.20									•		
TRUSTEE	1 00	X						0.	0.	0.		
(14) MUHAMMAD H. HABIB	1.20									•		
TRUSTEE	1 00	X						0.	0.	0.		
(15) BRUCE T. HERRING	1.20									•		
TRUSTEE/V.CHAIR OF BOARD	1 00	X						0.	0.	0.		
(16) ERIC G. JOHNSON	1.20								~	0		
	1 00	X						0.	0.	0.		
(17) FRED S.C. KIANG	1.20									•		
TRUSTEE		Х						0.	0.	0.		
232007 12-10-12						_				Form 990 (2012)		

Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hi	ighe	st C	Compensated Employe	es (continued)						
(A)	(B)			(0				(D)	(E)			(F)			
Name and title	Name and title Average				ition			Reportable	Reportable			imated	Ł		
	hours per	bong unless person to both a							compensation		am	ount o	f		
	week	offic	cer and	d a di	irecto	or/trus	tee)	from	from related		c	other			
	(list any	ector						the	organizations		comp	pensati	ion		
	hours for	or dir	æ			tted		organization	(W-2/1099-MISC	ン)	fro	om the			
	related	stee	ruste			pens		(W-2/1099-MISC)			•	inizatio			
	organizations below	ial tru	onal t		loyee	co m ee						relate			
	line)	Individual trustee or director	In stitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			organi					
(18) CARLETON F. KILMER	1.20	Ē		0	ž	ен	Œ			\rightarrow					
TRUSTEE		х						0.		0.			0.		
(19) CARMELLA KLETJIAN	1.20														
TRUSTEE		Х						0.		0.			0.		
(20) KAY KOPLOVITZ	1.20														
TRUSTEE		Х						0.		0.			0.		
(21) DAVID F. LAMERE	1.20														
TRUSTEE		Х						0.		0.			0.		
(22) LOUIS J. LAVIGNE, JR.	1.20														
TRUSTEE	1.20	Х						0.		0.			0.		
(23) WARREN K.K. LUKE	1.20														
TRUSTEE		Х						0.		0.			0.		
(24) ANDRONICO LUKSIC	1.20												•		
TRUSTEE	1 00	Х						0.		0.			0.		
(25) CARLOS MATTOS	1.20	v						0.		ο.			0		
TRUSTEE (STARTING 10/12) (26) DR. RICHARD K. MILLER	1.20	Х						0.		<u>•</u> +			0.		
TRUSTEE	1.20	x						0.		0.			Ο.		
								12,630.		0.			0.		
c Total from continuation sheets to Part VI								6,007,829.		0.	1	038,6			
d Total (add lines 1b and 1c)						5		6,020,459.		0.	1,038,669.				
2 Total number of individuals (including but n							no r			-		,			
compensation from the organization		000	noto	u ui	0011	0, 111						2	205		
													No		
3 Did the organization list any former officer,	director, or tru	istee	e, kev	v en	nplc	ovee.	or	highest compensated e	mployee on	Γ					
line 1a? If "Yes," complete Schedule J for s								• ·		[3	X			
4 For any individual listed on line 1a, is the su									the organization						
and related organizations greater than \$150),000? If "Yes,	" coi	mple	te S	Sche	edule	Ji	for such individual		[4	Х			
5 Did any person listed on line 1a receive or a					-		elat	ted organization or indivi	dual for services						
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ch j	pers	son .				<u></u>	5		Х		
Section B. Independent Contractors															
1 Complete this table for your five highest co	-									ensa	ition fr	om			
the organization. Report compensation for	the calendar y	ear e	endir	ng w	vith	or w	ithir		/ear.						
(A) Name and business	address							(B) Description of s	ervices	Co	(C)) sation			
Name and business address Description of services										Sution					
CONNELLY PARTNERS LLC. 46 WALTHAM STREET, BOSTON, MA 02118 ADVE							ADVERTISING		3	.014	9.01	2.			
46 WALTHAM STREET, BOSTON, MA 02118ADVERTISING3,019,012CANON BUSINESS SOLUTIONS, INC., 300															
							PRINTING			786	5,20)9.			
ZONE MECHANICAL, INC.												-			
160 BEAR HILL ROAD, WALTH	IAM, MA	02	245	1				HVAC			74(),22	22.		
EPLUS TECHNOLOGY, INC	_														
80 HUDSON ROAD, CANTON, M								WIRELESS IT	SYSTEM		628	3,88	0.		
ROYALL & COMPANY, 1920 EA	AST PARE	IAN	1 R	.OZ	4D	,							. 1		
CICHMOND, VA 23228-2206 STUDENT RECRUITING 561,231								<u>, T •</u>							

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 83

\$100,000 of compensation from the organization ► 83 SEE PART VII, SECTION A CONTINUATION SHEETS 232008 12-10-12

Form **990** (2012)

Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all ·	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loyee		the	organizations	compensation
	(list any hours for	direct				d emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	stee			Isated		(00-2/1033-101130)		and related
	organizations	trust	al tru		yee	admo				organizations
	below	Individual trustee or director	nstitutional trustee	er	Key employee	Highest compensated employee	ler			Ū
	line)	Indiv	Insti	Officer	Key	High	Former			
(27) GORDON PRICHETT	1.20									
TRUSTEE		x						11,250.	Ο.	0.
(28) RICHARD A. RENWICK	1.20									
TRUSTEE		X						0.	0.	0.
(29) KENNETH G. ROMANZI	1.20									
TRUSTEE		X						0.	0.	0.
(30) THOMAS T. STALLKAMP	1.20									
TRUSTEE	1.20	X						0.	0.	0.
(31) DELIA H. THOMPSON	1.20									
V. CHAIR BOT (UNTIL 10/12)		Х		Х				0.	0.	0.
(32) MARTHA D. VORLICEK	1.20									
TRUSTEE		Х						0.	0.	0.
(33) ROBERT E. WEISSMAN	1.20									
TRUSTEE		Х						0.	0.	0.
(34) JOSEPH L. WINN	1.20									
CHAIR, BOARD OF TRUSTEES	1.20	Х		Х				0.	0.	0.
(35) GARY ZWERLING	1.20									
TRUSTEE		Х						0.	0.	0.
(36) DR. LEONARD A. SCHLESINGER	60.00									
PRESIDENT		Х		Х				642,393.	0.	222,768.
(37) SHAHID ANSARI	40.00									
PROVOST	20.00			Х				347,650.	0.	27,798.
(38) DENNIS HANNO	40.00									
V.P. ACADEMIC PROG/DEAN, GRAD SCH.				Х				338,302.	0.	84,624.
(39) MARY ROSE	40.00								_	
V.P. FOR CAMPUS/COMM. AFFAIRS				Х				208,402.	0.	43,803.
(40) DIANA ZAIS	40.00									
V.P. FOR DEVELOPMENT				Х				193,870.	0.	47,734.
(41) CAROL HACKER	40.00									
V.P.OF ALUMNI&FRIENDS NETWORK				Х				179,570.	0.	34,010.
(42) PHILIP SHAPIRO	40.00									
V.P.FOR FINANCE				Х				279,364.	0.	53,924.
(43) DONNA BONAPARTE	40.00									
V.P. FOR HR (STARTING 10/12)				X				210,990.	0.	35,392.
(44) GRANT GOSSELIN	40.00									44 0.55
V.P. FOR ENROLLMENT (10/12)				X				147,011.	0.	41,261.
(45) JONATHAN MOLL	40.00									40 674
V.P. AND GENERAL COUNSEL	20.00			X				230,286.	0.	49,674.
(46) SAMUEL DUNN	40.00									
VP FOR FACILITIES MGT/CIO				Х				366,946.	0.	34,804.
Total to Part VII, Section A, line 1c										

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Part VII Section A. Officers, Directors,		nplo	byee			ligh	est			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(C	neck	< all t	inat	app	iy)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loye		the organization	organizations (W-2/1099-MISC)	compensatior from the
	(list any hours for	direct				d emp		(W-2/1099-MISC)	(1099-10130)	organization
	related	e or c	stee			Isated		(00-2/1033-10100)		and related
	organizations	truste	al trus		yee	mper				organizations
	below	Individual trustee or director	Institutional trustee	-	mplo	est co	er			e gameaterie
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
47) TRACEE PETRILLO	40.00									
CLERK				X				133,818.	Ο.	21,758
(48) ELAINE EISENMAN	40.00									
DEAN OF BABSON EXE. EDU.					Х			380,031.	0.	44,114
(49) JAY RAO	40.00									
FACULTY						Х		447,673.	0.	52,949
(50) JEAN PIERRE JEANNET	40.00								_	
FACULTY						Х		341,368.	0.	29,095
(51) MICHAEL FETTERS	40.00									01 000
FACULTY	10.00					X		306,577.	0.	21,978
(52) PATRICIA GUINAN	40.00							201 620	0	
FACULTY	10 00					Х		291,639.	0.	53,282
(53) JOSEPH WEINTRAUB	40.00					x		200 671	0	11 000
FACULTY (54) PATRICIA GREENE	40.00					<u> </u>		308,671.	0.	44,899
FACULTY/FORMER OFFICER	40.00						x	306,324.	0.	25,981
(55) SHELLEY KAPLAN	40.00		<u> </u>				Λ	500,524.	0.	23,901
FORMER KEY EMPLOYEE	40.00						x	166,354.	0.	44,058
(56) TADEPALLI RAGHURAM	40.00							100,334.	••	41,050
FORMER KEY EMPLOYEE	10000						х	169,340.	0.	24,763
								20070200		227700

