Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www irs gov/form990 tax vear beginning JUL 1, 2013 and ending JUN 30,

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning $$	<u>J</u> ŬN :	30, 2014					
B	Check if pplicable	C Name of organization	D En	nployer identific	cation number				
	Addres change	BABSON COLLEGE							
Ē	Name change	Doing Business As			103544				
	⊒return ⊒Termin ated	ZJI FOREDI DI•	uite E Tel	lephone number 781.	239.5298				
	Ameno return	City or town, state or province, country, and ZIP or foreign postal code	G Gro	G Gross receipts \$ 326,780,121.					
	Application	BABSON PARK, MA 02457-0510	H(a) ∣	s this a group re	eturn				
	pendin	F Name and address of principal officer: KERRY HEALEY		or subordinates					
		231 FOREST STREET, BABSON PARK, MA 02457	H(b) A	Are all subordinates in	cluded? Yes No				
1 7	Гах-ехе	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527 I	f "No," attach a	list. (see instructions)				
J١	Nebsit	e: WWW.BABSON.EDU	H(c) (Group exemption	n number 🕨				
KF	orm of	organization: X Corporation			State of legal domicile: MA				
Pa	art I	Summary		•	-				
_	1	Briefly describe the organization's mission or most significant activities: ${ t SEE \ \ SCHE}$	DULE ()					
Activities & Governance									
rna	2	Check this box if the organization discontinued its operations or disposed of r	nore than 2	25% of its net as	sets.				
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	38				
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			31				
Se	1	Total number of individuals employed in calendar year 2013 (Part V, line 2a)			2247				
ξ	1	Total number of volunteers (estimate if necessary)			2501				
Ċţ		Total unrelated business revenue from Part VIII, column (C), line 12			894,678.				
٩	1	Net unrelated business taxable income from Form 990-T, line 34			111,208.				
				or Year	Current Year				
Φ	8	Contributions and grants (Part VIII, line 1h)	11,	275,700.	20,810,199.				
ğ	1	Program service revenue (Part VIII, line 2g)	188,	299,609.	196,225,857.				
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,2	284,641.	9,429,009.				
Œ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	515,153.	2,632,752.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	210,	375,103.	229,097,817.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		996,104.	36,030,117.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.				
ý	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	95,0	661,791.	102,354,314.				
nse	1	Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.				
Expenses	b.	Total fundraising expenses (Part IX, column (D), line 25) 4,174,955.							
û		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	70,3	147,921.	75,466,065.				
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			213,850,496.				
	1	Revenue less expenses. Subtract line 18 from line 12	11,	569,287.	15,247,321.				
or		<u> </u>		of Current Year	End of Year				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	497,	548,639.	576,615,266.				
ASS	21	Total liabilities (Part X, line 26)	151,9	965,895.	185,067,181.				
Figure	22	Net assets or fund balances. Subtract line 21 from line 20	345,	582,744.	391,548,085.				
Pa	art II	Signature Block							
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and sta	itements, an	d to the best of my	/ knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any	knowledge.					
Sig	n	Signature of officer		Date					
Her	е	KATHERINE CRAVEN, CHIEF ADMINISTRATIVE OF Type or print name and title	FICER						
		<u> </u>	Date	1 21 1	II PTIN				
De!	,	Print/Type preparer's name Preparer's signature	Date	Check if					
Paid		ERIN COUTURE		self-employe					
-	oarer	Firm's name PRICEWATERHOUSECOOPERS LLP		Firm's EIN	13-4008324				
use	Only	Firm's address 125 HIGH STREET		Dharra 1.6	17\520 5000				
		BOSTON, MA 02110		Phone no. (6	17)530-5000 X Yes No				
1/121	/tne IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: BABSON COLLEGE EDUCATES MEN AND WOMEN TO BE ENTREPRENEURIAL LEADERS IN
	A RAPIDLY CHANGING WORLD. WE PREPARE THEM, IDENTIFY OPPORTUNITIES AND
	INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMENT.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	104 412 660 26 020 118 106 018 001
	BABSON COLLEGE ENROLLS APPROXIMATELY 2,100 UNDERGRADUATE AND 1,200
	GRADUATE STUDENTS FROM THE UNITED STATES AND MORE THAN 72 COUNTRIES
	WORLDWIDE. THE COLLEGE OFFERS EDUCATION IN BUSINESS AND LIBERAL ARTS,
	AND IT GRANTS THE BACHELOR OF SCIENCE DEGREE THROUGH ITS UNDERGRADUATE
	PROGRAM. THE COLLEGE ALSO GRANTS MASTER OF BUSINESS ADMINISTRATION
	DEGREES AND CUSTOM MASTER OF SCIENCE DEGREES THROUGH THE F.W.OLIN
	GRADUATE SCHOOL OF BUSINESS AT BABSON COLLEGE. ADDITIONALLY, BABSON
	OFFERS DISTINCT EXECUTIVE EDUCATION PROGRAMS TO HELP COMPANIES REACH
	THEIR STRATEGIC GOALS.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	7(
	Other program convince (Deceribe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 184,413,668.
<u> </u>	Total program do vido experiedo y

332002 10-29-13

BABSON COLLEGE 04-2103544 Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	If "Yes," complete Schedule A		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		37	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	טדו		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
. •	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	Х	L
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		
_		_		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			.,
	complete Schedule L, Part II	26		X
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	27		х
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		21
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Х	
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
00	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
5 4	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	X	

orm	990 (2013) BABSON COLLEGE		04-2103	544	P	age 🤄
Par	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	400			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportal	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	
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	2247			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b	X	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			1
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		X
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 A					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		T T T T T T T T T T T T T T T T T T T	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?		i	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	gifts			1
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				37	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pi	rovided to the payor?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_		v
	to file Form 8282?	- 1		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10			х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		Ĩ	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file.		00 00 000 1100 100	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For			7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di		t t	7h		
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8		
9		arry tillin	c during the year:	-		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		ī	9b		
10	Section 501(c)(7) organizations. Enter:			0.0		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	.0.0				
	Gross income from members or shareholders	11a				
	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			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	İ	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	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					
		13b				

Form **990** (2013)

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c Enter the amount of reserves on hand 13c

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.										
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 38 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.										
L	Enter the number of voting members included in line 1a, above, who are independent 1b 31										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
2		2		Х							
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision										
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х							
4											
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		Х							
	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		X							
	persons other than the governing body?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v								
	The governing body?	8a	X								
	Each committee with authority to act on behalf of the governing body?	8b									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
	Did the organization have local chapters, branches, or affiliates?	10a		X							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40.									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		X							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Λ							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10-	Х								
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	21								
C	in Schedule O how this was done	12c	х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	Х								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
800	exempt status with respect to such arrangements?	16b									
	tion C. Disclosure										
17 10	List the states with which a copy of this Form 990 is required to be filed ►MA, CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are states with which a copy of this Form 990 is required to be filed ►MA, CA	- Vailah	ulo.								
18	for public inspection. Indicate how you made these available. Check all that apply.	ıvallaD	n C								
	X Own website X Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial								
	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:									
	RICHARD BOWMAN - 781.239.5298										
	- NELCHELLS BELLETING BARSON CHILLBER BARSON DADK MA 11767-11401										

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average			(C Posi	ition	1		(D) Reportable	(E) Reportable	(F) Estimated
Name and Tide	hours per week	box.	not ch , unles cer an	ss pe	rson i	is bot	h an	compensation	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL J. ANGELAKIS TRUSTEE	1.20	x						0.	0.	0.
(2) THE HONOR. CRAIG BENSON	1.20									
VICE CHAIR, BOARD OF TRUSTE		Х		Х				0.	0.	0.
(3) ETTORE V. BIAGIONI	1.20									
TRUSTEE (STARTING 10/13)		Х						0.	0.	0.
(4) MARLA M. CAPOZZI	1.20									
TRUSTEE	1.20	Х						4,000.	0.	0.
(5) PAUL W. CHISHOLM	1.20									
TRUSTEE		Х						0.	0.	0.
(6) THEODORE A CLARK	1.20								_	_
TREASURER		Х		X				0.	0.	0.
(7) ANN-MARIE SWEENEY COPLAND	1.20									•
TRUSTEE	1 00	Х						0.	0.	0.
(8) TIMOTHY A. DEMELLO	1.20									0
TRUSTEE	1.20	Х						0.	0.	0.
(9) DEBORAH DESANTIS	1.20	x						0.	0.	0
TRUSTEE TO DECEMBE OF THE PROPERTY OF THE PROP	1.20	Λ						0.	0.	0.
(10) GARY T. DICAMILLO TRUSTEE	1.20	х						6,779.	0.	0.
(11) CRAIG M. DONALDSON	1.20	Λ						0,779.	0.	<u>U•</u>
TRUSTEE (STARTING 10/13)	1.20	х						0.	0.	0.
(12) FRANK M. FISCHER	1.20	Δ	H					0.	•	<u></u>
TRUSTEE	1.20	х						0.	0.	0.
(13) MARCO A. GARGUREVICH	1.20								•	
TRUSTEE (UNTIL 10/13)		х						0.	0.	0.
(14) THOMAS F. GILBANE JR.	1.20							•		
TRUSTEE		х						0.	0.	0.
(15) LEONARD GREEN	1.20									
TRUSTEE (STARTING 10/13)		х						0.	0.	0.
(16) MUHAMMAD H. HABIB	1.20									
TRUSTEE		Х						0.	0.	0.
(17) DR. KERRY HEALEY	40.00									
TRUSTEE/PRESIDENT (STARTING 7/1/13)	20.00	Х		Х				413,109.	0.	52,889.

