	0	00	Return of Organization Exempt Fro	om Ir	ncome Tax	OMB No. 1545-0047
For	n J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co			
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it			Open to Public
Interr	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the			Inspection
				ling MA	AY 31, 2022	
B C a	heck if pplicab	le:	forganization	5	D Employer identifie	cation number
	Addr	ge BRIN N	NAWR COLLEGE	S. 1		
	Name	ge Doing b	usiness as		23-1352621	an a
	Initial	Number		om/suite	E Telephone number	
	Final returr termi	V 101 N	MERION AVENUE		610-526-5000	
	ated Amer	City or t	town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	605,081,450.
	returr	DRIN F	IAWR, PA 19010		H(a) Is this a group re	
	Appli tion pend	ing F Name a	nd address of principal officer: KIMBERLY E. CASSIDY		for subordinates	
		SAME AS	C ABOVE		H(b) Are all subordinates in	
		empt status:		527		list. See instructions
		ite: NWW.BF			H(c) Group exemptio	
	Automatical and a line		x Corporation	L Year of	of formation: 1885	A State of legal domicile: PA
Pè	irt I	Summary				
e	1		be the organization's mission or most significant activities: PROVIDE A		OUS EDUCATION AND)
and			PURSUIT OF KNOWLEDGE AS PREPARATION FOR LIFE AND WORK	-		
Governance	2	Check this bo				sets. 34
NOE	3				3	34
	4		dependent voting members of the governing body (Part VI, line 1b)			2111
ies	5		of individuals employed in calendar year 2021 (Part V, line 2a)			834
Activities &	6		of volunteers (estimate if necessary)			2,929,107.
Ac			d business revenue from Part VIII, column (C), line 12			2,525,107.
	D	Net unrelated	business taxable income from Form 990-T, Part I, line 11			
	8	Contributions	and grants (Part) (III line 1h)		Prior Year 47,879,373.	Current Year 27,740,557.
an	° 9		and grants (Part VIII, line 1h) ice revenue (Part VIII, line 2g)		98,107,494.	116,861,719.
Revenue	9 10		come (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		92,893,838.	137,047,175.
Re	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		280,754.	384,630.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10000 March 1000 March	239,161,459.	282,034,081.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		45,147,674.	48,240,472.
	14				0.	0.
			to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)		68,366,710.	74,913,809.
ses			undraising fees (Part IX, column (A), line 11e)		0.	0.
			ing expenses (Part IX, column (D), line 25) 4,858,036			
Expen			es (Part IX, column (A), lines 11a-11d, 11f-24e)		48,906,152.	58,447,553.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)		162,420,536.	181,601,834.
- 1	19		expenses. Subtract line 18 from line 12		76,740,923.	100,432,247.
or				Be	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)		1,564,567,339.	1,590,150,712.
Net Assets or Fund Balances	21		s (Part X, line 26)	1.0	149,722,569.	147,475,296.
Net	22		fund balances. Subtract line 21 from line 20	🗖	1,414,844,770.	1,442,675,416.
	rt II	Signature				
Unde	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the best of my	/ knowledge and belief, it is
			. Declaration of preparer (other than officer) is based on all information of which I			
			An: too			272

Sign Here	Signaturé of officer KARI FAZIO, CFO & CAO Type or print name and title	\$	Date Date
	Type of print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	RUSSLEE ARMSTRONG	Russlee Armstrong	04/04/2023 If self-employed P00288383
Preparer	Firm's name SRANT THORNTON LL	//	Firm's EIN > 36-6055558
Use Only	Firm's address > 2001 MARKET ST, S	FE 700	an a shara a ga
	PHILADELPHIA, PA	19103	Phone no.215-561-4200
May the II	IRS discuss this return with the preparer sh	own above? See instructions	X Yes No