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Form 990 (2012) Part VIII

BABSON COLLEGE

Statement of Revenue

				to any question i	in this Part VIII			
		Check if Schedule O cont			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
<u>la</u>	b	Membership dues	1b					
Am (с	Fundraising events	1c	66,300.				
a la tit	d	Related organizations	1d					
in's	е	Government grants (contribut	ions) 1e	743,609.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gran	ts, and					
<u>i</u> E		similar amounts not included abo	ve 1f	10,465,791.				
dt	g	Noncash contributions included in lines	1a-1f: \$	185,163.				
<u>a ö</u>	h	Total. Add lines 1a-1f		►	11,275,700.			
				Business Code				
ice		TUITION & FEES		900099	141,235,530.			
Program Service Revenue		ROOM & BOARD		900099	23,044,455.	23,044,455.		
n S len	-	ED/NON-ED PROG. REV.		900099	22,820,763.	22,820,763.		
Rev	-	OTHER ED PROG/AUX.ACT.		721000	661,189.		661,189.	
oč_	-	OTHER ED PROG/AUX.ACT.		713990	537,672.		537,672.	
<u>۳</u>		All other program service reve			100.000.000			
\rightarrow		Total. Add lines 2a-2f			188,299,609.			
	3	Investment income (including			2 920 195		10 067	2 001 210
		other similar amounts)			3,820,185.		18,967.	3,801,218.
	4	Income from investment of tax						
	5	Royalties						
	6 .	Cross rents	(i) Real 2,526,901	(ii) Personal				
		Gross rents						
		Less: rental expenses Rental income or (loss)		-				
		Net rental income or (loss)			2,526,901.			2,526,901.
		Gross amount from sales of	(i) Securities	(ii) Other	2,520,501.			2,520,501.
	<i>i</i> a	assets other than inventory	32,037,622					
	h	Less: cost or other basis						
	D	and sales expenses	27,573,166					
	c	Gain or (loss)	, ,					
		Net gain or (loss)			4,464,456.			4,464,456.
a		Gross income from fundraisin			, ,			, ,
nu	•••	including \$ 66	5 (
Other Revenue		contributions reported on line						
R. R.		Part IV, line 18		39,245.				
the	b	Less: direct expenses		62,076.				
0		Net income or (loss) from fund			-22,831.			-22,831.
		Gross income from gaming ac	-					
		Part IV, line 19		27,100.				
	b	Less: direct expenses	b	16,017.				
	с	Net income or (loss) from gam	ning activities		11,083.	11,083.		
	10 a	Gross sales of inventory, less	returns					
		and allowances						
		Less: cost of goods sold						
ļ	С	Net income or (loss) from sale						
ļ		Miscellaneous Revenu	e	Business Code				
	11 a		<u> </u>					
	b		<u> </u>					
	c							
	d	All other revenue						
		Total. Add lines 11a-11d			210 275 102	187,111,831.	1 217 020	10 760 744
232009 12-10-	<u>12</u>	Total revenue. See instructions.		🕨	210,375,103.	107,111,031.	1,217,828.	
12-10-	12				11			Form 990 (2012)

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	Form 990 (2012) BABSON COLLEGE 04-2103544 Page 10									
Pa	Part IX Statement of Functional Expenses									
Sect	ion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All oth	ner organizations must co	omplete column (A).						
	Check if Schedule O contains a respo	nse to any question in th			<u>L</u>					
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising					
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses					
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	747,715.	747,715.							
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	32,248,389.	32,248,389.							
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
6	trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	4,650,867.	1,362,223.	2,728,958.	559,686.					
	persons described in section 4958(c)(3)(B)	1,235,349.	1,112,184.	123,165.						
7	Other salaries and wages	71,097,528.	61,709,373.	7,906,691.	1,481,464.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	5,322,684.	4,619,851.	591,558.	111,275.					
9	Other employee benefits	8,605,442.	7,469,516.	955,747.	180,179.					
10	Payroll taxes	4,749,921.	4,122,693.	529,225.	98,003.					
11	Fees for services (non-employees):									
а	Management									
b	Legal	221,927.		221,927.						
с	Accounting	302,976.		302,976.						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)									
12	Advertising and promotion	4,908,038.	4,301,774.	606,264.						
13	Office expenses	5,834,148.	4,677,535.	1,033,928.	122,685.					
14	Information technology	7,768,674.	7,290,173.	423,487.	55,014.					
15	Royalties									
16	Occupancy	5,974,817.	5,867,531.	81,856.	25,430.					
17	Travel	5,370,303.	4,166,202.	1,077,442.	126,659.					
18	Payments of travel or entertainment expenses			T						
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	1,869,826.	1,784,531.	76,002.	9,293.					
20	Interest	4,959,030.	4,959,030.							
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	10,110,800.	9,931,209.	137,023.	42,568.					
23	Insurance									
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	FOOD & BEVERAGE SERVICE	7,923,675.								
b	PROFESSIONAL CONSULTING	5,163,089.	2,807,891.	1,304,658.	1,050,540.					
с	OTHER EXPENSES	4,815,937.	2,156,401.	2,658,712.	824.					
d	ROOM, CONF. & ADMIN.	2,952,712.	2,952,712.							
е	All other expenses	1,971,969.	911,147.	1,060,822.						
25	Total functional expenses. Add lines 1 through 24e	198,805,816.	173,121,755.	21,820,441.	3,863,620.					
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 Figure if following SOP 98-2 (ASC 958-720)									
					$ \Box_{0} = 000 (0010) $					

232010 12-10-12

12160328 130157 BABSON

chedule O contains a response to any

		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	47,299,531.	1	48,017,531.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	31,203,356.	3	30,535,030.
	4	Accounts receivable, net	5,735,265.	4	6,261,134.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L $_{\dots\dots}$		6	
Assets	7	Notes and loans receivable, net	3,729,104.	7	3,680,528.
As	8	Inventories for sale or use		8	4 54 9 6 9 9
	9	Prepaid expenses and deferred charges	4,381,813.	9	4,519,602.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 327, 170, 630.	100 614 400		106 274 507
		Less: accumulated depreciation 10b 200,796,123.	128,614,498.	10c	126,374,507.
	11	Investments - publicly traded securities	166,405,543. 73,086,594.	11	183,655,051. 91,864,917.
	12	Investments - other securities. See Part IV, line 11	15,000,594.	12	91,004,917.
	13	Investments - program-related. See Part IV, line 11		13 14	
	14 15	Intangible assets Other assets. See Part IV, line 11	2,572,168.	14	2,640,339.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	463,027,872.	16	497,548,639.
	17	Accounts payable and accrued expenses	14,779,746.	17	16,278,152.
	18	Grants payable	, -, -	18	
	19	Deferred revenue	10,835,687.	19	10,825,227.
	20	Tax-exempt bond liabilities	71,087,663.	20	68,051,227.
ŝ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
iabi		key employees, highest compensated employees, and disqualified persons.			
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	39,905,000.	23	39,198,663.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	22 120 617		17 612 626
		Schedule D	23,139,617. 159,747,713.		17,612,626. 151,965,895.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	139,747,713.	26	131,903,093.
ú		complete lines 27 through 29, and lines 33 and 34.			
Ce	27	Unrestricted net assets	116,774,000.	27	144,344,420.
alar	28	Temporarily restricted net assets	89,183,536.	28	101,901,919.
Ä	29	Permanently restricted net assets	97,322,623.	29	99,336,405.
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here	_ , _ ,		
Γ		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et⊿	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ź	33	Total net assets or fund balances	303,280,159.	33	345,582,744.
	34	Total liabilities and net assets/fund balances	463,027,872.	34	497,548,639.

Form **990** (2012)

BABSON_1

BABSON COLLEGE

Form	990 (2012) BABSON COLLEGE	04-	210354	4	Page 12				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI				X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	210,3						
2	Total expenses (must equal Part IX, column (A), line 25)	2	198,8						
3									
4									
5									
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9	5,5	591	,301.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	345,5	682	,744.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response to any question in this Part XII								
			_	<u> </u>	es No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2	b 2	x				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,							
	consolidated basis, or both:								
	Separate basis IConsolidated 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				7				
	review, or compilation of its financial statements and selection of an independent accountant?				x				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•			x				
Act and OMB Circular A-133? 3a									
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				7				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			~	X				
			Г.	~~ U	AU (2012)				

Form **990** (2012)

SCHEDULE A	
(Form 990 or 990-EZ)

Department of the Treasury

Public Charity St	tatus and Public	Support
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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-F7 See separate instructions

Intern	al Rever	nue Service	► At	tach to Form 990 or Fo	orm 990-E	Z. 🕨 See	separate	instructio	ons.		Ins	pection	
Nan	ne of t	the organizati	on						E	mployer	identifica	tion nu	ımber
			BABSON							0	4-210	3544	L
Pa	rt I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this part	.) See inst	ructions.				
The	organ	ization is not a	private foundation	because it is: (For lines [·]	1 through	11, check	only one b	ox.)					
1		A church, cor	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	X	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		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 stat											
5		An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describ	oed in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	te, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7		An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public de	scribed	in
		•	b)(1)(A)(vi). (Comple	,									
8		A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		•	•	eives: (1) more than 33		• •					Ũ		
				nctions - subject to certa									
				axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June	e 30, 19 ⁻	75.
			509(a)(2). (Complete										
10	\mathbb{H}			perated exclusively to te									
11		•	•	perated exclusively for th						•	· ·		or
				ations described in secti		,		2). See sec	ction 509(a	a)(3). Ch	eck the bo	ox that	
				organization and compl		•		_				allı inda	
		a U Type I	-		ype III - Fu	-	-				n-function	•	-
е			· ·	It the organization is not han one or more publich		•		•					
f			•	ten determination from	, ,,	•				9(a)(1) 01	Section 5	J3(a)(Z).	•
'			ganization, check th	the landstate					5 111				
g			•	organization accepted ar					owing pers	sons?			—
9		•		irectly controls, either al					•.		1.	Yes	No
		• •		•	0				., .	,	·	-	
		the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii)											
		(iii) A 35% controlled entity of a person described in (i) or (ii) above?											
h													
			C C		•	. ,							
(i)	Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is	the	(vii) Amou	nt of mo	netary
.,		anization	.,	(described on lines 1-9		sted in your			organizátic (i) organiz	ed in the		upport	
				above or IRC section (see instructions))		document?			U.S.	.?			
				(,)	Yes	No	Yes	No	Yes	No			

Schedule A (Form 990 or 990-EZ) 2012

OMB No. 1545-0047

Open to Public

Total

232021 12-04-12

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Part II	Supp

(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.)