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Form 990 (2013) BABSON C									<u> </u>	7 = =	Га	ige o
Part VII Section A. Officers, Directors, True		ploy	ees			ghe	st C				<u></u>	
(A) Name and title	(B) Average hours per week	box	not c , unle cer an	ss pe	ition more rson i	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	Estir amo	(F) mate ount o ther	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	High est compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compe	ensat m the nizati relate	e on ed
(18) BRUCE T. HERRING	1.20	l						•				_
VICE CHAIR, BOARD OF TRUSTE	1 20	Х		Х				0.	0.			0
(19) ERIC G. JOHNSON TRUSTEE	1.20	x						0.	0.			0 .
(20) FRED S.C. KIANG TRUSTEE	1.20	x						0.	0.			0
(21) CARLETON F. KILMER TRUSTEE	1.20	х						0.	0.			0
(22) CARMELLA KLETJIAN TRUSTEE	1.20	x						0.	0.			0
(23) DAVID F. LAMERE	1.20								0			_
TRUSTEE (24) LOUIS J. LAVIGNE, JR. TRUSTEE	1.20	X						0.	0.			0
(25) MICHAEL S. LORBER TRUSTEE (STARTING 10/13)	1.20	х						0.	0.			0
(26) DAVID LUCCHINO TRUSTEE (STARTING 10/13)	1.20	х						0.	0.			0
1b Sub-total c Total from continuation sheets to Part V	II, Section A							423,888. 5,655,492.	0. 0. 0.	742		86
d Total (add lines 1b and 1c)							no re	6,079,380. eceived more than \$100		794		75 24(
3 Did the organization list any former officer											es v	No
line 1a? If "Yes," complete Schedule J for a For any individual listed on line 1a, is the s								ner compensation from		3	X	
and related organizations greater than \$15Did any person listed on line 1a receive or									The state of the s	4	X	

Section B. Independent Contractors

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

are organization: report compensation for the caloridar year origing with or with	in the organization of tax year.	
(A) Name and business address	(B) Description of services	(C) Compensation
CONNELLY PARTNERS LLC.		
46 WALTHAM STREET, BOSTON, MA 02118	ADVERTISING	2,723,999.
SASAKI ASSOCIATES, INC		
64 PLEASANT STRRET, WATERTOWN, MA 02472	CONSULTING/DESIGN	1,173,738.
CANON BUSINESS SOLUTIONS, INC., 15004		
COLLECTIONS CENTER DRIVE, CHICAGO, IL	PRINTING	776,794.
ROYALL & COMPANY, 1920 EAST PARHAM ROAD,		
RICHMOND, VA 23228-2206	STUDENT RECRUITING	750,380.
BIGELOW & FLEMING, LLC		
14 NORFOLK AVENUE, SOUTH EASTON, MA 02375	CONSTRUCTION	665,718.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization > 92		

SEE PART VII, SECTION A CONTINUATION SHEETS

rendered to the organization? If "Yes," complete Schedule J for such person

10-29-13

Form 990 BABSON CO	OLLEGE								04-210	3544		
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)	(D)	(E)	(F)								
Name and title	Average			(C Posi		ı		Reportable	Reportable	Estimated		
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of		
	per							from	from related	other		
	week	_				loyee		the	organizations	compensation		
	(list any	or director				emp		organization	(W-2/1099-MISC)	from the		
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related		
	organizations	ndividual trustee	Institutional trustee		yee	Highest compensated employee				organizations		
	below	idual	ution	<u>ا</u>	Key employee	est co	ъ			5.ga _ a5		
	line)	Indivi	Instit	Officer	Key e	High	Former					
(27) WARREN K.K.LUKE	1.20											
TRUSTEE		х						0.	0.	0.		
(28) ANDRONICO LUKSIC	1.20											
TRUSTEE		х						0.	0.	0.		
(29) CARLOS MATTOS	1.20											
TRUSTEE		х						0.	0.	0.		
(30) DR. RICHARD K. MILLER	1.20											
TRUSTEE		х						0.	0.	0.		
(31) GORDON PRICHETT	1.20											
TRUSTEE		х						16,250.	0.	0.		
(32) RICHARD A. RENWICK	1.20											
TRUSTEE		Х						0.	0.	0.		
(33) KENNETH G. ROMANZI	1.20											
TRUSTEE		Х						0.	0.	0.		
(34) THOMAS T. STALLKAMP	1.20											
TRUSTEE	1.20	Х						0.	0.	0.		
(35) AMANDA STRONG	1.20											
TRUSTEE (STARTING 10/13)		Х						0.	0.	0.		
(36) MARTHA D. VORLICEK	1.20											
TRUSTEE		Х						0.	0.	0.		
(37) ROBERT E. WEISSMAN	1.20											
TRUSTEE		Х						0.	0.	0.		
(38) JOSEPH WINN	1.20											
TRUSTEE/CHAIR, BOARD OF TRUSTEES	1.20	Х		Х				0.	0.	0.		
(39) GARY ZWERLING	1.20							_	_	_		
TRUSTEE		Х						0.	0.	0.		
(40) DENNIS HANNO	40.00											
PROVOST				Х				374,560.	0.	56,896.		
(41) RANCH KIMBALL	40.00											
COO(STARTING 7/22/13)				Х				184,301.	0.	3,869.		
(42) KATHERINE CRAVEN	40.00											
CAO(STARTING 2/14)				Х				0.	0.	0.		
(43) MARY ROSE	40.00							040 540		46 065		
V.P. FOR CAMPUS & COMMUNITY AFFAIRS	4000			Х				212,710.	0.	46,265.		
(44) DIANA ZAIS	40.00			<u> </u>				100 111		F0 40F		
V.P. FOR DEVELOPMENT	40.00			Х				199,441.	0.	50,407.		
(45) CAROL HACKER	40.00							404.54	_	04 = 12		
V.P.OF ALUMNI&FRIENDS NETW	10.00			Х				184,949.	0.	34,510.		
(46) PHILIP SHAPIRO	40.00			<u> </u>				200 555		FF 222		
V.P. FOR FINANCE (UNTIL 2/14)				Х				309,663.	0.	57,322.		
Total to Part VII, Section A, line 1c												

Form 990 BABSON CO	OLLEGE								04-210	3544
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Pos	•	1		Reportable	Reportable	Estimated
	hours	(check all that apply)						compensation	compensation	amount of
	per							from	from related	other
	week	_				loyee		the	organizations	compensation
	(list any hours for	or director				d emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	3e or 0	stee			ısatec		(***2/1099-101130)		and related
	organizations	ndividual trustee	Institutional trustee)yee	Highest compensated employee				organizations
	below	vidual	tutior	er	Key employee	est co	ner			
	line)	lnd	Insti	Officer	Key	High	Former			
(47) DONNA BONAPARTE	40.00									
V.P. FOR HR				Х				217,352.	0.	32,640.
(48) GRANT GOSSELIN	40.00									
V.P. FOR ENROLLMENT/DEAN OF ADMISSIO				Х				173,222.	0.	46,857.
(49) JONATHAN MOLL	40.00									
V.P. AND GENERAL COUNSEL	20.00			Х				245,531.	0.	54,630.
(50) SAMUEL DUNN	40.00									
V.P. FOR FACILITIES MGT/CIO				Х				387,848.	0.	36,844.
(51) TRACEE PETRILLO	40.00								_	
CLERK (UNTIL 10/13)	20.00			Х				141,701.	0.	23,250.
(52) JANE EDMONDS	40.00								_	
VP FOR GOV/CLERK (STARTING 10/13)	20.00			Х				46,974.	0.	299.
(53) ELAINE EISENMAN	40.00									
DEAN OF BABSON EXE. EDU.					Х			349,041.	0.	43,866.
(54) JAY A RAO	40.00							405 405		45 605
FACULTY	40.00					Х		487,107.	0.	47,685.
(55) PAUL MULLIGAN	40.00					l		252 252	•	25 246
FACULTY	40.00					Х		353,979.	0.	37,046.
(56) PATRICIA GUINAN	40.00					٠,		272 601	0	20 067
FACULTY	40.00		_			Х		372,681.	0.	39,867.
(57) MICHAEL FETTERS	40.00					37		226 251	0	22 011
FACULTY	40.00					X		326,351.	0.	23,011.
(58) JEAN PIERRE JEANNET FACULTY	40.00					Х		318,627.	0.	12 5/5
(59) SHAHID ANSARI	0.00					Δ		310,027.	0.	13,545.
FORMER PROVOST	40.00						х	333,659.	0.	28,635.
(60) DR. LEONARD A. SCHLESINGER	40.00						^	333,033.	0.	20,033.
FORMER PRESIDENT	20.00						x	419,545.	0.	64,642.
TORMER TRESIDENT	20.00							410,040.	0.	04,042.
		ł								
		1								
		1								
		1								
		•	•	•	•	•	•			
Total to Part VII, Section A, line 1c								5,655,492.		742,086.
· · · · · · · · · · · · · · · · · · ·				_	_	_				

Page 9 Form 990 (2013) BABSON Part VIII Statement of Revenue BABSON COLLEGE 04-2103544