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

rai	990 (2021) BRYN MAWR COLLEGE T III Statement of Program Service Accomplishments	23-1352621	F
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on the		Yes 🛛
	prior Form 990 or 990-EZ?		Yes ∟
_	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 🛛
_	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 mea		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organizations are required to report the amount of grants are required to report the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organization 501(c)(4	he total expense	es, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	113	8,628,
	INSTRUCTION: DURING THE YEAR, BRYN MAWR COLLEGE'S ENROLLMENT CONSISTED		
	OF APPROXIMATELY 1,425 FULL AND PART-TIME UNDERGRADUATE STUDENTS IN		
	RESIDENCE AND 355 GRADUATE AND PROFESSIONAL STUDENTS. IN FY2022, BRYN		
	MAWR CONFERRED 311 BACHELOR'S DEGREES; 74 POST-BACCALAUREATE		
	CERTIFICATES; 95 MASTER'S DEGREES AND 14 DOCTORAL DEGREES.		
	SEVENTY-EIGHT PERCENT OF FULL-TIME UNDERGRADUATE STUDENTS RECEIVED SOME		
	FORM OF FINANCIAL AID. THE AVERAGE AID AWARD WAS \$58,133. IN ADDITION,		
	DURING FISCAL YEAR 2022, THE COLLEGE PROVIDED OVER \$1.8 MILLION IN		
	SUBAWARDS TO OTHER INSTITUTIONS FOR INSTRUCTION IN CRITICAL LANGUAGES.		
	RESEARCH: SINCE ITS FOUNDING IN 1885, THE COLLEGE HAS MAINTAINED ITS		
	CHARACTER AS A SMALL RESIDENTIAL COMMUNITY WHICH FOSTERS CLOSE WORKING		
	RELATIONSHIPS BETWEEN FACULTY AND STUDENTS. THE FACULTY OF		
	TEACHERS/SCHOLARS EMPHASIZES LEARNING THROUGH CONVERSATION AND		
	COLLABORATION, PRIMARY READING, ORIGINAL RESEARCH AND EXPERIMENTATION.		
	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG		
	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP		
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	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP		
4c	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP BETWEEN TEACHING AND RESEARCH.	1	.,206,
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4c	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP BETWEEN TEACHING AND RESEARCH.	1	.,206,
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4d	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP BETWEEN TEACHING AND RESEARCH. (Code:)(Expenses \$1,734,563. including grants of \$12,068.) (Revenue \$ PUBLIC SERVICE AND CIVIC ENGAGEMENT: BRYN MAWR COLLEGE'S PHEBE ANNA THORNE SCHOOL HAS BEEN SERVING FAMILIES IN THE GREATER PHILADELPHIA AREA FOR MORE THAN SIXTY YEARS. THE THORNE SCHOOL CONTINUES TO OFFER DEVELOPMENTALLY ORIENTED, CHILD-CENTERED PRE-SCHOOL AND KINDERGARTEN PROGRAMS. CIVIC ENGAGEMENT COLLABORATES WITH COMMUNITY-BASED ORGANIZATIONS TO PREPARE STUDENTS TO BE SOCIALLY RESPONSIBLE LEADERS AND CITIZENS THROUGH PURPOSEFUL ACTION, REFLECTION, AND LEARNING. A WIDE VARIETY OF PROGRAMS INCLUDE PROVIDING DIRECT SERVICE SUCH AS TUTORING, TAX PREPARATION, MENTORING, AND LEADERSHIP TRAINING, AND REFLECTING ON THAT SERVICE INSIDE AND OUTSIDE OF A CLASSROOM SETTING. (SEE SCHEDULE O) COther program services (Describe on Schedule O.)		
4d 4e	THE COLLEGE'S FACULTY RESEARCH SUPPORT PROGRAM REFLECTS A STRONG INSTITUTIONAL COMMITMENT TO FACULTY SCHOLARSHIP AND TO THE RELATIONSHIP BETWEEN TEACHING AND RESEARCH. (Code:)(Expenses \$1,734,563. including grants of \$12,068.) (Revenue \$ PUBLIC SERVICE AND CIVIC ENGAGEMENT: BRYN MAWR COLLEGE'S PHEBE ANNA THORNE SCHOOL HAS BEEN SERVING FAMILIES IN THE GREATER PHILADELPHIA AREA FOR MORE THAN SIXTY YEARS. THE THORNE SCHOOL CONTINUES TO OFFER DEVELOPMENTALLY ORIENTED, CHILD-CENTERED PRE-SCHOOL AND KINDERGARTEN PROGRAMS. CIVIC ENGAGEMENT COLLABORATES WITH COMMUNITY-BASED ORGANIZATIONS TO PREPARE STUDENTS TO BE SOCIALLY RESPONSIBLE LEADERS AND CITIZENS THROUGH PURPOSEFUL ACTION, REFLECTION, AND LEARNING, A WIDE VARIETY OF PROGRAMS INCLUDE PROVIDING DIRECT SERVICE SUCH AS TUTORING, TAX PREPARATION, MENTORING, AND LEADERSHIP TRAINING, AND REFLECTING ON THAT SERVICE INSIDE AND OUTSIDE OF A CLASSROOM SETTING. (SEE SCHEDULE O) Other program services (Describe on Schedule O.) (Expenses \$) (Revenue \$. , 206 ,