	tion A. Public Support		-		-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
	Total. Add lines 1 through 3 The portion of total contributions						_
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
~							_
-	Public support. Subtract line 5 from line 4.						
	ction B. Total Support ndar year (or fiscal year beginning in) 🕨	(-) 0000	(1-) 0000	(-) 0010	(-1) 0011	(-) 0010	(6) T - + -
		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
-	Amounts from line 4 Gross income from interest,						
8							
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
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 IV.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	,	,			12	
13	First five years. If the Form 990 is for	0	s first, second, thi	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stop ction C. Computation of Publ	here	roontago				▶∟
	Public support percentage for 2012 (I					14	%
	Public support percentage from 2011					15	%
16a	33 1/3% support test - 2012. If the c	-			14 is 33 1/3% or n	nore, check this t	box and
	stop here. The organization qualifies		•				▶∟
b	33 1/3% support test - 2011. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ts-and-circumstar	ices" test, check t	his box and stop h	iere. Explain in Pa	rt IV how the orga	anization
	meets the "facts-and-circumstances"	-					
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 i	s 10% or
	more, and if the organization meets the	ne "facts-and-circu	imstances" test, c	heck this box and	stop here. Explair	n in Part IV how th	າຍ
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publi	cly supported orga	anization	▶Ц
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l	o, check this box a	and see instructio	ons ►

Schedule A (Form 990 or 990-EZ) 2012

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

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

Section A. Public Support		i			· · · · · · · · · · · · · · · · · · ·	
Calendar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and	d					
membership fees received. (Do	not					
include any "unusual grants.")						
2 Gross receipts from admission merchandise sold or services p formed, or facilities furnished ir any activity that is related to th organization's tax-exempt purp	ber- n le					
3 Gross receipts from activities t						
are not an unrelated trade or b iness under section 513						
4 Tax revenues levied for the org ization's benefit and either paid or expended on its behalf						
5 The value of services or facilitie	es					
furnished by a governmental un the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2						1
3 received from disqualified pe						
b Amounts included on lines 2 and 3 receiv from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	e					
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from lin	ie 6.)					
Section B. Total Support				_	_	
Calendar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received securities loans, rents, royalties and income from similar source	s					
b Unrelated business taxable income						
(less section 511 taxes) from busir	iesses					
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated bus activities not included in line 10 whether or not the business is regularly carried on	siness Db,					
12 Other income. Do not include g or loss from the sale of capital assets (Explain in Part IV.) ·····	gain					
13 Total support. (Add lines 9, 10c, 11, a						
14 First five years. If the Form 99	0 is for the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) organi	ization,
check this box and stop here						▶∟
Section C. Computation of					<u>i i</u>	
15 Public support percentage for					15	%
16 Public support percentage from					16	%
Section D. Computation of	Investment Incom	e Percentage)		- i - i	
17 Investment income percentage					17	%
18 Investment income percentage						%
19a 33 1/3% support tests - 2012	. If the organization did r	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this	box and stop here. The	e organization qua	lifies as a publicly	supported organiz	zation	▶□]
b 33 1/3% support tests - 2011	. If the organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3	%, check this box and ${f s}$	top here. The org	anization qualifies	as a publicly supp	oorted organizatior	n Þ
20 Private foundation. If the orga	nization did not check a	box on line 14, 19	9a, or 19b, check	this box and see ir	structions	>
232023 12-04-12			4 5	Sc	hedule A (Form 99	90 or 990-EZ) 2012

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17 2012.04030 BABSON COLLEGE

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SCHEDULE C	P	OMB No. 1545-0047				
SCHEDULE C Political Campaign and Lobbying Activities (Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527					2012	
Department of the Treasury Internal Revenue Service						
If the organization answ	wered "Yes," to	Form 990, Part IV, line 3, or Fo		ne 46 (Political Cam	paign Acti	vities), then
 Section 501(c)(3) org 	ganizations: Com	plete Parts I-A and B. Do not co	mplete Part I-C.			
 Section 501(c) (other 	r than section 50	1(c)(3)) organizations: Complete	Parts I-A and C below	. Do not complete Pa	art I-B.	
 Section 527 organiza 	ations: Complete	Part I-A only.				
If the organization answ	wered "Yes," to	Form 990, Part IV, line 4, or Fo	rm 990-EZ, Part VI, li	ne 47 (Lobbying Act	tivities), th	ien
 Section 501(c)(3) org 	ganizations that I	nave filed Form 5768 (election u	nder section 501(h)): C	omplete Part II-A. Do	not comp	lete Part II-B.
 Section 501(c)(3) org 	ganizations that I	nave NOT filed Form 5768 (elect	ion under section 501(h)): Complete Part II-	B. Do not o	complete Part II-A.
-		Form 990, Part IV, line 5 (Prox	y Tax), or Form 990-E	Z, Part V, line 35c (F	Proxy Tax)	, then
), or (6) organizat	ions: Complete Part III.				
Name of organization						r identification number
Part I-A Comple	BABSON		or cootion E01(c))4-2103544
Part I-A Comple	ete if the org	anization is exempt und	er section 501(c)	or is a section :	527 orga	anization.
	-	ation's direct and indirect politic			•	
3 Volunteer hours					····· <u> </u>	
Part I-B Comple	oto if the ore	anization is exempt und	or soction 501(a)	(3)		
					¢	
2 Enter the amount o	f any excise tax	incurred by the organization unc incurred by organization manage	ner section 4955		∵ ` ∳_	
		n 4955 tax, did it file Form 4720				Yes No
b If "Yes," describe in						
Part I-C Comple	ete if the ord	anization is exempt und	er section 501(c)	except section	501(c)(3).
		by the filing organization for se		-	► \$	-,-
		zation's funds contributed to ot			• •	
					▶\$	
		. Add lines 1 and 2. Enter here a			• • —	
	•	. Aud lines 1 and 2. Line here a		,	►\$	
		1120-POL for this year?				Yes No
		ployer identification number (El				
		tion listed, enter the amount paid		-		
	•	omptly and directly delivered to a	•••			
		additional space is needed, prov			·	0 0
(a) Name	<u> </u>	(b) Address	(c) EIN	(d) Amount paid	from	(e) Amount of political
(a) Name	,			filing organizatio		ntributions received and
				funds. If none, ent	ter -0	promptly and directly
					0	delivered to a separate
						political organization. If none, enter -0
						,
For Paperwork Reducti	ion Act Notice,	see the Instructions for Form 9	990 or 990-EZ.	Scheo	dule C (Fo	rm 990 or 990-EZ) 2012
I HA					•	•

Schedule C (Form 990 or 990-EZ) 2012 BABSON COLLEGE

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).									
•••	Check Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
		• •	visions apply						
B Check ▶ ☐ if the filing organization	n checked box A ar	ia inflited control pro	ovisions apply.	(a) Filing	(b) Affiliated group				
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)								
1a Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)							
b Total lobbying expenditures to influe	nce a legislative boo	ly (direct lobbying)							
c Total lobbying expenditures (add line	es 1a and 1b)								
d Other exempt purpose expenditures									
e Total exempt purpose expenditures	add lines 1c and 1c)							
f Lobbying nontaxable amount. Enter	the amount from the	e following table in bot	h columns.						
If the amount on line 1e, column (a) or (b) is: The lob	bying nontaxable am	ount is:						
Not over \$500,000	20% of	the amount on line 1e.							
Over \$500,000 but not over \$1,000,0	000 \$100,00	0 plus 15% of the exc	ess over \$500,000.						
Over \$1,000,000 but not over \$1,500),000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.						
Over \$1,500,000 but not over \$17,00	0,000 \$225,00	0 plus 5% of the exce	ess over \$1,500,000.						
Over \$17,000,000	\$1,000,0	000.							
-	g Grassroots nontaxable amount (enter 25% of line 1f)								
h Subtract line 1g from line 1a. If zero o									
i Subtract line 1f from line 1c. If zero o									
j If there is an amount other than zero	on either line 1h or	line 1i, did the organiz	ation file Form 4720	г					
reporting section 4911 tax for this ye				L	Yes No				
	ions that made a s	• •	Section 501(h) n do not have to com es 2a through 2f on pa						
	Lobbying Exper	ditures During 4-Yea	ar Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total				
2a Lobbying nontaxable amount									
b Lobbying ceiling amount (150% of line 2a, column(e))									
c Total lobbying expenditures									
d Grassroots nontaxable amount									
e Grassroots ceiling amount (150% of line 2d, column (e))									
f Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2012

232042 01-07-13

Schedule C (Form 990 or 990-EZ) 2012 BABSON COLLEGE

04-2103544 Page 3

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description			a)	(b)	
of the	o lobbying activity.	Yes	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?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
с	Media advertisements?		Х		
	Mailings to members, legislators, or the public?		Х		
	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		Х		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i	Other activities?	Х			1.
j	Total. Add lines 1c through 1i				1.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6).			N.	N
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	• •			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," U	R (D) Par	[III-A, III	1e 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 political				
-	expenses for which the section 527(f) tax was paid).	201		1	
а	Current year		2a	1	
	Carryover from last year				
	Total				
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
	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			1	
		Ontical	4	1	
5	Expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			5		
	blete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Pa	ort II A (offili	atod aroup	lict): Dort II	A line 2:
	Part II-B, line 1. Also, complete this part for any additional information.	art II-A (arrii	ateu group	iist), Fait Ii	-A, III e 2,
	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
THI	E ORGANIZATION PAYS MEMBERSHIP DUES TO MEMBER ORGAN	IZATI	ONS WH	ICH MZ	AY
ENC	GAGE IN LOBBYING ACTIVITIES. THEREFORE, A PORTION O	F THE	DUES	MAY BE	3
ATT	RIBUTABLE TO LOBBYING ACTIVITIES.				