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts Tst	1 a	Federated campaigns	1a					
ig ij		Membership dues						
S, G		Fundraising events		63,300.				
를힐		Related organizations						
in,	е	Government grants (contribut	ions) 1e	681,451.				
ig ig	f	All other contributions, gifts, gran	ts, and					
혈쵩		similar amounts not included abo	ve 1f	20,065,448.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f: \$	2,078,890.				
<u>a 0</u>	h	Total. Add lines 1a-1f			20,810,199.			
				Business Code				
je	2 a			900099	148,037,608.	148,037,608.		
Program Service Revenue	~	ROOM & BOARD		900099	23,973,265.	23,973,265.		
m S	С	ED/NON-ED PROG. REV.		900099	23,831,416.	23,831,416.	202 560	
Pa Re	d	OTHER ED PROG/AUX.ACT.		721000	383,568.		383,568.	
ğ	e							
۱ ۳		All other program service reve			106 225 057			
-		Total. Add lines 2a-2f			196,225,857.			
	3	Investment income (including		·	2,224,668.		274,547.	1,950,121.
	4	other similar amounts)			2,224,000.		2/4,54/.	1,330,121.
	4 5	Income from investment of tax		1				
	3	Royalties	(i) Real	(ii) Personal				
	6 2	Gross rents	2 612 001	(II) Personal				
		Gross rents Less: rental expenses	0.					
		Rental income or (loss)	2,613,801.					
		Net rental income or (loss)		•	2,613,801.			2,613,801.
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	104,857,336.	, ,				
	b	Less: cost or other basis						
		and sales expenses	97,652,995.					
	С	Gain or (loss)	7,204,341.					
		Net gain or (loss)			7,204,341.		236,563.	6,967,778.
e	8 a	Gross income from fundraising	g events (not					
		including \$ 63	,300. of					
ě		contributions reported on line	•					
Other Reven		Part IV, line 18	а	41,650.				
₹		Less: direct expenses		14,723.				
		Net income or (loss) from fund			26,927.			26,927.
	9 a	Gross income from gaming ac		6 610				
		Part IV, line 19		6,610.				
		Less: direct expenses		14,586.	-7,976.	-7,976.		
		Net income or (loss) from gam	-	D	-7,370.	-7,370.		
	10 a	Gross sales of inventory, less						
	h	and allowances						
		Less: cost of goods sold Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a			Dasiness Code				
	b							
	C							
		All other revenue						
		Total. Add lines 11a-11d		•				
	12	Total revenue. See instructions.			229,097,817.	195,834,313.	894,678.	11,558,627.
33200 10-29	9							Form 990 (2013)

Part IX | Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
<u> </u>	Check if Schedule O contains a respo			mpiete columni (A).					
		(A)	(B) Program service	(C)	(D)				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and		САРСПЭСЭ	general expenses	САРСПЭСЭ				
•	organizations in the United States. See Part IV, line 21	331,978.	331,978.						
2	Grants and other assistance to individuals in	33273700	33173700						
2		35,698,139.	35,698,139.						
2	the United States. See Part IV, line 22	33,030,133.	33,030,133.						
3	,								
	organizations, and individuals outside the								
4	United States. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,	5,378,710.	1,003,404.	3,751,204.	624,102.				
•	trustees, and key employees	3,370,710.	1,005,404.	3,731,204.	024,102.				
6									
	persons (as defined under section 4958(f)(1)) and	915,223.	801,503.	113,720.					
_	persons described in section 4958(c)(3)(B)	75,416,856.	65,670,656.	7,701,264.	2,044,936.				
7	Other salaries and wages	, , , , , , , , , , , , , , , , , , , ,	03,070,030.	1,101,204.	4,044,930.				
8	Pension plan accruals and contributions (include	5,629,986.	4,902,417.	574,911.	152,658.				
_	section 401(k) and 403(b) employer contributions)	9,889,137.		1,010,353.	268,129.				
9	Other employee benefits	5,124,402.	4,462,170.	523,283.	138,949.				
10	Payroll taxes	J,144,4U4.	4,404,1/0.	343,403.	130,343.				
11	Fees for services (non-employees):								
	Management	445,782.		445,782.					
	Legal	318,051.		318,051.					
	Accounting	310,031.		310,031.					
	Lobbying								
	Professional fundraising services. See Part IV, line 17								
	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)	5,046,102.	4,379,292.	631,917.	34,893.				
12	Advertising and promotion	6,175,064.		1,260,639.	192,872.				
13	Office expenses	8,841,147.	8,200,935.	583,065.	57,147.				
14	Information technology	0,041,14/	0,400,933.	363,063.	37,147.				
15	Royalties	5,768,216.	5,665,728.	78,242.	24,246.				
16	Occupancy	6,504,166.	4,843,199.	1,490,052.	170,915.				
17	Travel	0,304,100.	4,043,133.	1,430,032.	170,913.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	2,090,829.	1,998,525.	76,527.	15,777.				
19	Conferences, conventions, and meetings	4,708,506.	4,708,506.	10,541.	13,111.				
20	Interest	±,/00,300.	±,/00,300•						
21	Payments to affiliates	9,993,655.	9,836,923.	114,633.	42,099.				
22	Depreciation, depletion, and amortization	9,993,000.	9,030,343.	114,000.	44,033.				
23	Insurance Other expanses, Itamize expanses not covered								
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.) FOOD & BEVERAGE SERVICE	8,013,845.	8,013,810.	35.					
a	OTHER EXPENSES	7,247,632.	2,535,435.	4,709,382.	2,815.				
b	PROFESSIONAL CONSULTING	5,396,968.	4,164,570.	826,981.	405,417.				
C	ROOM, CONF. & ADMIN.	3,034,193.	3,034,193.	020,301.	4UJ,41/•				
d		1,881,909.	830,077.	1,051,832.					
	All other expenses	213,850,496.		25,261,873.	4,174,955.				
25	·	<u>413,030,430.</u>	104,413,000.	43,401,013.	4,1/4,300.				
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2013)				
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Form 990 (2013) Part X Balance Sheet

Pa	rt X	Balance Sheet						
		Check if Schedule O contains a response or note	to an	y line in this Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			48,017,531.	1	35,254,049.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net			30,535,030.	3	29,538,449.	
	4	Accounts receivable, net			6,261,134.	4	7,208,119.	
	5	Loans and other receivables from current and for						
		trustees, key employees, and highest compensation	ted en	nployees. Complete				
		Part II of Schedule L				5		
	6	Loans and other receivables from other disqualifi	ied pe	rsons (as defined under				
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing				
		employers and sponsoring organizations of section	on 50 ⁻	1(c)(9) voluntary				
ţ		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6		
Assets	7	Notes and loans receivable, net			3,680,528.	7	4,358,677.	
⋖	8	Inventories for sale or use				8		
	9	Prepaid expenses and deferred charges			4,519,602.	9	4,998,129.	
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	348,017,563.				
	b	Less: accumulated depreciation	10b	210,789,777.	126,374,507.	10c	137,227,786.	
	11	Investments - publicly traded securities			183,655,051.	11	240,981,843.	
	12	Investments - other securities. See Part IV, line 1	91,864,917.	12	89,032,792.			
	13	Investments - program-related. See Part IV, line 1		13				
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11	2,640,339.	15	28,015,422.			
	16	Total assets. Add lines 1 through 15 (must equa			497,548,639.	16	576,615,266.	
	17	Accounts payable and accrued expenses			16,278,152.	17	20,080,864.	
	18	Grants payable			10 005 007	18	11 010 720	
	19	Deferred revenue			10,825,227.	19	11,812,730.	
	20	Tax-exempt bond liabilities			68,051,227.	20	99,405,761.	
	21	Escrow or custodial account liability. Complete P				21		
Liabilities	22	Loans and other payables to current and former						
ij		key employees, highest compensated employees	s, and	disqualified persons.				
<u>Ei</u>					39,198,663.	22	36,395,000.	
	23	Secured mortgages and notes payable to unrelat			39,190,003.	23	30,393,000.	
	24	Unsecured notes and loans payable to unrelated				24		
	25	Other liabilities (including federal income tax, pay						
		parties, and other liabilities not included on lines Schedule D		·	17,612,626.	25	17,372,826.	
	26	Total liabilities. Add lines 17 through 25			151,965,895.	26	185,067,181.	
	20	Organizations that follow SFAS 117 (ASC 958)			131/303/0331	20	103/00//1010	
w		complete lines 27 through 29, and lines 33 and		K liele P Las allu				
)Ce	27	Unrestricted net assets			144,344,420.	27	163,609,705.	
aaı	28	Temporarily restricted net assets			101,901,919.	28	116,416,261.	
Ä	29	Democratic methods of set and a			99,336,405.	29	111,522,119.	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (AS		B), check here			, : -= , == 0	
Ä		and complete lines 30 through 34.						
ts (30	Capital stock or trust principal, or current funds				30		
SSe	31	Paid-in or capital surplus, or land, building, or equ				31		
μ̈́	32	Retained earnings, endowment, accumulated inc				32		
Š	33	Total net assets or fund balances			345,582,744.	33	391,548,085.	
	34	Total liabilities and net assets/fund balances			497,548,639.	34	576,615,266.	
							Form 990 (2013)	

Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI					X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	229,						
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,	85	0,4	96.			
3	Revenue less expenses. Subtract line 2 from line 1	3	15,	24	7,3	21.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	345,	58	2,7	44.			
5	Net unrealized gains (losses) on investments	5	30,	71	9,5	57.			
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	8 Prior period adjustments								
9						-1,537.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B)) 10 391					85.			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII					X			
			_		Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		L	2b	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								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audi	it						
	Act and OMB Circular A-133?			За	X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		t [
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X				

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

OMB No. 1545-0047

			COLLEGE						U	4-2103	<u> </u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	:.) See inst	ructions.				
The organ 1	A church, co A school des A hospital or	nvention of churcher cribed in section 17 a cooperative hospi	because it is: (For lines of the state of th	ches desc hedule E.) described	ribed in se	ection 170	(b)(1)(A)(i) (A)(iii).		i). Enter	the hospita	ıl's nam	ne,
	city, and stat	e:										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that											
e 🗔	a Type I By checking foundation m If the organiz	b Ty this box, I certify tha nanagers and other t	nt the organization is not han one or more publicly ten determination from	ype III - Fu controlled y supporte the IRS tha	nctionally I directly o ed organiza at it is a Ty	integrated r indirectly ations desc pe I, Type	by one of cribed in s II, or Type	more disception 509	qualified 9(a)(1) or	•	her tha	
g		,	organization accepted ar									
J	ū		irectly controls, either al			•		• •		′,	Yes	No
	the gove	erning body of the s	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i)	or (ii) above	e?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
` '	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) listed in your organization in col lorgan			(vi) Is organizatio (i) organiz U.S	on in col. ed in the	(vii) Amoun sup	netary		
			(000 mondonono))	Yes	No	Yes	No	Yes	No			
Total												