	orm 990 (2021) BRYN MAWR COLLEGE	23-1352621		P	age 3
Pa	Part IV Checklist of Required Schedules				
				Yes	No
1	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
	If "Yes," complete Schedule A	<u>L</u> ·	1	х	L
2	2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		2	Х	L
3	3 Did the organization engage in direct or indirect political campaign activities on behalf of or in oppos	ition to candidates for			
	public office? If "Yes," complete Schedule C, Part I		3		X
4					
	during the tax year? If "Yes," complete Schedule C, Part II		4	X	<u> </u>
5	5 (<i>N</i> , <i>n</i>) (<i>N</i> , <i>n</i>) (<i>N</i> , <i>n</i>) 5				
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		5		<u> </u>
6		-			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," co		6		X
7	, 5 i i i i				
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		X
8	, , , , , , , , , , , , , , , , , , ,		_	v	
-	Schedule D, Part III		8	X	<u> </u>
9					
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt r	-	~		x
40	If "Yes," complete Schedule D, Part IV		9		<u> </u>
10				x	
	or in quasi endowments? If "Yes," complete Schedule D, Part V		10	A	<u> </u>
11					
~	as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If</i> "Yes,				
a			1a	х	
h	Part VIb Did the organization report an amount for investments - other securities in Part X, line 12, that is 5%		14		<u> </u>
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		1b	x	
c	c Did the organization report an amount for investments - program related in Part X, line 13, that is 5%				<u> </u>
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		1c		x
Ь	d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its tot				
u	Part X, line 16? If "Yes," complete Schedule D, Part IX		1d		x
е	e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Scheu	dule D. Part X. 1	1e	х	
f					
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Sc		1f	х	
12a	2a Did the organization obtain separate, independent audited financial statements for the tax year? If				
	Schedule D, Parts XI and XII		2a	х	
b	b Was the organization included in consolidated, independent audited financial statements for the tax				
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and		2b		x
13			13	х	
14a			4a	х	
b	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking	, fundraising, business,	Τ		
	investment, and program service activities outside the United States, or aggregate foreign investme	-			
	or more? If "Yes," complete Schedule F, Parts I and IV		4b	х	
15	5 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assista	ance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV		15		х
16					-
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		6	Х	<u> </u>
17	7 Did the organization report a total of more than \$15,000 of expenses for professional fundraising se	vices on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		17		X
18	8 Did the organization report more than \$15,000 total of fundraising event gross income and contributed of the second sec	ions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II		18		X
19	9 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, li	ne 9a? If "Yes,"			
	complete Schedule G, Part III		19		X
20a	Da Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	2(0a		X
b	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this retu	······	0b		
21					
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	2	21	X	L
132003	32003 12-09-21	Fc	orm	990	(2021)

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4 2021.05070 BRYN MAWR COLLEGE

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	х	
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		x
	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		x
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		x
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70		
254		25a		x
L	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and	25a		
a				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		x
00	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization required, errinnate, or dissorte and cease operations? <i>If 'res,' complete Schedule N, Part 1</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete</i>			
52		32		x
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	0		x
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
0-	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
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		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 322			
1a				
b				

132004 12-09-21

Form 990 (2021)

Form 990 (2021)