Schedule C (Form 990 or 990-EZ) 2012

232043 01-07-13

SCHEDULE	D
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(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047
2012
Open to Public Inspection

Nam	e of the organization BABSON COLLEGE			Employer identification number $04 - 2103544$					
Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the								
	organization answered "Yes" to Form 990, Part IV, line 6.								
		(a) Donor advised funds	(k) Funds and other accounts					
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed fund	ds					
	are the organization's property, subject to the organization	s exclusive legal control?		Yes 🗌 No					
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be	e used o	nly					
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferr	ing					
_									
Pa	t II Conservation Easements. Complete if the c	rganization answered "Yes" to Form 990, F	Part IV, I	ine 7.					
1	Purpose(s) of conservation easements held by the organization								
	Preservation of land for public use (e.g., recreation or								
	Protection of natural habitat	Preservation of a cert	tified his	storic structure					
	Preservation of open space								
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form	of a co	nservation easement on the last					
	day of the tax year.		г						
			ł	Held at the End of the Tax Year					
a	Total number of conservation easements			2a					
b				2b					
C	Number of conservation easements on a certified historic s		r	2c					
d	Number of conservation easements included in (c) acquired			2d					
3	listed in the National Register								
5	year	eleased, extinguished, or terminated by th	eorgan						
4	Number of states where property subject to conservation e	easement is located							
5	Does the organization have a written policy regarding the p								
-	violations, and enforcement of the conservation easements			Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting								
7	Amount of expenses incurred in monitoring, inspecting, and								
8	Does each conservation easement reported on line 2(d) ab								
	and section 170(h)(4)(B)(ii)?			Yes No					
9	In Part XIII, describe how the organization reports conserva-								
	include, if applicable, the text of the footnote to the organiz	ation's financial statements that describes	the org	anization's accounting for					
_	conservation easements.								
Pa	t III Organizations Maintaining Collections		Other S	Similar Assets.					
	Complete if the organization answered "Yes" to For								
1a	If the organization elected, as permitted under SFAS 116 (A								
	historical treasures, or other similar assets held for public e		ance of [oublic service, provide, in Part XIII,					
	the text of the footnote to its financial statements that desc								
b	If the organization elected, as permitted under SFAS 116 (A								
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pu	IDIIC Ser	vice, provide the following amounts					
	relating to these items:			► ¢					
	(i) Revenues included in Form 990, Part VIII, line 1								
0	(ii) Assets included in Form 990, Part X								
2	If the organization received or held works of art, historical to		a yan, I	JOVICE					
а	the following amounts required to be reported under SFAS Revenues included in Form 990, Part VIII, line 1			▶ \$					
a b	Assets included in Form 990, Part X								
			•••••	► Ψ					

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

Schedule D (Form 990) 2012

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<u>Sche</u>	dule D (Form 990) 2012 BABSON							04-21			age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	torical Tr	easures,	or Oth	er Simil	lar Asse	ts (contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, checl	k any of the	following that	at are a s	significant	use of its	collectior	n item	S
	(check all that apply):										
а	LX Public exhibition	d			hange progr	ams					
b	Scholarly research	е		Other							
С	X Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how th	ney further th	ne organizat	ion's exe	empt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit o								-		7
_	to be sold to raise funds rather than to be ma							L	Yes	X	No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to	Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi								٦		٦
	on Form 990, Part X?							L	Yes	L	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	table:							
									Amount		
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
20	Ending balance Did the organization include an amount on Fe	orm 000 Dart V lina	010						Yes		No
	If "Yes," explain the arrangement in Part XIII.]
Par											1
		(a) Current year		rior year	(c) Two yea			years back	(e) Four	vears	back
1a	Beginning of year balance	239,492,137.		,252,672.	197,00			024,282.		376,	
h	Contributions	11,995,372.		,301,653.		2,624.		840,252.		,043	
c	Net investment earnings, gains, and losses	33,419,630.		,366,163.		, 0,554.		, 723,572.		842,	
d	Grants or scholarships	-2,173,736.		,152,163.		3,530.		, 907,729.			564.
e	Other expenditures for facilities										
	and programs	-7,213,435.	-7	,543,862.	-7,38	2,725.	-6,0	674,628.	-8,	409,	675.
f	Administrative expenses									-	
g	End of year balance	275,519,968.	239	,492,137.	243,25	2,672.	197,0	005,749.	171,	024,	282.
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1	g, column (a	i)) held as:						
а	Board designated or quasi-endowment	42.00	%								
b	Permanent endowment > 33.00	%	_								
с	Temporarily restricted endowment 2	<u>5.00 %</u>									
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are held a	nd administe	ered for t	he organi	zation	_		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		X
	(ii) related organizations										Х
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Scheo	dule R?					3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm										
	Description of property	(a) Cost or ot		(b) Cost		• •	ccumulat		(d) Book	c value	e
		basis (investm	nent)	basis (, ,	de	preciatior	1	4.07		7 2
1 a	Land				9,673.	1 5 0	072 0	07 10		9,6	
b	Buildings			256,92	7,485.	152,	073,8	27.10	4,85	5,6	58.
	Leasehold improvements			25 20	0 207	24	40E 0	71	2 0 0		10
	Equipment				0,387.						
	Other		· ·		3,085.	⊥/,	490 , 4				
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	X, colun	nn (B), line 1	U(c).)				6,374	-	
								Schedule	D (Form	990)	2012

Schedule D (Form 990) 2012 BABSON COLI			04-	-2103544	Page 3
Part VII Investments - Other Securities. Se	ee Form 990, Part X, line	12.			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation: Cost or end	-of-year market va	lue
1) Financial derivatives					
2) Closely-held equity interests					
3) Other					
(A) ALTERNATIVE INVESTMENTS	91,864,917	7. END-OF-YE	AR MARKET	VALUE	
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(1)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	91,864,917				
Part VIII Investments - Program Related. S					
(a) Description of investment type	(b) Book value	(c) Method of val	uation: Cost or end	-of-year market va	lue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►					
Part IX Other Assets. See Form 990, Part X, line					
. ,	Description			(b) Book valu	le
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) lir	15)				
Part X Other Liabilities. See Form 990, Part X,					
I. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(1) Federal income taxes (2) GOVERNMENT ADVANCES FOR S					
(3) LOANS		3,102,346.			
(4) MARKET VALUE OF INTEREST	RATE SWAD	5,102,510.			
(5) CONTRACTS		14,510,280.			
(6)		11,510,2000			
(6)					
(7) (8)					
(9)					

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2012

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12160328 130157 BABSON

(10) (11)

17,612,626.

Sche	dule D (Form 990) 2012 BABSON COLLEGE		04-	2103544	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per R	etur	n	
1	Total revenue, gains, and other support per audited financial statements		1	210,870	,103.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a 25,141,997.			
	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII.)	2d - 24,646,997.			
	Add lines 2a through 2d		2e		,000.
3	Subtract line 2e from line 1		3	210,375	,103.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c		0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			210,375	<u>,103.</u>
Par	t XII Reconciliation of Expenses per Audited Financial Statemer	nts With Expenses per			
1	Total expenses and losses per audited financial statements		1	167,543	<u>,236.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			_
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	167,543	<u>,236.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b 31,262,580.			
	Add lines 4a and 4b		4c	31,262	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	198,805	<u>,816.</u>
Par	t XIII Supplemental Information				
	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,			2b; Part V, line	4; Part
	2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p				
PAF	T III, LINE 1A: WORKS OF ART, HISTORICAL T	REASURES, LITER	ARY	WORKS A	AND
3 7 1			-		3 N TD
AR	IFACTS, WHICH ARE PRESERVED AND PROTECTED	FOR EDUCATIONAL	, R	ESEARCH	AND
דדת		יים אמת החד	т T T T T T T T T T T T T T T T T T T T	עדס	
PUE	BLIC EXHIBITION PURPOSES, ARE NOT CAPITALIZ	ED. THEY ARE N	ETT	пек	
סדם	POSED OF FOR FINANCIAL GAIN NOR ENCUMBERED	TN ANY MANNER	Δ	CCORDIN	2T.V
<u>DTC</u>	10012 OF FOR FIRMACIAL GAIN NOR ENCOMDERED				<u>,</u>
SUC	CH COLLECTION ITEMS ARE NOT RECORDED FOR FI	NANCIAL STATEME	NT	PURPOSES	5.

PART V, LINE 4: BABSON COLLEGE'S ENDOWMENT CONSISTS OF OVER 240

INDIVIDUAL FUNDS WHICH HAVE BEEN ESTABLISHED OVER TIME FOR VARIOUS

Schedule D (Form 990) 2012

232054 12-10-12 Part XIII Supplemental Information (continued)

PURPOSES, INCLUDING SCHOLARSHIPS, CHAIRS AND PROFESSORSHIPS, FACILITIES,

ATHLETICS AND OTHER EDUCATIONAL SERVICES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

STUDENT AID \$32,248,391

CHANGE IN VALUE OF SWAP AGREEMENTS \$5,591,301

BABSON GLOBAL ADJUSTMENTS \$2,010,093

PART XII, LINE 4B - OTHER ADJUSTMENTS:

STUDENT AID \$32,248,389

BABSON GLOBAL ADJUSTMENTS -\$985,809

Schedule D (Form 990) 2012

232055 12-10-12

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30 2012.04030 BABSON COLLEGE

SCHEDULE	Е

(Form 990 or 990-EZ)

Name of the organization

BABSON COLLEGE

Department of the Treasury Internal Revenue Service

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

Schools

Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

Inspection

Employer	identification number
0	4-2103544

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Pai				
			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 scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.			
	If you need more space, use Part II	3	X	
	BABSON COLLEGE PROHIBITS DISCRIMINATING ON THE BASIS OF RACE,			
	COLOR, NATIONAL, OR ETHNIC ORIGIN, RELIGION, SEX, LIFESTYLE,			
	SEXUAL ORIENTATION PREFERENCE, AGE, HANDICAP, OR VETERAN			
	STATUS.THIS POLICY IS PUBLISHED IN FACULTY & STAFF HANDBOOK.			
4	Does the organization maintain the following?		v	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		v	
	admissions, programs, and scholarships?	4c	X X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	^	
	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
	Admissions policies?	5b		Х
с	Employment of faculty or administrative staff?	5c		Х
	Scholarships or other financial assistance?	5d		X
	Educational policies?	5e		X
	Use of facilities?	5f		X
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
C -		C -	х	
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Δ	x
α	Has the organization's right to such aid ever been revoked or suspended?	6b		
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	
	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 99			(2012)
гЦА		0 01 95	5 22)	2012)

Schedule E (Form 990 or 990-EZ) (2012) BABS	ON COLLEGE			04	-2103544 _{Pa}
Part II Supplemental Information as applicable. Also complete this p	 Complete this part to p art to provide any other 	rovide the explanatio additional informatior	ns required by P ı.	art I, lines 3, 4d	l, 5h, 6b, and 7,
SCHEDULE E, LINE 6 - EXP	LANATION OF	GOVERNMENT	FINANCIA	AL AID:	
BABSON COLLEGE RECEIVES	FEDERAL AID	TO ENHANCE	SCHOLARS	SHIP AND	WORK STUD
PROGRAMS.					
232062 12-18-12		32		chedule E (Fo	rm 990 or 990-EZ) (ź
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SCHEDULE	F
(Form 990)	