332021 09-25-13

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

LHA For Paperwork Reduction Act Notice, see the Instructions for

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

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

Sed	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	8711950.	23762424.	22033031.	11275700.	20810199.	86593304.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	8711950.	23762424.	22033031.	11275700.	20810199.	86593304.			
5	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)						13490037.			
6	Public support. Subtract line 5 from line 4.						73103267.			
Sec	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
7	Amounts from line 4	8711950.	23762424.	22033031.	11275700.	20810199.	86593304.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	3153483.	3301836.	4798963.	6347086.	4838469.	22439837.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on		58,349.			111,208.	169,557.			
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV.)	60,538.	62,305.	50,750.	66,345.		288,198.			
11	Total support. Add lines 7 through 10						109490896			
12	Gross receipts from related activities,	etc. (see instructi	ons)			12 894	,084,027.			
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)				
	organization, check this box and stop	here					> □			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage							
	Public support percentage for 2013 (I					14	66.77 %			
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	%			
16a	33 1/3% support test - 2013. If the o	•		•		•				
	$\ensuremath{\text{stop}}$ here. The organization qualifies	as a publicly supp	orted organization	າ			▶ X			
b	33 1/3% support test - 2012. If the o	•		•		•				
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			▶□			
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,			
	and if the organization meets the "fac	ts-and-circumstan	ices" test, check t	his box and stop h	nere. Explain in Pa	rt IV how the orgar	nization			
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
b	b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publi	cly supported orga	anization	▶∐			
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	ıs ▶□			
					Cobo	dula A (Form 990	000 EZ\ 0040			

Schedule A (Form 990 or 990-EZ) 2013

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		,				
Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part IV.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
•	· ·	•	•	•		· . 🗀
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2013 (li	ne 8, column (f) d	ivided by line 13, o	column (f))		15	%
16 Public support percentage from 2012					16	%
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20					17	<u>%</u>
18 Investment income percentage from 2	2012 Schedule A,	Part III, line 17			18	<u>%</u>
19a 33 1/3% support tests - 2013. If the	-					
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2012. If the	-					
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	<u></u> ▶□

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

➤ See separate instructions. ➤ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Em	oloyer identification number
		COLLEGE			04-2103544
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527	organization.
2	Provide a description of the organize Political expenditures Volunteer hours	·		>	\$
		ganization is exempt und			
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	>	\$
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	>	\$
	If the organization incurred a section				
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				1(-)(0)
	art I-C Complete if the org	•			
	Enter the amount directly expended		•		\$
2	Enter the amount of the filing organ		•		
_	exempt function activities				\$
3	Total exempt function expenditures				•
	line 17b	4400 DOL (\$
	Did the filing organization file Form				
5	Enter the names, addresses and er made payments. For each organiza				
	contributions received that were pr				
	political action committee (PAC). If	• •		•	ato oogrogatou fama of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) LIN	filing organization's	contributions received and
				funds. If none, enter -0	
					delivered to a separate political organization.
					If none, enter -0
		1	1	1	1

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

Part II-A Complete if the organic (election under sect	anization is exe	mpt under section	on 501(c)(3) and fil	ed Form 5768	2103311 Page 2
A Check if the filing organizati expenses, and share	on belongs to an aff		n Part IV each affiliated	group member's nar	me, address, EIN,
Limits	on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.					
If the amount on line 1e, column (a) or		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000 but not over \$17,000,000 \$1,000,000.					
CVC1 \$17,000,000	γ 1,000,	,000.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero	or less, enter -0				
j If there is an amount other than zero	o on either line 1h or	line 1i, did the organiz	zation file Form 4720		
reporting section 4911 tax for this y	ear?				Yes No
•	tions that made a	• •	· Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(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) 2013

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 ϵ	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(b)
of th	e lobbying activity.	Yes	No	Amo	unt
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:				
	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?	X			1.
i	Total. Add lines 1c through 1i				1.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	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).				
				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 Par	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section			ection	
ı uı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3, is
	answered "Yes."		<u> </u>		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	cai			
•	expenses for which the section 527(f) tax was paid).		2a		
	Current year Carryover from last year				
C	-				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Pai	t IV Supplemental Information				
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part I	I-A, line 2; a	nd Part II-B	, line 1.
	complete this part for any additional information.				
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
EX	PLANATION: THE ORGANIZATION PAYS MEMBERSHIP DUES TO	MEMBE	ER		
OR	GANIZATIONS WHICH MAY ENGAGE IN LOBBYING ACTIVITIES	. THEF	REFORE	, A	
POI	RTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING A	.CTIVII	TIES.		

Schedule C (Form 990 or 990-EZ) 2013

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Attach to Form 990. ► Info<u>rmation about Schedule D (Form 990) and its instructions is at www.irs.gov/form990</u> 2013
Open to Public Inspection

BABSON COLLEGE Employer identification number 04-2103544

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		·
		(a) Donor advised funds	(b) 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 advi	sed funds
•	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
Pai	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizat	•	,
	Preservation of land for public use (e.g., recreation or e	· — · · · · · · · · · · · · · · · · · ·	storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b			a.
С	All I de la		
d			
	listed in the National Register		
3	Number of conservation easements modified, transferred, re		
	year >	,	
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements i	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	D(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1		
а	, , , , , , , , , , , , , , , , , , , ,		
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2013

	rt III Organizations Maintaining C	ollections of Ar	t, Historical T	reasures, o	or Oth	er Simil	ar Asse	ts(continu	ued)	<u>.go —</u>
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	e following tha	t are a s	significant	use of its	collection	item	s
	(check all that apply):		•	· ·						
а	X Public exhibition	d	X Loan or ex	change progra	ams					
b	Scholarly research	е								
С	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further	the organizati	on's exe	empt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes	X	No
Pa	rt IV Escrow and Custodial Arran							line 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	ns or other as	sets no	t included				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII									
								Amount		
С	Beginning balance					1c				
	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				L	Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Pa	rt V Endowment Funds. Complete it	f the organization ans	swered "Yes" to F	orm 990, Part	IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two year		(d) Three	ears back	 		
1a	Beginning of year balance	275,519,968.	239,482,137				05,749.	171,	024,	282.
b	Contributions	26,558,248.	11,995,372		1,653.		92,624.	13,	840,	252.
С	Net investment earnings, gains, and losses	39,608,164.	33,419,630	-2,360	6,163.	37,3	390,554.	20,	723,	572.
d	Grants or scholarships	-2,223,083.	-2,173,736	-2,152	2,163.	-1,9	53,530.	-1,	907,	729.
е	Other expenditures for facilities									
	and programs	-7,448,662.	-7,213,435	7,543	3,862.	-7,3	82,725.	-6,	674,	628.
f	Administrative expenses									
g	End of year balance	332,014,635.	275,519,968	. 239,492	2,137.	243,2	252,672.	197,	005,	749.
2	Provide the estimated percentage of the curr		e (line 1g, column	(a)) held as:						
а	J ,	44.00	_%							
b	Permanent endowment ► 30.00	%								
С	Temporarily restricted endowment ▶2	<u>6.00</u> %								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administe	red for	the organi	zation	_		
	by:								Yes	No
	(i) unrelated organizations							3a(i)		<u>X</u>
	(ii) related organizations							3a(ii)		_X_
b		s listed as required or	n Schedule R?					. 3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Pa	rt VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" to Form 990,	Part IV, line 11a.	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or ot	' '	t or other		ccumulate	I .	(d) Book	value	Э
		basis (investm	,	(other)	de	preciation		400		
	Land			39,673.	1 - ^	246 2	46 4 2	489		
b	Buildings		260,1	59,308.	159,	346,3	46.10	0,812	4,9	62.
С			120 6	70 543	22	200 2		F 460		1 ^
d	1 1			78,543.						
	Other			90,039.	тβ,	<i>4</i> 34,6				
Tota	Add lines 1a through 1e (Column (d) must e	gual Form 990 Part 1	x column (R) line	1()(c))			▶ 11.3	7.227	. /	0 D .

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.	-			
Complete if the organization answered "Yes"	to Form 990, Part IV,			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation: Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other (A) ALTERNATIVE INVESTMENTS	00 022 70) END OF VI	EAR MARKET	773 T TTD
· · · ·	89,032,79	72. END-OF-II	SAK MAKKET	VALUE
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	89,032,79	92.		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11c. See Form 990, P	art X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of va	luation: Cost or en	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets.	<u> </u>			
Complete if the organization answered "Yes"	to Form 990. Part IV.	line 11d. See Form 990. P	art X. line 15.	
	Description	,.		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	45)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)		>	
	to Form 000 Port IV	line 11e or 11f Coe Form	000 Port V line 25	
Complete if the organization answered "Yes" (a) Description of liability	10 FOITH 990, Part IV,	(b) Book value	990, Part A, III le 25	<u>. </u>
(1) Federal income taxes		(b) Book value		
(2) GOVERNMENT ADVANCES FOR S	TUDENT			
(3) LOAN		3,154,360.		
(4) MARKET VALUE OF INTEREST	RATE SWAP			
(5) CONTRACTS		14,218,466.		
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.) ►	17,372,826.		
2. Liability for uncertain tax positions. In Part XIII, provide				. —
organization's liability for uncertain tax positions unde	r FIN 48 (ASC 740). C	heck here if the text of the	footnote has been	provided in Part XIII
			Sch	edule D (Form 990) 2013