BRYN MAWR COLLEGE

Part V Statements Regarding Other IRS Filings and Tax Compliance contributed 2a Exter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, and the statement of the state of the statement of the state of the complication of the statement of the state of the statement of the statemen	Form	990 (2021) BRYN MAWR COLLEGE 23-135262	1	P	age 5
2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements. 21 211 211 211 b If a least one is reported on line 2a, dd the organization file all required foxerial engineem tax returns? 2a X 3a Did the organization have or unable for an 200, you may be required to a dig. Scientification on Schedule O 3a X 3a Did the organization have or unable for admost on a spontaneor on Schedule O 3b X 3a Did the organization have or unable for admost on a spontaneor on Schedule O 3b X 3a Did the organization have or unable for admost on the admost one schedule O 3c X 3b T '''se, '' enter the name of the foreign country P ZMAZE Scientification approximation for fill organization fill of the organi	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Interface 2111 2111 2111 In fail test or is reported on fine 3, did the organization fiel al regularized forder an epipersent tax returns? 20 2 In the organization have uncleade business groups concreved 51 (000 rune during the year? 30 X In the organization have uncleade business groups concreved 51 (000 rune during the year? 30 X In the organization have uncleade business groups concreved 51 (000 rune during the year? 30 X In the organization have uncleade business groups concreved 51 (000 rune during the year? 4a X In the organization are uncleaded business groups concreved 51 (000 rune during the year? 4a X In the organization are provided tax shalter transaction at any time during the tax year? 4a X In the organization have an interments for FinCHN Form 114, Report of Foreign Bark and Financial Accounts (FIAAR). 5a X In the organization have annual groups receptite that are on combidity during the tax year? 5a X In the organization have annual groups receptite that are normally greater than \$100,000, and did the organization selection are organized than a provided tax shalter transaction? 5a X In the organization need and tax a normally greater than \$100,000, and did the organization selection are organized to make a sequence? 7b X In the organization needwe and tax a contribution an uniter sector 170(c). 10 10				Yes	No
b If a least one is reported on line 2a, idd the organization file all required fadera employment tax returns? 26 X B Did the organization have enclosed business growth an 250, you may be required to <i>a</i> , <i>ba</i> , <i>ba</i> enclosed 0 3a X B Did the organization have enclosed business growth as a bank account, a contre during the year? 3a X B Trives, 'Insist filted a Form 900 Tor the year, and the organization have an insteam, or a signature or cher authorty over, a financial account in a long in comparization in a period tax and the angle account in a long in the organization filter on the sign of the angle account in a long in the organization filter on the angle the organization filter on the sign of the organization filter on englinization in a period tax angle the angle tax year? 5a X D If "Xs,' in the sign of the organization filter on B88-7? 5a X D If "Ys,' in the organization filter on anglize the filter on the sign of the organization filter on the sign of the organization filter on the sign of the sign anglize the sign of the sign of the sign of the sign of the sign anglize the sign of	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note: The organization have unrelated basiness gross mome of \$1,000 or more during the year? Image: Control of the year? Image:		filed for the calendar year ending with or within the year covered by this return 2a 2111			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 4a X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 4a X bit 1 * ex; * relate the name of the toring noting 'be 7280252 See instructions for fing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X bit 1 * ex; * relate the name of the organization in For MSB for 7 See instructions fail we organization that it was or is a party to a prohibited tas shellor transaction? 5b X 6a X 11 * Yes; * relate comparization in Even were were start and eccertibula a calentable contributions? 6a X 7 Organizations that we need on the very solicitation an express statement that such contributions or gifts were not it as deductible and relatable contributions? 7a X 1 * Yes; * rel dt the organization include with very solicitation an express statement that such contributions or gifts 7a X 1 * Yes; * rel dt the organization include with very solicitation an express statement that such contributions or gifts 7a X 0 If the organization schellow a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
b If Yes, 'has it fields from 9807 for this year? // YAo' to line 3b, provide an explanation on Schedule 0 90 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, is activut, a control security. 4a 5 If Yes,'' rotation than foreign occurity (buch as a bank account, securits account, or therm financial account; (ERAR). 5a 5a Was the organization to filling requirements for FinCEN Normal 14, Report of Foreign Bank and Financial Accounts (FEAR). 5a 5a Was the organization have annual gross receipts that are onromality greater than \$100,000, and did the organization solid any contributions that may receive that are normally greater than \$100,000, and did the organization solid any contributions that may receive deductible contributions. 5a 5a Was the organization have multiple was or is a prix to a prohibit to tas before that such contributions or gifts were not tax deductible. 5a 6a X 6b 7 Organization take may receive deductible contributions under section 170(c). 6b 8 If Yes, '' relate the runner of forms 8282 field during the year 7a 7a X 7b 7a X 7b If Yes, '' relates the number of forms 8282 field during the year 7a 7a If Yes, '' relates the number of forms 8282 field during the year 7a 7a If Yes, '' relates the numb		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
4 A Ary time during the calendary year, dit the organization have an interest in, or a signature or other authority over, a dar financial accounts (FibAR). 4 X b If Yes," enter the name of the foreign country by ERANCE 5a instructions for filing requirements for FIFCH Perm 114, Report of Foreign Bark and Financial Accounts (FBAR). 5a X 5a what the organization aparty to a prohibited tax shefter transaction? 5a X 5b If Yes," into Ea or 8b, did the organization the foreign Earning the tax year? 5a X 6a Des the organization have arroual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions thaw ere not tax debuctibles on christhutions? 5a X 7b Organizations that may noreby eductible contributions under section 170(c). 7a X 7a X 7b Uf Yes," did the organization for the value of the oans of the value of the goods or services provided? 7a X 7a X 7b Uf Yes," did the organization relax yeage arrow thans, directly or indirectly, to pay premiums on a personal benefit contract? 7a X 7a X 7b Uf the organization relax yeage arrow thans, directly or indirectly, to pay premiums on a personal benefit contract? 7a X X 7b Uf the organization relax yeage arrow thans, directly or indirectly, to pay premiums on a personal benefit contract? 7a X X 7b Uf the organization relax yeage arrow thans, directly or indirectly, to pay premiums on a personal benefit contract? 7			3a	X	