Department of the Treasury

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Internal Revenue Service						Inspection
Name of the organization					Employer ider	ntification number
BABSON COLLEGE					04-2103	544
	rmation on A	Activities Out	tside the United States. Compl	ete if the orgar		
to Form 990, Par	t IV, line 14b.					
-	-		ds to substantiate the amount of its gr			
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award th	e grants or ass	istance?∟	Yes L No
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and c	other assistance of	outside the
3 Activities per Region. (T	he following Parl	t I, line 3 table c	an be duplicated if additional space is	needed.)		
(a) Region	(b) Number of offices	(c) Number of employees, agents, and	(d) Activities conducted in region (by type) (e.g., fundraising, program	is a pro	vity listed in (d) gram service,	(f) Total expenditures for and
	in the region	independent contractors in region	services, investments, grants to recipients located in the region)		e specific type ce(s) in region	investments in region
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0		EXECUTIVE 1	EDUCATION	4,384.
	-					
EAST ASIA AND THE						
PACIFIC	0	0	PROGRAM SERVICES	EXECUTIVE 1	EDUCATION	85,435.
EUROPE	0	o	PROGRAM SERVICES	EXECUTIVE 1	EDUCATION	206,555.
						,
MIDDLE EAST AND						
NORTH AFRICA	0	0	PROGRAM SERVICES	EXECUTIVE 1	EDUCATION	13,551.
SOUTH AMERICA	o	0	PROGRAM SERVICES	EXECUTIVE 1	EDUCATION	68,923.
EUROPE	0	0	DEVELOPMENT/FUNDRAISING			16,517.
EAST ASIA AND THE			ALUMNI			
PACIFIC	o	0	RELATIONS/FUNDRAISING			528.
	0	0	RELATIONS/FUNDRAISING			1,346.
3 a Sub-total b Total from continuation		0				397,239.
sheets to Part I	o	0				47,737,588.
c Totals (add lines 3a						, , ,
and 3b)	0	0				48,134,827.

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

Schedule F (Form 990) 2012

232071 12-10-12



Schedule F (Form 990) Part I Continuatio	BABSON C		n. (Schedule F (Form 990), Part I, line 3	3)	03544 _{Page}
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND			ALUMNI		
NORTH AFRICA	0	0	RELATIONS/FUNDRAISING		0
NORTH AMERICA	o	0	ALUMNI RELATIONS/FUNDRAISING		0
			ALUMNI		
SOUTH AMERICA	0	0	RELATIONS/FUNDRAISING		3,353
			ALUMNI		
SOUTH ASIA	o	0	RELATIONS/FUNDRAISING		1,474
CENTRAL AMERICA AND				STUDENTS STUDY ABROAD	
THE CARIBBEAN	0	0	PROGRAM SERVICES	PROGRAMS	9,655
EAST ASIA AND THE PACIFIC	o	0	PROGRAM SERVICES	STUDENTS STUDY ABROAD PROGRAMS	646,710
				STUDENTS STUDY ABROAD	
EUROPE	0	0	PROGRAM SERVICES	PROGRAMS	1,385,883
MIDDLE EAST AND				STUDENTS STUDY ABROAD	
NORTH AFRICA	C	0	PROGRAM SERVICES	PROGRAMS	81,367
RUSSIA AND THE NEWLY				STUDENT STUDY ABROAD	
INDEPENDENT STATES	0	0	PROGRAM SERVICES	PROGRAMS	29,944
SOUTH AMERICA	C	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	254,815
Fotals					

232181 05-01-12

Schedule F (Form 990) Part I Continuation	BABSON C on of Activitie		n. (Schedule F (Form 990), Part I, line	3)	03544 Page
(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 expenditure for region
				STUDENT STUDY ABROAD	
SOUTH ASIA	0	0	PROGRAM SERVICES	PROGRAMS	22,97
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	179,88
ENTRAL AMERICA AND	a	0	INVESTMENT		45,121,53
Fotals					47,737,58

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BABSON COLLEGE

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
the IRS, or for which	the grantee or counse	el has provided a sectior	recognized as charities by the n 501(c)(3) equivalency letter		-	►		J	

04-2103544

Page 2

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

(c) Number of (d) Amount of

Part III can be duplicated if additional space is needed.

(b) Region

) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	non-cash assistance	non-cash assistance	(h) Modrod of valuation (book, FMV, appraisal, other)
						Sched	 ule F (Form 990) 2012

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(e) Manner of

(h) Method of

(f) Amount of

(g) Description of

Schedule F (Form 990) 2012

(a) Type of grant or assistance

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 No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>the organization may be required to 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)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)</i>	X Yes	No 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 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 No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)</i>	X Yes	No No

Schedule F (Form 990) 2012

						II, line 1 (accour mplete this part						method); and Part III, colu ion.
SCHEDULE F,	PART I,	LINE	3:	ALL	THE	NUMBERS	ARE	BAS	ED	ON	THE	AMOUNTS
ASSOCIATED W	ITH THE	ACTIV	ΊΤΥ	ON	THE	ORGANIZ	ATIO	N'S	TRI	AL	BALA	ANCE.
232075 12-10-12						2.0					:	Schedule F (Form 990) 2
.60328 13015'	7 BABSON	Г	2	2012	.040	39 30 BABSC	N CO	LLE	GE			BABSON_

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury	
Internal Revenue Service	

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2012	
Open To Public	

OMB No. 1545-0047

	Attach to Form 990 or Form 990-E	:Z. Þ :	See se	eparate instructions	s.			
Name of the organization BABSON	COLLEGE					Employer ide $04 - 2103$	ntification number 544	
Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or key employees listed in Form 990, P b If "Yes," list the ten highest paid ind compensated at least \$5,000 by the 	sed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual Part VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees	Yes		
(i) Name and address of individual or entity (fundraiser)	(III) ACTIVITV have custody 1 1		(iv) Gross receipts from activity		Amount paid or retained by) fundraiser sted in col. (i)	(vi) Amount paid to (or retained by) organization		
		Yes	No					
Total								
3 List all states in which the organization or licensing.		contrib	oution	s or has been notified	d it is	exempt from re	egistration	

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

Schedule G (Form 990 or 990-EZ) 2012

232081 01-07-13

Schedule G (Form 990 or 990-EZ) 2012 BABSON COLLEGE

Pa	Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000									
of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.										
			(a) Event #1 PRESIDENT'S CUP	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through				
e			(event type)	(event type)	(total number)	col. (c))				
Revenue	1	Gross receipts	105,545.			105,545.				
	2	Less: Contributions	66,300.			66,300.				
	3	Gross income (line 1 minus line 2)	39,245.			39,245.				
	4	Cash prizes	1,605.			1,605.				
	5	Noncash prizes	0.							
Direct Expenses	6	Rent/facility costs	46,073.			46,073.				
lirect E	7	Food and beverages	652.			652.				
	8	Entertainment	0.							
	9	Other direct expenses	40 846			13,746.				
	10	Direct expense summary. Add lines 4 through	()			(62,076,				
Pa	11 rt					-22,831.				
		\$15,000 on Form 990-EZ, line 6a.								
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))				
Rev	1	Gross revenue			27,100.	27,100.				
ses	2	Cash prizes			1,775.	1,775.				
Direct Expenses	3	Noncash prizes			12,887.	12,887.				
Direct	4	Rent/facility costs			0.					
	5	Other direct expenses			1,355.	1,355.				
	6	Volunteer labor	Yes%	└── Yes % └── No	└── Yes % X No					
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			(16,017,				
8 Net gaming income summary. Combine line 1, column d, and line 7										
	_			·						
 9 Enter the state(s) in which the organization operates gaming activities: MA a Is the organization licensed to operate gaming activities in each of these states?										
		ere any of the organization's gaming licenses re Yes," explain:			year?	Yes X No				
	_									

232082 01-07-13

Schedule G (Form 990 or 990-EZ) 2012

Schedule G (Form 990 or 990-EZ) 2012 BABSON COLLEGE	04-22	L O 3	544	Page 3
11 Does the organization operate gaming activities with nonmembers?			Yes	X No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	ł			
to administer charitable gaming?			Yes	X No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	l	13a	100	.00 %
b An outside facility		13b		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and re	cords:			
Name RICHARD BOWMAN				
Address > 231 FOREST STREET - BABSON PARK, MA 02457				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	X No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the a	amount			
of gaming revenue retained by the third party $ ightarrow$ \$				
c If "Yes," enter name and address of the third party:				
Name				
Address 🕨				
16 Gaming manager information:				
NONE				
Name None				
Gaming manager compensation 🕨 \$				
Description of services provided 🕨				
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?			Yes	X No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sp	ent in the			
organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) (nd (() and	Dort III
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional				
		(000		<u></u>
000000 01 07 10		000	or 000	E7) 0040
232083 01-07-13 Sched 42	ule G (Form	330	JI 990	-52) 2012

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SCHEDULE I								OMB No. 1545-0047				
(Form 990)				Other Assistance	-	-		2012	_			
				s, and Individuals				Open to Public	_			
Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Attach to Form 990.											
Name of the organizat	tion BABSON CO	TTECE						Employer identification numb $04 - 2103544$				
Part I General I	nformation on Grants a							04 210554	<u> </u>			
1 Does the organi	zation maintain records	to substantiate the	e amount of the grants	or assistance, the	arantees' eligibilit	v for the grants or ass	sistance, and the selec	tion	—			
•	award the grants or assi		U U		•		, 		١o			
2 Describe in Part	t IV the organization's pro											
	nd Other Assistance to		-			anization answered "\	res" to Form 990, Part	: IV, line 21, for any				
	that received more than					(f) Method of	1					
.,	ddress of organization overnment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
BABSON GLOBAL, II 231 FOREST STREE BABSON PARK, MA (т	27-1642647		747,715.	0.			TO SUPPORT THE COLLEGE				
DADSON TARK, MA	02457 0510	2/ 104204/		/=/,/13.	••			MISSION INTERNATIONALLI	<u>. </u>			
2 Enter total numb	ber of section 501(c)(3) a	and government or	ganizations listed in th	e line 1 table	I	ı	I	1	1.			
	ber of other organization			·····		·····	·····		_			
LHA For Paperwork	k Reduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (20	12)			

Schedule I (Form 990) (2012)

BABSON COLLEGE

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INSTITUTIONAL GRANTS/SCHOLARSHIP	1249	32,248,389.	0.		
Part IV Supplemental Information. Complete this part to prov	l de the informatio	I n required in Part I,	I line 2, Part III, colum	l ın (b), and any other additional in	formation.
SCHEDULE I, PART I, LINE 2: THE PH	OCEDURES	FOR NEED-	BASED AWAR	DS INCLUDE	
REVIEW AND RESOLUTION OF ALL FEDER	AL-PROCE	SSOR - TDENT	TTED ELTG	TBTLTTY	
CONFLICTS AND 100% VERIFICATION OF	REPORTE	D PARENT A	ND STUDENT	INCOMES. FOR	
ALL FUNDS THERE IS A SEPARATION OF	THE AWA	RDING AND	DISBURSEME	NT FUNCTIONS	
(DIFFERENT INDIVIDUALS RESPONSIBLE	E FOR EAC	H), MONTHL	Y RECONCIL	IATIONS	
BETWEEN STUDENT ACCOUNTS AND THE	COLLEGE 'S	GENERAL L	EDGER, AND	AN ANNUAL	
AUDIT IN ACCORDANCE WITH OMB CIRCU	JLAR A-13	3.			