332053 09-25-1

Part XI Reconciliation of Revenue per Audited Financial State	ements With Revenue per F	Retur	<u> </u>				
Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.						
1 Total revenue, gains, and other support per audited financial statements		1	231,409,539				
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
a Net unrealized gains on investments	2a 30,316,164.						
b Donated services and use of facilities	2b	4					
c Recoveries of prior year grants	2c	4					
d Other (Describe in Part XIII.)	2d - 28,004,442.	_	0 044 500				
e Add lines 2a through 2d		2e	2,311,722				
3 Subtract line 2e from line 1		3	229,097,817				
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1						
a Investment expenses not included on Form 990, Part VIII, line 7b	1 1	-					
b Other (Describe in Part XIII.)		┨.	_				
c Add lines 4a and 4b		4c	229,097,817				
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Sta							
Complete if the organization answered "Yes" to Form 990, Part IV, line		neu	arri.				
		1	184,028,521				
1 Total expenses and losses per audited financial statements2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		-	104,020,321				
	2a						
a Donated services and use of facilities b Prior year adjustments		1					
c Other losses		1					
d Other (Describe in Part XIII.)		-					
e Add lines 2a through 2d		2e	0.				
3 Subtract line 2e from line 1			184,028,521				
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			, , , , ,				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b Other (Describe in Part XIII.)	20 021 075	1					
c Add lines 4a and 4b		4c	29,821,975				
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.		5	213,850,496				
Part XIII Supplemental Information.							
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	; Part IV, lines 1b and 2b; Part V, line	4; Par	t X, line 2; Part XI,				
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	y additional information.						
PART III, LINE 1A:							
EXPLANATION: WORKS OF ART, HISTORICAL TREA	ASURES, LITERARY WO	RKS	AND				
10m111.cmg							
ARTIFACTS, WHICH ARE PESERVED AND PROTECTE	ED FOR EDUCATIONAL,	RE	SEARCH AND				
DUDI TO BUILDIETON DUDDOGEG ARE NOW CARTER			ED DIGDOGED				
PUBLIC EXHIBITION PURPOSES, ARE NOT CAPITA	ALIZED. THEY ARE NE	HTT	ER DISPOSED				
OF FOR EINANGIAL GAIN NOR ENGINDERED IN AN	IV MANNIED ACCORDIN	10T W	. anan				
OF FOR FINANCIAL GAIN NOR ENCUMBERED IN AN	NY MANNER. ACCORDIN	IGLY	, SUCH				
COLLECTION THEMS ARE NOT RECORDED FOR EINA	NICIAI CHAMENEN DI	מת חז	O TO C				
COLLECTION ITEMS ARE NOT RECORDED FOR FINA	ANCIAL STATEMENT PO	IRPO	DED.				
PART V, LINE 4:							
FART V, DINE 4.							
EXPLANATION: BABSON COLLEGE'S ENDOWMENT CO	NSISTS OF OVER 250	TN	DTVTDIIAT.				
TALEMANTION: DADDON COLLEGE & ENDOWMENT CO	SUBIDID OF OVER 250	111	DIVIDORE				
FUNDS WHICH HAVE BEEN ESTABLISHED OVER TIME FOR VARIOUS PURPOSES,							
TOWNS WITCH HAVE DEEM ENTADDINED OVER TIME FOR VARIOUS FORFORES,							
INCLUDING SCHOLARSHIPS, CHAIRS AND PROFESSORSHIPS, FACILITIES, ATHLETICS							
,	- ,						
AND OTHER EDUCATIONAL SERVICES.							

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

BABSON COLLEGE

Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Employer identification number

04 - 2103544

Pa	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	١.	X	
2	other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,	1		
2	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	x	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
Ū	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.			
	If you need more space, use Part II	3	Х	
	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?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
	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		7.	
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d		
5	Does the organization discriminate by race in any way with respect to:			77
	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
	Educational policies? Use of facilities?	5e 5f		X
	Use of facilities? Athletic programs?	5g		X
	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	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		37	
	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No " explain on Part II	17	ιX	I

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

Schedule E (Form 990 or 990-EZ) (2013)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

Department of the Treasury ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service

OMB No. 1545-0047 Open to Public Inspection

Name of the	organization
-------------	--------------

Employer identification number

BABSON COLLEGE				04-210354	
Part I General Infor	rmation on A	ctivities Ou	tside the United States. Compl	ete if the organization answered "	Yes" on
Form 990, Part 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 the	e grants or assistance?	Yes No
2 Fau grantmakara Dooo	riba in Dort V the	organization's	nyanaduwaa far manitarina tha usa af it	re greats and other assistance and	taida tha
2 For grantmakers. Desc United States.	ribe in Part v the	e organization s	procedures for monitoring the use of it	s grants and other assistance out	iside the
	he following Parl	t Lline 3 table c	an be duplicated if additional space is	needed)	
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
., •	offices	employees, agents, and independent	(by type) (e.g., fundraising, program	is a program service,	expenditures for and
	in the region	independent contractors	services, investments, grants to	describe specific type	investments
		in region	recipients located in the region)	of service(s) in region	in region
T1 0T 1 0T1 11T					
EAST ASIA AND THE PACIFIC	0	12	DDOCDAM CEDVICEC	EVECUMIVE EDUCATION	200 264
PACIFIC	0	12	PROGRAM SERVICES	EXECUTIVE EDUCATION	399,364.
EUROPE	0	36	PROGRAM SERVICES	EXECUTIVE EDUCATION	771,499.
MIDDLE EAST AND		_	DDOGDAM GEDUTGEG	DVEGUETUE EDUCATION	115 200
NORTH AFRICA	0	5	PROGRAM SERVICES	EXECUTIVE EDUCATION	115,200.
SOUTH AMERICA	0	2	PROGRAM SERVICES	EXECUTIVE EDUCATION	92,087.
					22.004
NORTH AMERICA	0	1	PROGRAM SERVICES	EXECUTIVE EDUCATION	33,901.
EUROPE	0	0	DEVELOPMENT/FUNDRAISING		7,446.
EAST ASIA AND THE			ALUMNI		
PACIFIC	0	0	RELATIONS/FUNDRAISING		628.
			ALUMNI		
EUROPE	0	0	RELATIONS/FUNDRAISING		299.
3 a Sub-total	0				1,420,424.
b Total from continuation					
sheets to Part I	0	0			38,419,645.
c Totals (add lines 3a					
and 3b)	0	56			39,840,069.

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

Schedule F (Form 990) 2013

(b) Number of		1. (Schedule F (Form 990), Part I, line 3) 	
		(d) Activities conducted in region	(a) If activity listed in (d)	(f) Total
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
		roopione located in the region,	01 001 V100(0) 11 Y 0 g1011	
		ALUMNI		
0	0	RELATIONS/FUNDRAISING		1,050
		ALUMNI		
0	0	RELATIONS/FUNDRAISING		5,496
		AI,UMNI		
0	0			616
			STUDENT STUDY ABROAD	
0	0	PROGRAM SERVICES	PROGRAM	712,051
			STUDENT STUDY ARROAD	
0	0	PROGRAM SERVICES	PROGRAMS	1,803,386
			CHAIDENIA CHAIDA Y DDOYD	
0	0	PROGRAM SERVICES	PROGRAMS	74,351
		PROGRAM SERVICES		
0	0		STUDENT STUDY ABROAD PROGRAMS	84,936
0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	162,736
0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAM	55,652
		INVESTMENT		35,519,371
				38,419,645
	0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	region recipients located in the region) ALUMNI 0 0 RELATIONS/FUNDRAISING ALUMNI 0 0 RELATIONS/FUNDRAISING ALUMNI 0 0 PROGRAM SERVICES 0 0 PROGRAM SERVICES 0 PROGRAM SERVICES 0 0 PROGRAM SERVICES 0 0 PROGRAM SERVICES	region recipients located in the region) of service(s) in region ALUMNI 0 0 RELATIONS/FUNDRAISING ALUMNI 0 0 RELATIONS/FUNDRAISING ALUMNI 0 0 RELATIONS/FUNDRAISING STUDENT STUDY ABROAD PROGRAM SERVICES PROGRAM O PROGRAM SERVICES PROGRAMS TUDENT STUDY ABROAD PROGRAMS STUDENT STUDY ABROAD PROGRAMS

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(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)	
			recognized as charities by the				<u> </u>	<u> </u>	
the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities									

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.										
(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
	dditional space is neede	dditional space is needed.	dditional space is needed.	dditional space is needed.	dditional space is needed. (c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of non-cash	dditional space is needed. (c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of non-cash non-cash assistance				

Part IV **Foreign Forms** 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign X Yes No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization 2 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) 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) X Yes No 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) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain X Yes L Foreign Partnerships. (see Instructions for Form 8865)

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

for Form 5713)

Schedule F (Form 990) 2013

X Yes

SCHEDULE G

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form 990

BABSON	COLLEGE					04-2103	544
Part I Fundraising Activities. required to complete this part	• Complete if the organization answe	ered "Y	es" to	Form 990, Part IV, I	ine 17	7. Form 990-EZ	filers are not
 1 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 of key employees listed in Form 990, Poly If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	sed funds through any of the following set of the following set of the solicitate of	tion of tion of fundra (includerofess	non-g gover ising ding o ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ced in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
⁻ otal			•				
3 List all states in which the organizatio or licensing.		contrib	utions	s or has been notified	d it is	exempt from re	egistration