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b If "Yes," enter the name of the foreign country, b FEANCE Image: Control of Co	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR). Se X Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? Se X Ot any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Se X If "Yes' to line Ga or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? Se X If "Yes' to line Ga or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? Se X If "Yes' to line Ga or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? Se X If "Yes' to line Ga or Sb, did the organization include with very solicitation are express statement that such contributions or gifts were not tax deductible? Se X If Wes, "India the organization include with very solicitation are express statement that such contributions or gifts were not tax deductible? Ta X If Wes, "India the organization nuclew shares of S7 made party ga promiums on a personal benefit contract? Ta X If Wes, "India the organization nuclew shares of S7 made party ga promiums on a personal benefit contract? Ta X If Wes, "India the organization nuclew shares of S7 made party ga promiums on a personal benefit contract?		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	L
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? 5c 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and dd the organization solicit any contributions that ween tot tax deductible or achirately contributions or gifts were not tax deductible or this deductible or orbitotions and party to goods and services provided to the page. 6a X b If 'Yes,' idid the organization include with every solicitation and party to goods and services provided to the page. 7a X b If 'Yes,' idid the organization notify the donor of the value of the good or services provided? 7a X c Did the organization notify the donor of the value of the good or services provided? 7a X c Did the organization notify the donor of the value of the good or services provided? 7a X d If 'Yes,' indicate the number of Forms 8282 filed during the year 7a X d If the organization neceive a contribution of qualified intelectual property, ind which, is a promoting? 7a X f Did the organization neceive a contribution of cas, boats, aripane,	b	If "Yes," enter the name of the foreign country FRANCE			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 9 X c If "Yes" to line 6a or 5b, did the organization file Form 8886-17. 6e 4 6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization soluted as charabale contributions? 6e X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gits 6e X b If "Yes," did the organization colube with every solicitation an express provided? 7e X b If "Yes," did the organization outly the donor of the value of the goods or services provided? 7e X b If If Yes," indicate the number of Forms 8282 field during the year 7d 7e X f If Yes," indicate the number of Forms 8282 field during the year 7d 7e X f If the organization neceive any funds, directly or indirectly, to a personal benefit contract? 7e X f If the organization neceived a contribution of cars, boats, applanes, or other vehicles, did the organization file form 8092 as equiver? 7a 7a f If the organization maximation donor advised funds. 1d advised funds. 9a <		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
if Yes' to line Sa or Sb, did the organization file Form 8886 17 56 Ga Does the organization have annual gress receipts that are normally greater than \$100,000, and did the organization soliet any contributions that were not tax deductible as chartable contributions of grits were not tax deductible on the deductible organization include with every solicitation an express statement that such contributions or grits were not tax deductible contributions under section 170(c). 66 a lid the organization include with every solicitation an express statement that such contributions or grits were not tax deductible or the value of the goods or services provided? 7a b li Yes,' idid the organization notify the donor of the value of the goods or services provided? 7a X b li the organization receive a payment in secses of \$75 made party as a contribution and party for goods and services provided? 7a X b li the organization notify the donor of the value of the goods or services provided? 7a X b lid the organization neceive a negative indicetity or indirectly, to pay premiums on a personal benefit contract? 7c X g if the organization received a contribution of qualified intelectual property, id the erganization file a form 1089 C? 7a X g blid the organization neceive excess buishess holdings at any time during the year? 9a 7a X g blid the organization neceive a contribution of qualified intelectual property, id the organization file a form 1089 C? <t< td=""><td>5a</td><td>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td><td>5a</td><td></td><td>Х</td></t<>	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
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any contributions that were not tax deductible as charitable contributions? 6a X b If 'Yes, ' did the organization include with every solicitation an express statement that such contributions or gifts 6b 7 Organizations that may receive deductible? 7c 8 Did the organization network symmet in excess of \$75 male party as contribution and party for pools and services provided to the payor? 7c 2 Did the organization network symmet in excess of \$75 male party as contribution and party for pools and services provided to the payor? 7c X b If 'Yes, ' indicate the number of Forms 2282 filed during the year 7d 7d X b Did the organization network any thunds, directly or indirectly, on a personal benefit contract? 7e X f Did the organization neeved a contribution of qualified intellectual property, did the organization facework a contribution of acts, boats, apinanes, or other vehicles, did the organization file a Form 1086-C? 7f 8 Donsoring organization neeves boldings at my time during the year? 8 8 9 Sponsoring organization neeves sholdings at my time during the year? 8 9 Did the sponsoring organization neeves sholdings at my time during the year? 9g 9 Did the sponsoring organization make any taxable distributions under section 4966? 9g 9 Did the sponsoring organization has eny taxable distribution such section 4966? 9g 10 Section 501(c)(2) organizations. Euter: 10g <	с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