SCHEDULE I, PART III: THE CASH GRANT IS REFLECTED ON STUDENTS' ACCOUNTS.

(Fo	CHEDULE J Compensation Information o Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees o epartment of the Treasury Complete if the organization answered "Yes" to Form 990, Part IV, line 23. o									
	ernal Revenue Service Attach to Form 990. See separate instructions.									
Nam	e of the organization		Employer iden			mber				
De		BABSON COLLEGE	04-210	1354	4					
Pa	rt I Question	s Regarding Compensation								
1a	Part VII, Section A, X First-class or c X Travel for com X Tax indemnific		nal use sidence s		Yes	No				
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or								
	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b		Х				
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all officers, dir								
	trustees, and the C	EO/Executive Director, regarding the items checked in line 1a?		2	Х					
3	CEO/Executive Dire establish compens X Compensation Independent of	hy, of the following the filing organization used to establish the compensation of the organizat actor. Check all that apply. Do not check any boxes for methods used by a related organizat ation of the CEO/Executive Director, but explain in Part III. In committee Written employment contract compensation consultant X Compensation survey or study ther organizations X Approval by the board or compensation co	ion to							
4	During the year, dic organization or a re	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing lated organization:								
а	Receive a severand	e payment or change-of-control payment?		4a		X				
b	Participate in, or re	ceive payment from, a supplemental nonqualified retirement plan?		4b	X					
с	Participate in, or re	ceive payment from, an equity-based compensation arrangement?		4c		X				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
	For persons listed i contingent on the r	c)(3) and 501(c)(4) organizations must complete lines 5-9. n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio evenues of:		5a	X					
		ation?		5b		X				
		r 5b, describe in Part III.								
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n							
-	contingent on the r									
а	•			6a		Х				
		ation?		6b		X				
~		r 6b, describe in Part III.								
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	3							
-		es 5 and 6? If "Yes," describe in Part III		7	x					
8		reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th		<u>ا</u>		<u> </u>				
-	•	eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		х				
9										
-	Regulations section 53.4958-6(c)?									
LHA		eduction Act Notice, see the Instructions for Form 990.	Schedule	9 J (Fori	n 990	2012				

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Schedule J (Form 990) 2012

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(1) DR. LEONARD A. SCHLESINGER	(i)	485,303.	0.	157,090.	47,798.	174,970.	865,161.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SHAHID ANSARI	(i)	273,947.	37,417.	36,286.	27,798.	0.	375,448.	0.
PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DENNIS HANNO	(i)	262,322.	44,657.	31,323.	27,798.	56,826.	422,926.	0.
V.P. ACADEMIC PROG/DEAN, GRAD SCH.	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARY ROSE	(i)	190,540.	0.	17,862.	23,764.	20,039.	252,205.	0.
V.P. FOR CAMPUS/COMM. AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DIANA ZAIS	(i)	193,081.	0.	789.	22,158.	25,576.	241,604.	0.
V.P. FOR DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CAROL HACKER	(i)	179,203.	0.	367.	19,722.	14,288.	213,580.	0.
V.P.OF ALUMNI&FRIENDS NETWORK	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PHILIP SHAPIRO	(i)	262,364.	0.	17,000.	27,798.	26,126.	333,288.	0.
V.P.FOR FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DONNA BONAPARTE	(i)	210,146.	0.	844.	23,376.	12,016.	246,382.	0.
V.P. FOR HR (STARTING 10/12)	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) GRANT GOSSELIN	(i)	146,897.	0.	114.	16,505.	24,756.	188,272.	0.
V.P. FOR ENROLLMENT (10/12)	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JONATHAN MOLL	(i)	229,781.	0.	505.	26,298.	23,376.	279,960.	0.
V.P. AND GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SAMUEL DUNN	(i)	349,501.	0.	17,445.	27,798.	7,006.	401,750.	0.
VP FOR FACILITIES MGT/CIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) TRACEE PETRILLO	(i)	133,715.	0.	103.	14,118.	7,640.	155,576.	0.
CLERK	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ELAINE EISENMAN	(i)	378,079.	0.	1,952.	27,798.	16,316.	424,145.	0.
DEAN OF BABSON EXE. EDU.	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JAY RAO	(i)	447,491.	0.	182.	15,849.	37,100.	500,622.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JEAN PIERRE JEANNET	(i)	340,535.	0.	833.	17,079.	12,016.	370,463.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) MICHAEL FETTERS	(i)	305,420.	0.	1,157.	20,954.	1,024.	328,555.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.

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Schedule J (Form 990) 2012

04 - 2103544

Schedule J (Form 990) 2012

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	in prior Form 990	
(17) PATRICIA GUINAN	(i)	289,887.	1,478.	274.	15,682.	37,600.	344,921.	0.	
FACULTY	(ii)	0.	0.	0.	0.	0.		0.	
(18) JOSEPH WEINTRAUB	(i)	306,987.	0.	1,684.	18,773.	26,126.	353,570.	0.	
FACULTY	(ii)	0.	0.	0.	0.	0.		0.	
(19) PATRICIA GREENE	(i)	303,166.	2,245.	913.	24,957.	1,024.	332,305.	0.	
FACULTY/FORMER OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(20) SHELLEY KAPLAN	(i)	165,531.	0.	823.	18,430.	25,628.	210,412.	0.	
FORMER KEY EMPLOYEE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(21) TADEPALLI RAGHURAM	(i)	168,796.	0.	544.	16,357.	8,406.	194,103.	0.	
FORMER KEY EMPLOYEE	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

04-2103544

Part III Supplemental Information

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

PART I, LINE 1A: FIRST-CLASS TRAVEL:

THE COLLEGE POLICIES ALLOW THE PRESIDENT TO TRAVEL FIRST-CLASS UNDER

CERTAIN CIRCUMSTANCES.

TRAVEL FOR COMPANIONS:

ON OCCASION, THE PRESIDENT'S SPOUSE TRAVELS WITH THE PRESIDENT TO CERTAIN

BABSON COLLEGE FUNDRAISING AND NETWORKING EVENTS TO ASSIST IN THESE

ACTIVITIES WHICH FURTHER THE MISSION OF THE COLLEGE.

HOUSING ALLOWANCE:

THE PRESIDENT AND THE DEAN OF THE UNDERGRADUATE SCHOOL ARE REQUIRED TO LIVE

IN CAMPUS HOUSING AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE

BABSON COLLEGE. THE FAIR MARKET VALUE OF THE HOUSING AND ANY CLEANING

SERVICES, IF PROVIDED, ASSOCIATED WITH THE PROPERTY ARE INCLUDED AS A

NONTAXABLE BENEFIT.

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:

ON OCCASION, CERTAIN BONUS PAYMENTS PROVIDED TO OFFICERS AND KEY EMPLOYEES

ARE SUBJECT TO A TAX GROSS-UP. SUCH GROSS UP PAYMENTS ARE APPROVED BY THE

Part III Supplemental Information

Complete this part to 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.

PRESIDENT.

IN CONNECTION WITH CERTAIN TAXABLE REIMBURSEMENTS THE PRESIDENT RECEIVES

TAX GROSS UP PAYMENTS. SUCH GROSS UP PAYMENTS ARE APPROVED BY THE EXECUTIVE

COMMITTEE OF THE BOARD OF TRUSTEES AS PART OF HIS EMPLOYMENT CONTRACT.

HEALTH OR SOCIAL CLUB:

THE PRESIDENT RECEIVES AN ANNUAL MEMBERSHIP TO A LOCAL COUNTRY CLUB FOR

BUSINESS USE RELATED TO THE COLLEGE. THE MEMBERSHIP FEE FOR FY2013 WAS

\$7,080.

PART I, LINE 1B: ALL 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.

PART I, LINE 4B: EFFECTIVE JULY 1, 2012 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 \$50,000 FOR EACH PLAN YEAR HE HOLDS THE TITLE OF PRESIDENT OF THE

Schedule J (Form 990) 2012

232113

12-10-12

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to 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.

COLLEGE ON JUNE 30TH OF SUCH PLAN YEAR. AMOUNTS AWARDED UNDER THE PLAN ARE

100% VESTED AT THE TIME OF THE AWARD. FOR THE CURRENT PLAN YEAR AN AMOUNT

OF \$50,000 AND AN ACCOMPANYING TAX GROSS UP WERE INCLUDED IN TAXABLE WAGES

AND ARE REPORTED ON SCHEDULE J, PART II, COLUMN (B)(III).

PART I, LINE 5: ONE KEY EMPLOYEE HAS A INCENTIVE PLAN BASED ON THE

PERFORMANCE OF CERTAIN PROGRAMS AT THE COLLEGE.

PART I, LINE 7: FROM TIME TO TIME OFFICERS AND KEY EMPLOYEES MAY

RECEIVE NON-FIXED PAYMENT BONUS. ALL BONUSES ARE APPROVED BY THE PRESIDENT

AND REVIEWED BY HUMAN RESOURCES.