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

Schedule G (Form 990 or 990-EZ) 2013

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 gr	oss income on Form 990	I-EZ, lines 1 and 6b. List	events with gross receip	its greater than \$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events			
			PRESIDENT'S		NONE	(add col. (a) through			
			CUP			col. (c))			
ē			(event type)	(event type)	(total number)				
Revenue			104 050			104 050			
Вè	1	Gross receipts	104,950.			104,950.			
		Lance Contributions	63,300.			63,300.			
	2	Less: Contributions	03,300.			03,300.			
	3	Gross income (line 1 minus line 2)	41,650.			41,650.			
	Ť		,			,			
	4	Cash prizes	0.						
m	5	Noncash prizes	249.			249.			
nse	_	Dook/ford!!he and	0.						
Direct Expenses	6	Rent/facility costs	0.						
E E	7	Food and beverages	380.			380.			
Öire	′	. Jou and Dovorages							
	8	Entertainment							
	9	Other direct expenses				14,094.			
	10	Direct expense summary. Add lines 4 through	h 9 in column (d)		>	14,723.			
_	11		ine 3, column (d)			26,927.			
Pa	ırt		answered "Yes" to Form	990, Part IV, line 19, or	reported more than				
	_	\$15,000 on Form 990-EZ, line 6a.		(I-) Dull tobe (instant		(-1) T-1-1			
ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)			
Revenue									
æ	1	Gross revenue			6,610.	6,610.			
					•	,			
S	2	Cash prizes			2,200.	2,200.			
Direct Expenses									
χĎ	3	Noncash prizes			11,989.	11,989.			
šć E	١.	D 16 39			0.				
Ë	4	Rent/facility costs			0.				
	5	Other direct expenses			397.	397.			
	۲	Other direct expenses	Yes %	Yes %	Yes %	33,7			
	6	Volunteer labor	No No	No No	X No				
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		>	14,586.			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	<7,976.			
_	Г.	ter the state(s) in which the organization opera	stan gaming activition. M	'Δ					
		the organization licensed to operate gaming ac	_			X Yes No			
		No," explain:	Stivition in edon of those t			100 - 110			
	_								
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes X No									
b	lf "	Yes," explain:							
	_								
	_								
3320	22 N	9-12-13			Schedule G (For	m 990 or 990-EZ) 2013			

Schedule G (Form 990 or 990-EZ) 2013 BABSON COLLEGE	04-210		
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			
to administer charitable gaming?		Yes	X No
13 Indicate the percentage of gaming activity operated in:		1	
a The organization's facility	13a	50	.00 %
b An outside facility		50	.00 %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record		_	
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 amou	ınt		
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address of the third party:			
Name			
Address			
16 Gaming manager information:			
Name None			
Gaming manager compensation \$			
Department of convices provided			
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 spent in	n the		
organization's own exempt activities during the tax year > \$	1 1110		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part IV	art III. lines 9), 9b, 10)b. 15b.
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instruction		, ,	, ,

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) (2013)

BABSON CO	DLLEGE						04-2103544
Part I General Information on Grants a	and Assistance						
Does the organization maintain records criteria used to award the grants or assi							
2 Describe in Part IV the organization's pr	ocedures for monit	oring the use of gran	t funds in the Unite	d States.			
Part II Grants and Other Assistance to					anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II can	be duplicated if addi	tional space is need	ded.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BABSON GLOBAL, INC.							
231 FOREST STREET							TO SUPPORT THE COLLEGE'S
BABSON PARK, MA 02457	27-1642647		331,978.	0.			MISSION INTERNATIONALLY.
2 Enter total number of section 501(c)(3) a	and government or	ganizations listed in t	he line 1 table			1	•
3 Enter total number of other organization							

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

Schedule I (Form 990) (2013) BABSON COLLEGE 04-2103544 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	1285	35,698,139.	0.		
INDITIONAL GRANTS, BONOLINGHI	1203	33,030,133.			
Part IV Supplemental Information. Provide the information red	uired in Part I, lir	ne 2, Part III, column	ı (b), and any other a	dditional information.	
PART I, LINE 2:					
EXPLANATION: THE PROCEDURES FOR NE	EED-BASED	AWARDS IN	ICLUDE REVI	EW AND	
RESOLUTION OF ALL FEDERAL-PROCESSO	R-IDENTI	FIED ELIGI	BILITY CON	FLICTS, AND	
100% VERFICATION OF REPORTED PAREN	IT AND ST	UDENT INCC	MES. FOR A	LL FUNDS	
THERE IS A SEPARATION OF THE AWARI	ING AND	DISBURSEME	NT FUNCTIO	NS (DIFFERENT	
INDIVIDUALS RESPONSIBLE FOR EACH),	MONTHLY	RECONCILI	ATIONS BET	WEEN STUDENT	
ACCOUNTS AND THE COLLEGE'S GENERAL	LEDGER,	AND AN AN	NUAL AUDIT	IN	
ACCORDANCE WITH OMB CIRCULAR A-133	3.				

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Part I Questions Regarding Compensation

Employer identification number BABSON COLLEGE 04-2103544

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account X Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		_X_
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			37
	Receive a severance payment or change-of-control payment?	4a	Х	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Λ	X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a	X	
	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		_ <u>X</u> _
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		37	
_	not described in lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		37	
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		v	
	Regulations section 53.4958-6(c)?	9	X	

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

Schedule J (Form 990) 2013

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. KERRY HEALEY	(i)	404,545.	0.	8,564.	24,000.	28,889.	465,998.	0.
TRUSTEE/PRESIDENT (STARTING 7/1/13)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DENNIS HANNO	(i)	311,710.	14,429.	48,421.	28,326.	28,570.	431,456.	0.
PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RANCH KIMBALL	(i)	145,644.	20,000.	18,657.	3,650.	219.	188,170.	0.
COO(STARTING 7/22/13)	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARY ROSE	(i)	194,320.	0.	18,390.	24,343.	21,922.	258,975.	0.
V.P. FOR CAMPUS & COMMUNITY AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DIANA ZAIS	(i)	198,618.	0.	823.	22,817.	27,590.	249,848.	0.
V.P. FOR DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CAROL HACKER	(i)	184,231.	0.	718.	20,308.	14,202.	219,459.	0.
V.P.OF ALUMNI&FRIENDS NETW	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PHILIP SHAPIRO	(i)	290,045.	0.	19,618.	28,326.	28,996.	366,985.	0.
V.P. FOR FINANCE (UNTIL 2/14)	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DONNA BONAPARTE	(i)	216,475.	0.	877.	24,071.	8,569.	249,992.	0.
V.P. FOR HR	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) GRANT GOSSELIN	(i)	173,078.	0.	144.	19,704.	27,153.	220,079.	0.
V.P. FOR ENROLLMENT/DEAN OF ADMISSIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JONATHAN MOLL	(i)	244,478.	0.	1,053.	28,176.	26,454.	300,161.	0.
V.P. AND GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SAMUEL DUNN	(i)	345,448.	24,856.	17,544.	28,326.	8,518.	424,692.	0.
V.P. FOR FACILITIES MGT/CIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) TRACEE PETRILLO	(i)	141,588.	0.	113.	15,010.	8,240.	164,951.	0.
CLERK (UNTIL 10/13)	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ELAINE EISENMAN	(i)	345,685.	0.	3,356.	28,326.	15,540.	392,907.	0.
DEAN OF BABSON EXE. EDU.	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JAY A RAO	(i)	484,906.	2,000.	201.	17,064.	30,621.	534,792.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) PAUL MULLIGAN	(i)	353,118.	0.	861.	15,660.	21,386.	391,025.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) PATRICIA GUINAN	(i)	372,148.	0.	533.	16,058.	23,809.	412,548.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.

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	(i) Base (ii) Bonus & (iii) Other compensation		(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred
(A) Name and Title		(i) Base compensation			compensation	Deficition	(B)(I)-(U)	in prior Form 990
(17) MICHAEL FETTERS	(i)	324,074.	0.	2,277.	22,261.	750.	349,362.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) JEAN PIERRE JEANNET	(i)	318,343.	0.	284.	7,326.	6,219.	332,172.	0.
FACULTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) SHAHID ANSARI	(i)	312,500.	0.	21,159.	28,326.	309.	362,294.	0.
FORMER PROVOST	(ii)	0.	0.	0.	0.	0.		0.
(20) DR. LEONARD A. SCHLESINGER	(i)	239,481.	0.	180,064.	27,726.	36,916.	484,187.	0.
FORMER PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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:

EXPLANATION: FIRST-CLASS TRAVEL:

COLLEGE POLICIES ALLOW BOTH THE FORMER PRESIDENT (WHILE PRESIDENT) AND THE

CURRENT PRESIDENT TO TRAVEL FIRST-CLASS UNDER CERTAIN CIRCUMSTANCES FOR

BUSINESS PURPOSES.

TRAVEL FOR COMPANIONS:

ON OCCASION, WHILE HE HELD THE POSITION OF PRESIDENT, THE FORMER

BABSON COLLEGE

PRESIDENT'S SPOUSE TRAVELED WITH THE FORMER PRESIDENT TO CERTAIN BABSON

COLLEGE FUNDRAISING AND NETWORKING EVENTS TO ASSIST IN THESE ACTIVITIES

WHICH FURTHER THE MISSION OF THE COLLEGE.

HOUSING ALLOWANCE:

THE CURRENT PRESIDENT AND THE FORMER PRESIDENT (WHILE PRESIDENT) ARE

REQUIRED TO LIVE IN CAMPUS HOUSING AS A CONDITION OF EMPLOYMENT FOR THE

CONVENIENCE OF 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 TO BOTH THE FORMER AND THE CURRENT PRESIDENTS. THE

CURRENT PROVOST RECEIVES HOUSING AS A TAXABLE BENEFIT. THE FAIR MARKET

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.

VALUE OF HOUSING PROVIDED IS INCLUDED ON SCHEDULE J, PART II, COLUMN

(B)(III).

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:

IN CONNECTION WITH CERTAIN TAXABLE REIMBURSEMENTS, THE FORMER PRESIDENT

(WHILE PRESIDENT) RECEIVED CERTAIN 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:

BOTH THE FORMER AND THE CURRENT PRESIDENTS RECEIVE AN ANNUAL MEMBERSHIP TO

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

AS PRESIDENT FOR THE PERIOD 1/1/13-6/30/13, THE FORMER PRESIDENT WAS

PROVIDED USE OF A CLUB MEMBERSHIP FOR BUSINESS PURPOSES. THE CURRENT

PRESIDENT RECEIVED A CLUB MEMBERSHIP FOR BUSINESS PURPOSES BEGINNING

7/1/13.

PART I, LINE 1B:

EXPLANATION: ALL THE ITEMS CHECKED ABOVE ARE INCLUDED AS PART OF THE

Schedule J (Form 990) 2013

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.