b If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). 7a X a Did the organization neceive a payment in excess of \$25 made parity as a contribution and parity for pools and services provided to the payor? 7a X b If Yes," did the organization notify the donor of the value of the goods or services provided? 7c X c Did the organization sective any funds, directly or indirectly, to pay premiums on a personal property for which it was required 7c X d If Yes," did the organization neceive a contribution of cars, boats, airplanes, or other vehicles, did the organization field or other values of the organization field a contribution of cars, boats, airplanes, or other vehicles, did the organization field Form 1084C? 7d X f If the organization neceived a contribution of cars, boats, airplanes, or other vehicles, did the organization field Form 1084C? 7h X g Sponsoring organization maintaining donor advised funds. 9a 9b 9b s Did the sponsoring organizations. Enter: a 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities 10a 10a 1 Section 501(c)(21) organizations. Enter: a	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
were not fax deductible? 60 7 Organizations that may receive deductible contributions under section 170(c). 7a X b 10 the organization netive a payment in excess of \$7 made party as a contribution and party for yoods and services provided to the payor? 7a X b 17 'Yes," did the organization netive decharable personal property for which it was required to file Form 8282? 7c X d 17 'Yes," indicate the number of Forms 8282 filed during the year 7d X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7r X f Did the organization receive a contribution of qualified intelectual property, to did the organization file form 8098 as required? 7d X f If the organization receive a contribution of oras, boats, airplanes, or other vehicles, did the organization file a Form 1098 C? 7h X g Sponsoring organization maintaining doorn advised funds. Did a doorn advised fund maintained by the sponsoring organization make any taxable distributions under section 4986? 9a 9a Did the sponsoring organization make an ad taxable distributions under section 4986? 9a 9a Did the sponsoring organization make an alter travable distributions under section 4986? 9a 9a Did the sponsoring organization make an alter travable distribution so adores ad partial contributions included on Part VIII, line		any contributions that were not tax deductible as charitable contributions?	6a		Х
7 Organizations that may receive deductible contributions under section 170(c). a) a) a) a) b) a) b) <	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7a X b If Yes,* did the organization notify the donor of the value of the goods or services provided? 7b 7c X b If Yes,* did the organization notify the donor of the value of the goods or services provided? 7c X c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X f If the organization received a contribution of qualified intellectual property, did the organization file Form 8089 as required? 7g X f If the organization maximum and any taxable distributions under section 4966? 9a 9 9a 9a 9 Did the sponsoring organization make any taxable distributions under section 4966? 9a 9a 9a 9a 9a 9a 9a 9b 10 10a		were not tax deductible?	6b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d X d If "Yes," indicate the number of Forms 8282 filed during the year, pay preniums, (incertly or indirectly, on a personal benefit contract? 7t X f Did the organization, ting the year, pay preniums, directly or indirectly, on a personal benefit contract? 7t X f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0? 8 Sponsoring organization maintaining door advised funds. Did a door advised fund maintained by the sponsoring organization make a distribution sunder section 4966? 9a 9a g Sponsoring organization make a distribution to a door, donor adviser, or related person? 9b 9a g Gross income from there sources. Que not net amounts due or paid to other sources against amounts due or received from them.) 11a 10b 11a 12 Socian S01(c)(12) organizations. Enter: 10b 11a 12a 12a 13 Section S01(c)(12) organizations. Enter: <td>7</td> <td>Organizations that may receive deductible contributions under section 170(c).</td> <td></td> <td></td> <td></td>	7	Organizations that may receive deductible contributions under section 170(c).			
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to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7d X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization received a contribution of qualified intellectual property, did the organization file form 8899 as required? 7f X g If the organization received a contribution of cars, boats, aipplanes, or other vehicles, did the organization file Form 8899 as required? 7n X g If the organization received a contribution of cars, boats, aipplanes, or other vehicles, did the organization file Form 8899 as required? 7n X g Sponsoring organizations maintaining door advised funds. 8 8 8 8 g Did the sponsoring organization make a distributions under section 4966? 9a 9a 9b <	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
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Form	990 (2021) BRYN MAWR COLLEGE		23-3	135262	1	P	age 6
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	nrough	7b below, ar	nd for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O						
	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		34			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other				
	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision				
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		Х
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or				
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or				
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		•				
а	The governing body?				8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	<u>Code.)</u>				
				ı		Yes	No
	Did the organization have local chapters, branches, or affiliates?				10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the fo	rm?	11a		X
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				40	х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	А	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			10-	x	
10	on Schedule O how this was done				12c	X	
13 14	Did the organization have a written whistleblower policy?				<u>13</u> 14	x	
14 15	Did the organization have a written document retention and destruction policy?				14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	i Dy III	dependent				
2	The organization's CEO, Executive Director, or top management official				15a	х	
	Other officers or key employees of the organization				15b	X	
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a				
150	taxable entity during the year?				16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				104		
5	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ						
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE 0						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	-T (section 50)1(c)(3)s	onlv)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.		,				
	X Own website Another's website X Upon request Other (explain	on Sc	hedule ()				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	icy, and	financ	cial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records	•			
	CONTROLLER - 610-526-5632						
_	101 N. MERION AVE, BRYN MAWR, PA 19010						
132006	3 12-09-21				Form	990	(2021)
	7						,
004	03 153424 0175265-00002 2021.05070 BRYN MAW	R CO	OLLEGE			01	752