THE FORMER OFFICERS LISTED IN FORM 990 PART

VII/SCHEDULE J-2 RECEIVE COMPENSATIONS AS THE FOLLOWING CURRENT POSITIONS:

	FORMER POSITION	CURRENT POSITION
PATRICIA GREENE:	PROVOST	FACULTY
SHELLEY KAPLAN:	KEY EMPLOYEE	RETIRED
TADEPALLI RAGHURAM:	KEY EMPLOYEE	

OMB No. 1545-0047 Supplemental Information on Tax-Exempt Bonds SCHEDULE K 2012 Open to Public Complete if the organization answered "Yes" to Form 990. Part IV. line 24a. Provide descriptions. (Form 990) explanations, and any additional information in Part VI. Department of the Treasury Inspection Attach to Form 990. Internal Revenue Service See separate instructions. Employer identification number Name of the organization 04 - 2103544BABSON COLLEGE SEE PART VI FOR COLUMN (F) CONTINUATIONS Part I Bond Issues (a) Defeased (h) On behalf (i) Pooled (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (a) Issuer name (e) Issue price of issuer financing Yes Yes No No Yes No MA DEVELOPMENT FINANCE NEW BUILDING, 04-343181457583RCV5 08/31/05 Х A AGENCY (2005A) 22,996,717.MISC. PROJECT, RE Х Х MA DEVELOPMENT FINANCE REFINANCE DEBT BAGENCY (2007A) 04-343181457583RSC0 10/04/07 21,336,830. (1997A) - CONSTRUCT Х Х Х MA DEVELOPMENT FINANCE REFINANCE DEBT c AGENCY (2008A) 04-343181457583RUW3 04/17/08 36,475,000. (2002A) -NEW ASTR Х Х Х MA DEVELOPMENT FINANCE REFINANCE DEBT 04-343181457583UGH5 07/07/11 14,518,050. (1998A) - BLANK CEN Х Х DAGENCY (2011A) Х Part II Proceeds Α В С D 6,664,343 3,613,156. 3,095,000 1,905,000. 1 Amount of bonds retired 2 Amount of bonds legally defeased 22,996,717. 21,336,830. 36,475,000 14,518,050. **3** Total proceeds of issue 4 Gross proceeds in reserve funds 5 Capitalized interest from proceeds 6 Proceeds in refunding escrows 333,890. 315,976. 250,504. 243,275. 7 Issuance costs from proceeds 337,000. 242,000. 29,208. 8 Credit enhancement from proceeds Working capital expenditures from proceeds 9 15,230,149. Capital expenditures from proceeds 10 7,095,678. 20,778,854. 36,195,288. 14,274,775. Other spent proceeds 11 12 Other unspent proceeds 2008 2006 2007 2011 13 Year of substantial completion Yes No Yes No Yes No Yes No Х Х Х Х 14 Were the bonds issued as part of a current refunding issue? Х Х Х Х Were the bonds issued as part of an advance refunding issue? 15 Х Х Х Х Has the final allocation of proceeds been made? 16 Х Х X X 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III Private Business Use Was the organization a partner in a partnership, or a member of an LLC. в С D 1 Α which owned property financed by tax-exempt bonds? Yes No Yes No Yes No Yes No Χ Х Х Х 2 Are there any lease arrangements that may result in private business use of Х Х х Х bond-financed property? 51

²³²¹²¹ 12-17-12 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2012 BABSON COLLEGE

04-2103544	L
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Page 2

Part III Private Business Use (Continued)								
		<u>A</u>		B		ç	0	
3a Are there any management or service contracts that may result in private	Yes	No X	Yes	No X	Yes	No	Yes	No X
business use of bond-financed property?		A		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
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		.11 %		%		%		%
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		%		%		%		%
6 Total of lines 4 and 5		.11 %		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		Х
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		X		x		X		Х
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed		•						
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1.141-12 and 1.145-2?	х		х		х		х	
Part IV Arbitrage						1		L
Turrit Austrage		Α		В		C		,
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T?	100	X	100	X	100	X	100	X
2 If "No" to line 1, did the following apply?						1 1		
a Rebate not due yet?		X		X		X	Х	
b Exception to rebate?		X	Х		Х		X	
c No rebate due?	X		X		X		X	
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								<u> </u>
•								
computation was performed		X		X	X			X
3 Is the bond issue a variable rate issue?				47				
4a Has the organization or the governmental issuer entered into a qualified		x		x	х			x
hedge with respect to the bond issue?		A		-	A GOLDMAN SZ			A
b Name of provider						0000000		
c Term of hedge					<u>4</u> 3.			
d Was the hedge superintegrated?						X		
e Was the hedge terminated?						X		i

Schedule K (Form 990) 2012

BABSON COLLEGE

04-2103544

Page 3

Part IV Arbitrage (Continued)	Α		A B		С)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		Х		Х
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		Х
7 Has the organization established written procedures to monitor the requirements of								
section 148?	Х		X		X		X	
Part V Procedures To Undertake Corrective Action								
	4	<u>۱</u>	E	3	(2	[)
	Yes	No	Yes	No	Yes	No	Yes	No
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 is not available under applicable								
regulations?	X		X		X		X	
 (F) DESCRIPTION OF PURPOSE: NEW BUILDING, MISC. F (A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY ((F) DESCRIPTION OF PURPOSE: REFINANCE DEBT (1997A)-CONSTRUCTION OF SORENSON (A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY ((F) DESCRIPTION OF PURPOSE: REFINANCE DEBT (2002A) -NEW ASTROTURF ATHLETIC F 	2007A) & THE (2008A) TELD AN 2011A)	CHAPEL. ND ETC.		SBT .				
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C: (A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (DATE THE REBATE COMPUTATION WAS PERFORMED: 0)12						
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (DATE THE REBATE COMPUTATION WAS PERFORMED: 1)12						
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (2008A)							

SEE PART VI SUPPLEMENTAL INFORMATION SHEET

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

DATE THE REBATE COMPUTATION WAS PERFORMED: 04/16/2013

(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (2011A)

DATE THE REBATE COMPUTATION WAS PERFORMED: 07/01/2012

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open To Public Inspection

OMB No. 1545-0047

Internal Revenue Service	
Name of the organization	n

Department of the Treasury

Employer identification number
01-2103511

E	BABSON	CO	LLEGE							04	-21	035	44		
Part I Excess Bene	efit Trans	acti	ons (section 50	D1(c)(3	3) and :	sectior	n 501(c)(4) org	janiz	ations only).						
Complete if the	organizatior	n ansv	vered "Yes" on	Form	990, P	art IV, I	line 25a or 25	b, oi	r Form 990-EZ, P	art V,	line 40)b.			
1			Relationship bet								(d) Corrected?				
(a) Name of disqualified p	person	.,	person and or	ganiz	ation		(•	c) D	escription of trar	isactic	n		Y	es	No
			•	<u> </u>											
2 Enter the amount of tax	incurred by	the o	roanization man	agers	or dis	qualifie	ed persons du	ırina	the vear under						
			0	U		•	•	0			▶ \$				
3 Enter the amount of tax,											\$				
	in arry, or in	10 2,1		ica by		guinzu					v				
Part II Loans to and	d/or Fron	n Int	erested Per	sons	5.										
Complete if the	organization	n ansv	wered "Ves" on	Form	990.F7	Part V	V line 38a or	Forr	n 990 Part IV lir	a 26∙	or if th		nizati	on	
reported an amo	0					, i uit	v, iii le oou ol	1 011	11000, 1 dit 10, iii	10 20,	01 11 11	lo orge	nzati	011	
(a) Name of	(b) Relatio	nship	(c) Purpose		can to or	(0) Original	4	i) Balance due	(a)	In	(h) Ap	proved	(i) W	ritten
interested person	with organiza	tion	of loan		m the ization?	princ	cipal amount	"	Dalarice due	defa		by bo comm	ard or		ment?
	lorganiza			То	From					Yes	-	Yes	No.	Yes	No
										103		103	110	103	
Tatal							▶ \$								<u> </u>
Total Part III Grants or As	sistance	Ber	nefiting Inter	reste	d Pe	rsons									
Complete if the			•												
· · · ·						1				of		10			
(a) Name of interested	person	((b) Relationship interested pers	betwe	een		c) Amount of assistance		(d) Type assistan) Purp assista		ſ
			the organiza												
		_													
		_									—				
		_													
		_													

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

Schedule L (Form 990 or 990-EZ) 2012

Schedule L (Form 990 or 990-EZ) 2012 BABSON COLLEGE Part IV Business Transactions Involving Interested Persons.

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

	Tes Unitonni 990, Faitiv, inte 20a, 2	00, 01 200.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
				Yes	No
COMCAST	VICE PRESIDENT IS A	184,260.	CABLE FEES		X
JANICE BELL	SPOUSE OF PROVOST	225,451.	FACULTY WAG		X
BANK OF NEW YORK-MELLON	VICE CHAIRMAN & CEO	134,627.	INVESTMENT		X
PHYLLIS SCHLESINGER	SPOUSE OF PRESIDENT	31,881.	FACULTY WAG		X
FIDELITY INVESTMENTS	CHIEF INVESTMENT OF	0.	403(B)RETIR		X

Part V Supplemental Information

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

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

- (A) NAME OF PERSON: COMCAST
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

VICE PRESIDENT IS ALSO A BABSON TRUSTEE

(C) AMOUNT OF TRANSACTION \$ 184,260.

- (D) DESCRIPTION OF TRANSACTION: CABLE FEES PAID
- (E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: JANICE BELL

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF PROVOST

(C) AMOUNT OF TRANSACTION \$ 225,451.

(D) DESCRIPTION OF TRANSACTION: FACULTY WAGES PAID

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: BANK OF NEW YORK-MELLON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

VICE CHAIRMAN & CEO IS ALSO BABSON TRUSTEE

(C) AMOUNT OF TRANSACTION \$ 134,627.

(D) DESCRIPTION OF TRANSACTION: INVESTMENT FEES PAID

232132 12-03-12 Schedule L (Form 990 or 990-EZ) 2012

Schedule L (Form 990 or 990-EZ) BABSON COLLEGE

Part V Supplemental Information

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

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: PHYLLIS SCHLESINGER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF PRESIDENT

(C) AMOUNT OF TRANSACTION \$ 31,881.

(D) DESCRIPTION OF TRANSACTION: FACULTY WAGES PAID

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: FIDELITY INVESTMENTS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CHIEF INVESTMENT OFFICER IS ALSO BABSON TRUSTEE

(D) DESCRIPTION OF TRANSACTION: 403(B)RETIREMENT PLAN AND BABSON PAID NO

FEES.

12160328 130157 BABSON

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30.