INDIVIDUAL'S EMPLOYMENT CONTRACT AND APPROVED BY THE EXECUTIVE COMMITTEE OF

THE BOARD OF TRUSTEES.

PART I, LINE 4B:

EXPLANATION: EFFECTIVE JULY 1, 2012 THE COLLEGE ENTERED INTO A

NON-QUALIFIED SECTION 457(F) ARRANGEMENT WITH ITS FORMER PRESIDENT. UNDER

THE TERMS OF THE PLAN, THE FORMER PRESIDENT RECEIVED A CREDIT TO HIS

ACCOUNT OF NO LESS THAN \$50,000 FOR EACH PLAN YEAR HE HOLDS THE TITLE OF

THE FORMER PRESIDENT OF THE 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). THE FINAL CREDIT MADE UNDER THE PLAN WAS MADE ON JUNE 30,

2013.

EFFECTIVE JULY 1, 2013 THE COLLEGE ENTERED INTO A NON-OUALIFIED SECTION

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

THE CURRENT PRESIDENT WILL RECEIVE A CREDIT TO HER ACCOUNT OF NO LESS THAN

\$52,500 FOR EACH PLAN YEAR SHE HOLDS THE TITLE OF THE PRESIDENT OF THE

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. NO AMOUNTS WERE AWARDED UNDER THE

PLAN IN CALENDAR YEAR 2013.

PART I, LINE 5:

EXPLANATION: ONE KEY EMPLOYEE HAS A INCENTIVE PLAN BASED ON THE

PERFORMANCE OF CERTAIN PROGRAMS AT THE COLLEGE.

PART I, LINE 7:

EXPLANATION: 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.

PART I, LINE 8:

EXPLANATION: DR. KERRY HEALEY IS UNDER HER INITIAL CONTRACT WITH BABSON

COLLEGE.

ENTITY 1

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information on Tax-Exempt Bonds**

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

► Attach to Form 990. ► See separate instructions. ► Information about Schedule K (Form 990) and its instructions is at www. irs gov/form990.

OMB No. 1545-0047

2013
Open to Public Inspection

Employer identification number Name of the organization 04-2103544 BABSON 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 (a) Issuer name (e) Issue price (f) Description of purpose of issuer financing Yes No Yes No Yes No MA DEVELOPMENT FINANCE NEW BUILDING, 04-343181457583RCV5 Х A AGENCY (2005A) 08/31/05 22996717.MISC. PROJECT, RE Х Х MA DEVELOPMENT FINANCE REFINANCE DEBT BAGENCY (2007A) 04-343181457583RSC0 10/04/07 21336830. (1997A) FOR THE C Х Х X MA DEVELOPMENT FINANCE REFINANCE DEBT c AGENCY (2008A) 104-3431814157583RUW31 04/17/08 36475000 (2002A) FOR THE N Х Х X MA DEVELOPMENT FINANCE REFINANCE DEBT 04-343181457583UGH5 07/07/11 14518050 (1998A) BLANK CEN Х Х DAGENCY (2011A) X Part II Proceeds В 7,779,343 4,125,000 2,835,000. 4,403,156. 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 Gross proceeds in reserve funds Capitalized interest from proceeds 6 Proceeds in refunding escrows 333,890. 315,976. 250,504. 243,275. Issuance costs from proceeds 242,000. 29,208. 337,000. Credit enhancement from proceeds Working capital expenditures from proceeds 15,230,149 Capital expenditures from proceeds 14,274,775. 7,095,678. 20,778,854. 36,195,288. Other spent proceeds 11 Other unspent proceeds 2008 2006 2007 2011 Year of substantial completion Yes No Yes No Yes No Yes No X X 14 Were the bonds issued as part of a current refunding issue? X Were the bonds issued as part of an advance refunding issue? X X X X Has the final allocation of proceeds been made? X $\overline{\mathbf{x}}$ X $\overline{\mathbf{x}}$ Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III Private Business Use В C D Α 1 Was the organization a partner in a partnership, or a member of an LLC. Yes No Yes No Yes No Yes No X X X X which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of Х Х Х Х bond-financed property?

ENTITY 2

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information on Tax-Exempt Bonds**

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

► Attach to Form 990. ► See separate instructions. ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013
Open to Public Inspection

Employer identification number Name of the organization 04-2103544 BABSON 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 No Yes No Yes No NEW BUILDING, MA DEVELOPMENT FINANCE 04 - 343181435000000.MISC. PROJECT. A AGENCY (2013) Х NONE 07/17/13 Х Х D Part II Proceeds В С D 599,030. 1 Amount of bonds retired 2 Amount of bonds legally defeased 35,000,000. 3 Total proceeds of issue **4** Gross proceeds in reserve funds **5** Capitalized interest from proceeds 6 Proceeds in refunding escrows 118,081. Issuance costs from proceeds Credit enhancement from proceeds Working capital expenditures from proceeds 7,950,536. Capital expenditures from proceeds Other spent proceeds 11 26,931,383. Other unspent proceeds Year of substantial completion Yes No Yes No Yes No Yes No X 14 Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding issue? X Has the final allocation of proceeds been made? X Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III Private Business Use В C D Α 1 Was the organization a partner in a partnership, or a member of an LLC, Yes No Yes No Yes No Yes No X which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of Х bond-financed property?

BABSON COLLEGE

Part III Private Business Use (Continued)								
		A		В	(Ç		D
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
business use of bond-financed property?		X		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		Х		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		l x		l x		x
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed				1				
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections		7,0		1		70		7,0
1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified		1						
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1.141-12 and 1.145-2?	X		X		X		Х	
		l		l				<u>.l</u>
Part IV Arbitrage	1	Α		 В		c		
1 Lieu the issuer filed Form 2000 T. Arbitrage Debate, Vield Deduction and	Yes	No	Yes	No	Yes	No	Yes	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	res	X	res	X	res	X	res	No X
Penalty in Lieu of Arbitrage Rebate?				<u> </u>		_ A		<u>^</u>
2 If "No" to line 1, did the following apply?		Х		Х		Х	X	Τ
a Rebate not due yet?		X	Х		Х	Α	X	+
b Exception to rebate?	Х	_ ^	X		X		X	+
c No rebate due?	_ ^		Λ		Λ		^	<u> </u>
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								
computation was performed		Х		Х	77			77
3 Is the bond issue a variable rate issue?				_ ^	Х			X
4a Has the organization or the governmental issuer entered into a qualified		3,7						17
hedge with respect to the bond issue?		X		X	X			X
b Name of provider					GOLDMAN S			
c Term of hedge				_	25.	0000000		_
d Was the hedge superintegrated?						X		
e Was the hedge terminated?						X		

BABSON COLLEGE

Page 2

Par	t III Private Business Use (Continued)								
			A	ı	В	(С	ľ	D
За	Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
	business use of bond-financed property?		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?								
С	Are there any research agreements that may result in private business use of bond-financed property?		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		%		%		%		%
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		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?	X						_	
Par	t IV Arbitrage								
			A	ı	В	(С	ľ	D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?	X							
b	Exception to rebate?		X						
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								
	computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified								
	hedge with respect to the bond issue?		X						
b	Name of provider								
	Term of hedge								
d	Was the hedge superintegrated?								
	Was the hedge terminated?								

BABSON COLLEGE

Part IV Arbitrage (Continued)								
		<u> </u>		3		<u> </u>	<u> </u>)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	Х		X		x		Х	
Part V Procedures To Undertake Corrective Action		l	1	l	<u> </u>			1
THE THOUSAND TO SHAD LIKE SOME SHOULD IN		Δ		3				
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of			1.00	110	1		1.55	
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		Х	
Part VI Supplemental Information. Provide additional information for responses to questions		e K (see instr						
Ture 11 Cupplemental information 1 Totals additional information for responded to questions	on concadi	011 (000 111011	dottorioj.					

ENTITY 2

04-2103544

Part IV Arbitrage (Continued)			_					
	,	<u> </u>	E	3		2		D
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?	Х							
Part V Procedures To Undertake Corrective Action		•	•	•				•
	-	A		3				D
	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							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedul	e K (see instr	ructions).					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (•							
(F) DESCRIPTION OF PURPOSE: NEW BUILDING, MISC. P	ROJECT	, REFIN	IANCE DI	EBT.				
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (2007A)							
(F) DESCRIPTION OF PURPOSE:								
REFINANCE DEBT (1997A) FOR THE CONSTRUCTION OF S	ORENSO	V & THE	CHAPE	<u>. </u>				
	0000-							
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (2008A)							
(F) DESCRIPTION OF PURPOSE:								
REFINANCE DEBT (2002A) FOR THE NEW ASTROTURF ATH	LETIC I	TELD A	ND ETC	•				
/a) regume was an entire observe entire a control of	00113\							
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (TTZ - C T 3 T T	T.D.					
(F) DESCRIPTION OF PURPOSE: REFINANCE DEBT (1998	A) BLAI	NK CENT	ER.					
/a region wave, wa power opwore environ action /	20121							
(A) ISSUER NAME: MA DEVELOPMENT FINANCE AGENCY (
(F) DESCRIPTION OF PURPOSE: NEW BUILDING, MISC. P	ROJECT	•						
COMPONE A DADM IN LINE OF MILE DEDAME CONDIMAN	TOM DAG	nna.						
SCHEDULE K, PART IV, LINE 2C, THE REBATE COMPUTAT		res:						
MA DEVELOPMENT FINANCE AGENCY (2005A): AUGUST, 2								
MA DEVELOPMENT FINANCE AGENCY (2007A): OCTOBER, MA DEVELOPMENT FINANCE AGENCY (2008A): APRIL, 20								
MA DEVELOPMENT FINANCE AGENCY (2008A): APRIL, 20 MA DEVELOPMENT FINANCE AGENCY (2011A): JULY, 201								
MA DEVELOPMENT FINANCE AGENCY (2011A): JULY, 201	J							