Form 990 (2021)	BRYN MAWR COLLEGE	23-1352621	Page 7
Part VII Compe	nsation of Officers, Directors, Trustees, Key	Employees, Highest Compensated	
Employ	ees, and Independent Contractors		
Check if S	Schedule O contains a response or note to any line in this P	art VII	
Section A. Officers,	, Directors, Trustees, Key Employees, and Highest Com	pensated Employees	
1a Complete this tabl	le for all persons required to be listed. Report compensatior	n for the calendar year ending with or within the organizatior	ı's tax year.
I ist all of the or	agnization's current officers directors trustees (whether in	individuals or organizations) regardless of amount of comper	eation

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do			ition) than d	ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	id a d	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee.			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1099-1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) BROOKE H. JONES	40.00				-		-			
CHIEF INVESTMENT OFFICER	0.00	1			х			767,113.	0.	60,866.
(2) KIMBERLY E. CASSIDY	40.00									
PRESIDENT OF THE COLLEGE	0.00			х				628,077.	0.	159,453.
(3) ROBERT A. MILLER	40.00									
CHIEF ALUM RELATIONS & DEV OFF	0.00				Х			320,872.	0.	38,970.
(4) KARI FAZIO	40.00									
CFO & CEO	0.00			х				314,014.	0.	39,997.
(5) MARY OSIRIM	40.00									
PROFESSOR	0.00					X		241,494.	0.	52,463.
(6) TIMOTHY HARTE	40.00									
PROVOST & PROFESSOR OF RUSSIAN	0.00			Х				241,348.	0.	51,788.
(7) DARLYNE BAILEY	40.00									
PROFESSOR	0.00					X		221,464.	0.	33,728.
(8) GINA SIESING	40.00									
CIO AND DIRECTOR OF LIBRARIES	0.00				X			221,868.	0.	31,342.
(9) SAMUEL B. MAGDOVITZ	40.00									
COLLEGE COUNSEL	0.00			Х				203,422.	0.	45,827.
(10) DEEPAK KUMAR	40.00									
PROFESSOR	0.00					X		213,396.	0.	32,493.
(11) RUTH LINDEBORG	40.00									
SECRETARY OF THE COLLEGE	0.00			х				192,505.	0.	50,729.
(12) CHERYL LYNN HORSEY	40.00									
CHIEF ENROLLMENT OFFICER	0.00				X			195,182.	0.	42,807.
(13) JENNIFER WALTERS	40.00									
DEAN OF UNDERGRADUATE COLLEGE	0.00				X			191,090.	0.	42,525.
(14) GENE KIM	40.00									
DIRECTOR OF INVESTMENTS	0.00					X		202,910.	0.	17,898.
(15) KAREN GREIF	40.00									
PROFESSOR	0.00					X		186,594.	0.	28,683.
(16) CYNTHIA ARCHER	3.00									
CHAIR, BOARD OF TRUSTEES	0.00	Х		х	<u> </u>			0.	0.	0.
(17) HAZARA AKTHAR	2.00	l								_
TRUSTEE (BEG FALL 2021)	0.00	Х						0.	0.	0. Form 990 (2021)

8

132007 12-09-21

Form 990 (2021) BRYN MAWR COL	LEGE								23-13526	21	F	age 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)				C)			(D)	(E)		(F)		
Name and title	Average	(do		Pos heck			one	Reportable	Reportable	E	stimat	ed	
	hours per	box	, unle	ss pei nd a d	rson i	s both	n an	compensation	compensation	a	mount	of	
	week				Tecto	l/irus	lee)	from	from related		other		
	(list any hours for	recto						the	organizations		npensa		
	related	or di	ee			ated		organization	(W-2/1099-MISC/		rom th		
	organizations	ustee	trustee		e	bens		(W-2/1099-MISC/	1099-NEC)	· · · ·	ganiza [:] 1d rela [:]		
	below	ual tr	ional		ploye	t corr		1099-NEC)			ia reia janizat		
	line)	Individual trustee or director	In stit utio nal 1	Officer	ƙey employee	Highest compensated employee	Former				anzai	10115	
(18) SALLY BACHOFER	2.00				Ť								
TRUSTEE (BEG FALL 2021)	0.00	х						0.	0			0.	
(19) SANDY BAUM	2.00												
TRUSTEE	0.00	х						0.	0			0.	
(20) STEPHANIE L. BROWN	2.00												
TRUSTEE	0.00	x						0.	0			0.	
(21) CECILIA A. CONRAD	2.00								Ū.	<u>'</u>		<u> </u>	
TRUSTEE	0.00	x						0.	0			0.	
		^						0.	0	·			
(22) SUSAN JIN DAVIS TRUSTEE	2.00	x						0.	0			Ο.	
(23) DENISE LEE HURLEY	3.00	<u>л</u>		-		-	-	U.	0			0.	
VICE CHAIR, BOARD OF TRUSTEES	0.00	x		x				0.	0			0.	
(24) KIKI JAMIESON	2.00	л			<u> </u>			· · ·	0			••	
		v						0.	0			0	
TRUSTEE	0.00	х						0.	0	·		0.	
(25) TUJUANDA C. JORDAN	2.00								_				
TRUSTEE (BEG FALL 2021)	0.00	х						0.	0	·		0.	
(26) GINA KIM 2.00 TRUSTEE (BEG FALL 2021) 0.00 X													
TRUSTEE (BEG FALL 2021)	0.	0			0.								
1b Subtotal								4,341,349.	0	·	129	,569.	
c Total from continuation sheets to Part VII								0.	0	·		0.	
d Total (add lines 1b and 1c)								4,341,349.	0		729	,569.	
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable				
compensation from the organization											1	126	
											Yes	No	
3 Did the organization list any former officer,	-		•	•	•				•				
line 1a? If "Yes," complete Schedule J for su	ıch individual									3		X	
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization				
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	dule	e J f	for such individual		4	Х		
5 Did any person listed on line 1a receive or a	ccrue comper	sati	on fi	rom	any	unre	elate	ed organization or individ	lual for services				
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or sı	ich i	oers	on .				5		X	
Section B. Independent Contractors													
1 Complete this table for your five highest cor	npensated inc	lepe	ndei	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compens	ation fr	om		
the organization. Report compensation for t													
(A)								(B)		(C)		
Name and business	address							Description of s	ervices	Compe		on	
HSC BUILDERS & CONSTRUCTION MANAGERS													
304 NEW MILL LN, EXTON, PA 19341								BUILDING CONTRACTO	R	9	354	,475.	
WOLFE SCOTT ASSOCIATES INC, 910 E MAI	N ST										, ,		
STE 200, NORRISTOWN, PA 19401								BUILDING CONTRACTO	R	1	596	,434.	
GARDNER FOX ASSOCIATES INC							-				,000	, 10 1 .	
919 GLENBROOK AVE, BRYN MAWR, PA 19010 BUILDING CONTRACTOR										1	499	,105.	
THE SULLIVAN CO											,,	,	
2 LA GRANGE AVE, ESSINGTON, PA 19029 BUILDING CONTRACTOR											976	,199.	
RCA LABORATORY SERVICES LLC													
4060 INNSLAKE SR, GLEN ALLEN, VA 2306	0							COVID TESTING			540	,513.	
2 Total number of independent contractors (ir		ot lin	nited	d to	thos	e lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	•				3 (-					
SEE PART VII, SECTION A CONTINU		TS								Form	990	(2021)	
132008 12-09-21												,	