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

7

Employer identification number

L

Department of the Treasury Internal Revenue Service

Name of the organization

BABSON COLLEGE

Pa	rt I Types of Property				1			
	·	(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 contrib	etermin	•	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	X	24	185,163.	AVG. OF HIS	LOW	-DA	TE
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 • ()							
26	Other ()							
27	Other ► (
28	Other ► ()							
29	Number of Forms 8283 received by the organi	ization durin	g the tax year for c	contributions				
	for which the organization completed Form 82							
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rej	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial							
	the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31	Х	
32a	Does the organization hire or use third parties							
	contributions?		-			32a		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) t	or a type of prope	rty for which column (a) is ch	iecked,			
	describe in Part II.	. /		-				
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule M	(Form	990) (2012)

12160328 130157 BABSON

Schedule M (Form 990)	(2012	BABSON	COLLEGE
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Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): BABSON USED THE NUMBER OF

CONTRIBUTIONS RECEIVED FOR COLUMN (B).

Schedule M (Form 990) (2012)

232142 12-20-12

SCHEDULE O (Form 990 or 990-EZ)

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

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. OMB No. 1545-0047

BABSON COLLEGE

Employer identification number 04 - 2103544

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: BABSON COLLEGE IS A GLOBAL LEADER IN MANAGEMENT EDUCATION WITH APPROXIMATELY 2000 UNDERGRADUATE AND 1200 GRADUATE ENROLLMENT. WE EDUCATE MEN AND WOMEN TO BE ENTREPRENEURIAL LEADERS IN A RAPIDLY CHANGING WORLD. THROUGHOUT THEIR CAREERS, WE PREPARE THEM TO IDENTIFY OPPORTUNITIES AND INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMENT. 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 AND THE COURAGE TO ACT RESPONSIBLY. TOWARD A GOAL, 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.

SECTION A, LINE 1: PURSUANT TO THE ORGANIZATION'S FORM 990, PART VI, BYLAW, THE BOARD OF TRUSTEES SHALL HAVE AN EXECUTIVE COMMITTEE WHICH SHALL THE PRESIDENT OF THE CORPORATION, THE CHAIRPERSON OF THE BOARD CONSIST OF THE VICE CHAIRPERSON(S) OF THE BOARD OF TRUSTEES, 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 TRUSTEE, THE EXECUTIVE COMMITTEE SHALL HAVE GENERAL SUPERINTENDENCE AND ADMINISTRATION LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) 232211 01-04-13 60

Schedule O (Form 990 or 990-EZ) (2012)	Page 2			
Name of the organization	Employer identification number			
BABSON COLLEGE	04-2103544			
OF THE CURRENT MANAGEMENT OF THE AFFAIRS OF THE CORPORATION	ON AND MAY			

EXERCISE ALL THE 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 4: EFFECTIVE OCTOBER 20,2012, BABSON

COLLEGE'S BYLAWS WERE AMENDED TO REFLECT THE REMOVAL AND ADDITION OF

CERTAIN OFFICER POSITIONS AS OUTLINED BELOW:

VICE CHAIRPERSONS OF THE BOARD OF TRUSTEES - NO CHANGE

PRESIDENT - NO CHANGE

TREASURER - NO CHANGE

PROVOST - NO CHANGE

EXECUTIVE VICE PRESIDENT/EXECUTIVE DEAN - REMOVED

VICE PRESIDENT FOR ADMINISTRATION - REMOVED

VICE PRESIDENT FOR INSTITUTIONAL ADVANCEMENT - REMOVED

VICE PRESIDENT OF THE BABSON ALUMNI AND FRIENDS NETWORK - NO CHANGE

VICE PRESIDENT FOR FINANCE - NO CHANGE

VICE PRESIDENT AND GENERAL COUNSEL - NO CHANGE

CHIEF INFORMATION OFFICER - REMOVED

VICE PRESIDENT FOR INSTITUTIONAL PLANNING - REMOVED

CLERK - NO CHANGE

VICE PROVOST, ACADEMIC PROGRAMS/DEAN, GRADUATE SCHOOL - NEW

VICE PRESIDENT FOR CAMPUS AND COMMUNITY AFFAIRS - NEW

VICE PRESIDENT FOR DEVELOPMENT - NEW

VICE PRESIDENT FOR HUMAN RESOURCE - NEW

VICE PRESIDENT FOR ENROLLMENT/DEAN, ADMISSIONS - NEW

VICE PRESIDENT FOR FACILITIES MANAGEMENT AND CONSTRUCTION, A CHIEF 232212 01-04-13 Schedule O (Form 990 of

Schedule O (Form 990 or 990-EZ) (2012)

12160328 130157 BABSON

61 2012.04030 BABSON COLLEGE Name of the organization

BABSON COLLEGE

Employer identification number 04 - 2103544

INFORMATION OFFICER - NEW

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED INTERNALLY AND REVIEWED BY MANAGEMENT AND PRICEWATERHOUSECOOPERS, LLP "PWC". 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 BY REQUEST. PWC 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 14: CURRENTLY THE COLLEGE HAS A WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY BUT IT IS NOT APPROVED BY THE BOARD OF TRUSTEES OR A COMMITTEE OF THE BOARD OF TRUSTEES.

 FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT,

 OFFICERS AND KEY EMPLOYEES OF THE COLLEGE IS REVIEWED BY HUMAN RESOURCES AT

 LEAST ONCE A YEAR. THIS REVIEW INCLUDES COMPARING 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 CHANGES TO COMPENSATION

 822212 01-04-13

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 12160328 130157 BABSON
 2012.04030 BABSON COLLEGE

Name of the organization BABSON COLLEGE	Employer identification number $04-2103544$
FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYEES IS APPROVED	BY THIS
COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19: BABSON COLLEGE'S F	INANCIAL
STATEMENTS CAN BE FOUND AT WWW.BABSON.EDU. BABSON DOES NO	T MAKE AVAILABLE
TO THE PUBLIC OUR CONFLICT OF INTEREST POLICY, OR OTHER G	OVERNING
DOCUMENTS.	
FORM 990 PART VII, SECTION A	
GARY T. DICAMILLO RECEIVES NO COMPENSATION FOR HOLDING TH	E POSITION OF
TRUSTEE. ALL HIS COMPENSATION WAS FOR HIS SERVICES AS AN	ADJUNCT
LECTURER.	
GORDON PRICHETT RECEIVES NO COMPENSATION FOR HOLDING THE	POSITION OF
TRUSTEE. ALL HIS COMPENSATION WAS FOR HIS SERVICES AS AN	ADJUNCT
LECTURER.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF SWAP AGREEMENTS	
FORM 990 PART XII, LINE 2C	
THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIB	
OVERSIGHT OF THE AUDIT. THE COMMITTEE REVIEWS AND APPROVE	S THE AUDITED
FINANCIAL STATEMENTS.	
232212	

232212 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

Page 2

SCHEDU	FR
COLLEDO	

(Form 990) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2012 Open to Public Inspection

Name of the organization

BABSON COLLEGE

 $\begin{array}{c} \text{Employer identification number} \\ 0\,4-2\,1\,0\,3\,5\,4\,4 \end{array}$

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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	(f) Direct controlling entity		9) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
BABSON GLOBAL, INC - 27-1642647							
231 FOREST STREET							
BABSON PARK, MA 02457	SUPPORTING ORGANIZATION	MASSACHUSETTS	501 (C)(3)	LINE 11A, I	BABSON COLLEGE	X	
	_						
	4						
	4						
]						

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

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 BABSON COLLEGE

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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)	(h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		portion- cations?	amount in box	manac	or Percentag ^{ng} ownershi
		country)		sections 512-514)			Yes	No	20 of Schedule K-1 (Form 1065)	Yesl	lo
	_										
	_										
	_										
	_										
	_										
	_										
	_										
	-										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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	(c) 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	contr enti	:ity?
		country)		,				Yes	No
CHARITABLE REMAINDER UNITRUST (2)									
ONE LINCOLN STREET									
BOSTON, MA 02111	FUNDRAISING	MA	N/A	TRUST					X

Part V	Transactions With Related Organization	ations (Complete if the or	ganization answered "Yes" to	Form 990, Part IV, line 34, 35b, or 36.)

	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
	During the tax year, did the organization engage in any of the following transaction								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		X		
b	Gift, grant, or capital contribution to related organization(s)				1b	X			
С	Gift, grant, or capital contribution from related organization(s)				1c		Х		
	Loans or loan guarantees to or for related organization(s)				1d		X		
е	Loans or loan guarantees by related organization(s)				1e		X		
f	Dividends from related organization(s)				1f		X		
	Sale of assets to related organization(s)				1 g		X		
h	Purchase of assets from related organization(s)				1h		X		
i	Exchange of assets with related organization(s)				1 i		X		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X		
I	Performance of services or membership or fundraising solicitations for related orga					X			
	Performance of services or membership or fundraising solicitations by related orga				1m	x	X		
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10		X		
р	Reimbursement paid to related organization(s) for expenses				1p		X		
q	Reimbursement paid by related organization(s) for expenses				1q		X		
	Other transfer of cash or property to related organization(s)				1r		X		
	Other transfer of cash or property from related organization(s)				1s		X		
2	If the answer to any of the above is "Yes," see the instructions for information on w	vho must complete t	this line, including covered	relationships and transaction thresholds.					
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved				
<u>(1)</u>]	BABSON GLOBAL, INC.	В	749,516.	ACTUAL COST					
<u>(2)</u>]	BABSON GLOBAL, INC.	L	4,445,064.	COST PLUS OVERHEAD RATE					
(3) BABSON GLOBAL, INC. N 0. INCLUDED IN OVERHEAD ABC									
(4)									
(5)									
(5)									
(6)									

Schedule R (Form 990) 2012 BABSON COLLEGE

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are a partners 501(c) orgs) all s sec.)(3) .?	(f) Share of total income	(g) Share of end-of-year assets	(I Dispr tion alloca	h) ropor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener manag partn Yes	al or f ging ler?	(k) Percentage ownership
			· · · · · · · · · · · · · · · · · · ·	103				163			163		

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Part VII	Supplemental Ir	nformation	

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

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2012 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	BUILDINGS, EQUIPMENTS AND IMPR * TOTAL 990 PAGE 10	VAR	IES		.000	16	294,168,113.			294,168,113.	152,746,993.		0.
	DEPR						294,168,113.		0.	294,168,113.	152,746,993.	0.	0.

(D) - Asset disposed