SCHEDULE L

Transactions With Interested Persons

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

(Form 990 or 990-EZ)

Employer identification number

								04-2103544				
Part I Excess Benefit Tran												
Complete if the organization					o, or	Form 990-EZ, P	art V,	line 40)b.	1		
(a) Name of disqualified person	(b) Relationship bet person and o			lified (c) De	escription of tran	sactio	n				cted?
	porson and o	n gai iizi								+ Y	es	No
2 Enter the amount of tax incurred b	,	•			•	-						
section 4958 3 Enter the amount of tax, if any, on	ling 2 above reimbur							▶ \$ ▶ \$				
3 Enter the amount of tax, if any, on	iiile 2, above, reimbur	seu by	li le Oi	gariizatiori				Φ				
Part II Loans to and/or Fro	m Interested Per	rsons	5.									
Complete if the organization	n answered "Yes" on	Form 9	990-EZ	, Part V, line 38a or I	Forn	n 990, Part IV, lir	ne 26;	or if th	ne orga	nizati	on	
reported an amount on Fo									W \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
(a) Name of (b) Relation interested person with organ			an to or	(e) Original								ritten ment?
interested person with organ	lization of loan	<u> </u>	zation?	principal amount					cómm			
		То	From				Yes	No	Yes	No	Yes	No
												
												<u> </u>
												<u> </u>
												
												
Total	l		l	> \$								
Part III Grants or Assistanc	e Benefiting Inte	reste	d Pe	rsons.								
Complete if the organization	on answered "Yes" on	Form 9	990, Pa	art IV, line 27.								
(a) Name of interested person	(b) Relationship			(c) Amount of		(d) Type) Purp		f
	interested per the organiz		id	assistance		assistan	ce		•	assista	ance	
								+				
								_				
	+											

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

Schedule L (Form 990 or 990-EZ) 2013

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
				Yes	No
COMCAST	VICE PRESIDENT IS A	172,000.	CABLE FEES		X
JANICE BELL	SPOUSE OF THE FORME	312,543.	FACULTY WAG		X
BANK OF NEW YORK-MELLON	VICE CHAIRMAN & CEO	146,000.	INVESTMENT		X
PHYLLIS SCHLESINGER	SPOUSE OF THE FORME	40,960.	FACULTY WAG		X
FIDELITY	CHIEF INVESTMENT OF	0.	403(B) RETI		X
CAROLINE WINN	DAUGHTER OF THE CUR	46,409.	COMPENSATIO		X

Part V Supplemental Information

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 \$ 172,000.
- (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 THE FORMER PROVOST

- (C) AMOUNT OF TRANSACTION \$ 312,543.
- (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 \$ 146,000.
- (D) DESCRIPTION OF TRANSACTION: INVESTMENT FEES PAID

Schedule L (Form 990 or 990-EZ) 2013

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

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Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

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

Employer identification number BABSON COLLEGE 04 - 2103544

Pai	Types of Property								
		(a)	(b)	(c)		(d)			
		Check if applicable	Number of contributions or	Noncash contribu amounts reported		Method of donuments of donuments of donuments		-	·c
		арріісаріе		Form 990, Part VIII,		Horicasii contrib	ution a	mount	<u> </u>
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	39	2,078,8	90.	AVG. OF HI8	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 ()								
<u>28</u> 29	Other ()			and with this area					—
29	Number of Forms 8283 received by the organization completed Form 828		-		29				
	for which the organization completed Form 828	oo, Fait IV,	Donee Acknowled	gernerit	29			Yes	No
302	During the year, did the organization receive by	, contributio	on any property rer	norted in Part I lines	1.28 +	hat it must hold for		163	NO
ooa	at least three years from the date of the initial of								
	the entire holding period?		•	•			30a		Х
h	If "Yes," describe the arrangement in Part II.						000		
31	Does the organization have a gift acceptance p	oolicy that r	equires the review	of any non-standard	contrib	utions?	31	х	
	Does the organization hire or use third parties of						<u> </u>		
	contributions?						32a		Х
b	If "Yes," describe in Part II.								
33	If the organization did not report an amount in	column (c) f	for a type of prope	rty for which column	(a) is ch	ecked,			
	describe in Part II.	(2)), p. spo.	,	. , = =	,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2013)

Schedule M (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

2013
Open to Public

Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www irs gov/form990

Open to Public Inspection

Name of the organization

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 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.

FORM 990, PART VI, SECTION A, LINE 1:

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

EXPLANATION: PURSUANT TO THE ORGANIZATION'S BYLAW, THE BOARD OF TRUSTEES

SHALL HAVE AN EXECUTIVE COMMITTEE WHICH SHALL CONSIST OF THE PRESIDENT OF

THE CORPORATION, THE CHAIRPERSON OF THE BOARD OF TRUSTEES, THE VICE

CHAIRPERSON(S) OF THE BOARD OF TRUSTEES, THE CHAIRPERSON-ELECT OF THE BOARD

OF TRUSTEES AND SUCH OTHER TRUSTEES AS SHALL BE APPOINTED BY THE

CHAIRPERSON OF THE BOARD OF TRUSTEES OF THE CORPORATION FOR TERMS OF ONE(1)

YEAR, BUT ANY MEMBER MAY BE REAPPOINTED. DURING THE INTERVALS BETWEEN

MEETINGS OF THE BOARD OF TRUSTEES, SUBJECT TO SUCH LIMITATIONS AS MAY BE

PRESCRIBED BY RESOLUTION OF THE BOARD OF TRUSTEE, THE EXECUTIVE COMMITTEE

63

14150414 130157 BABSON

332211 09-04-13

2013.04030 BABSON COLLEGE

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Schedule O (Form 990 or 990-EZ) (2013)

Employer identification number 04 - 2103544

SHALL HAVE GENERAL SUPERINTENDENCE AND ADMINISTRATION OF THE CURRENT MANAGEMENT OF THE AFFAIRS OF THE CORPORATION 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 B, LINE 11:

EXPLANATION: 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. PWC SIGNS THE RETURN AS PAID PREPARER.

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

EXPLANATION: 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:

EXPLANATION: COMPENSATION FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYEES OF 332212 09-04-13

MARLA M. CAPOZZI RECEIVES NO COMPENSATION FOR HOLDING THE POSITION OF TRUSTEE. ALL HER COMPENSATION WAS FOR HER SERVICE AS AN ADJUNCT LECTURER.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

YE GLOBAL'S ASSET

BABSON COLLEGE	04-2103544
FORM 990 PART XII, LINE 2C	
EXPLANATION: THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES	SIS
RESPONSIBLE FOR OVERSIGHT OF THE AUDIT. THE COMMITTEE REV	TIEWS AND
APPROVES THE AUDITED FINANCIAL STATEMENTS.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

► See separate instructions.

2013

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

BABSON COLLEGI	₹.				(04-21035	44	
Part I Identification of Disregarded Entities Complete	te if the organization answered "Yes	s" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea	1	Direct c	(f) ontrolling ntity	I
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations Complete if the organization	answered "Yes" on Form 990	D, Part IV, line 34 b	ecause it had one	or more r	related tax-exer	npt	
(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 501(c)(3))		(f) Direct controlling entity		12(b)(13) olled ity?
BABSON GLOBAL, INC - 27-1642647 231 FOREST STREET BABSON PARK, MA 02457	SUPPORTING ORGANIZATION	MASSACHUSETTS	509 (A)(3)		BARSON	COLLEGE	Yes X	No
DIBBON TIME, IMI V2437	COLLOWING ONCOMIZATION	MISSICHOSETTS	303 (11)(3)		DIEDON	СОППОП	- 11	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partn	l or Percentaging ownersh
		country)		sections 512-514)		4,000.0	Yes	No	K-1 (Form 1065)	Yes	No
<u> </u>											

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related Part IV 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 country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	en	(i) ction (b)(13) trolled tity?
CHARITABLE REMAINDER UNITRUST (2)								Yes	No
ONE LINCOLN STREET	1								
BOSTON, MA 02111	FUNDRAISING	MA	N/A	TRUST					X

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

Note	. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No			
1	During the tax year, did the organization engage in any of the following transactions wi	ith one or more re	elated organizations listed	in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		X			
	Gift, grant, or capital contribution to related organization(s)				1b	Х				
С	Gift, grant, or capital contribution from related organization(s)				1c		X			
d	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			
g	Sale of assets to related organization(s)				1g		X			
h	Purchase of assets from related organization(s)				1h		X			
i	Exchange of assets with related organization(s)				1i		X			
j	j Lease of facilities, equipment, or other assets to related organization(s)									
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	Х	X			
- 1	I Performance of services or membership or fundraising solicitations for related organization(s)									
	m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
Sharing of paid employees with related organization(s)										
р	Reimbursement paid to related organization(s) for expenses				1p		X			
	Reimbursement paid by related organization(s) for expenses				1q		X			
r	Other transfer of cash or property to related organization(s)				1r		X			
s	Other transfer of cash or property from related organization(s)				1s		X			
2	If the answer to any of the above is "Yes," see the instructions for information on who	must complete th	nis line, including covered	relationships and transaction thresholds.						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved					
(1) B	ABSON GLOBAL, INC.	В	331,978.	ACTUAL COST						
(2) B	ABSON GLOBAL, INC.	L	4,372,989.	COST PLUS OVERHEAD RATE						
(3) B	ABSON GLOBAL, INC.	N	0.	INCLUDED IN OVERHEAD ABO	VE					
(4)										
(5)										
(6)										

<u>Schedule R (Form 990) 2013</u> BABSON COLLEGE 04-2103544

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	Are a partners 501(c orgs Yes) all s sec.)(3) s.? No	(f) Share of total income	(g) Share of end-of-year assets	Dispr tion alloca Yes	opor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti Yes	(k) al or Percentag ging ownership

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