Part VII Section A. Officers, Directors, 1		nplo	yee			lighe	est		```		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average	(0	Position (check all that apply)					Reportable	Reportable compensation	Estimated	
	hours per	(C	песк Т	l	Inat	app I	iy)	compensation from	from related	amount of other	
	week					ee		the	organizations	compensatio	
	(list any	ector				m ploy		organization	(W-2/1099-MISC)	from the	
	hours for	or dir	æ			ated e		(W-2/1099-MISC)		organizatior	
	related	ustee	truste		96	bens				and related	
	organizations below	ual tri	tional		n ploye	t com	~			organization	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former				
27) JEFFREY I. KOHN	2.00	_	-		-	-	4				
RUSTEE	0.00	х						0.	0.		
28) AMY T. LOFTUS	3.00										
VICE CHAIR, BOARD OF TRUSTEES	0.00	х		х				0.	0.		
(29) PATRICK T. MCCARTHY	3.00										
SECRETARY, BOARD OF TRUSTEES	0.00	х		х				0.	0.		
(30) MARGARET SARKELA	2.00										
TRUSTEE	0.00	х						0.	0.		
(31) JANET L. STEINMAYER	3.00										
VICE CHAIR, BOARD OF TRUSTEES	0.00	х		X				0.	0.		
(32) SASKIA SUBRAMANIAN	2.00										
RUSTEE	0.00	X						0.	0.		
33) LORELEI A. VARGAS RUSTEE (BEG FALL 2021)	2.00	x						0.	0.		
(34) TERESA WALLACE	2.00	^						0.	0.		
TRUSTEE	0.00	x						0.	0.		
(35) ELIZABETH VOGEL WARREN	2.00							••	· ·		
RUSTEE	0.00	x						0.	0.		
(36) NANAR TABRIZI YOSELOFF	2.00										
TRUSTEE	0.00	x						0.	0.		
(37) BARRY MILLS	2.00										
RUSTEE	0.00	х						0.	0.		
(38) CHRISTY A. ALLEN	2.00										
TRUSTEE	0.00	х						Ο.	0.		
(39) JING-YEA HSU	2.00										
TRUSTEE	0.00	х						0.	0.		
(40) KAREN KERR	2.00										
TRUSTEE	0.00	х						0.	0.		
41) APARAJITA BHATTACHARYYA	2.00										
RUSTEE	0.00	х						0.	0.		
(42) CYNTHIA CHALKER	2.00										
RUSTEE	0.00	х		<u> </u>	<u> </u>			0.	0.		
43) TIM BLAKE NELSON	2.00										
RUSTEE	0.00	х	<u> </u>			-		0.	0.		
44) THABANI SINKULA	2.00	Ţ							<u>_</u>		
RUSTEE	0.00	Х	-					0.	0.		
45) JENNIFER SUH WHITFIELD	2.00	v							^		
RUSTEE 46) IVY GLUCK	0.00	Х	-	-	-	-		0.	0.		
YRUSTEE	0.00	x						0.	0.		

Form 990 BRYN MAWR COLLEGE 23-1352											
Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est (, ,		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average	1-1			ition		1.3	Reportable	Reportable	Estimated	
	hours per week (list any		heck		Inat		iy)	compensation from the organization	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the	
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations	
(47) RHEA GRAHAM	2.00										
TRUSTEE	0.00	х						0.	0.	0.	
(48) SARA MORENO	2.00									_	
TRUSTEE	0.00	х						0.	0.	0.	
(49) SEVERA VON WENTZEL	2.00								_	^	
TRUSTEE	0.00	х						0.	0.	0.	
		1									
		1									
		1									
		-									
		-					\vdash				
		-					-				
Total to Part VII, Section A, line 1c											

132201 04-01-21

ar	t VIII	Statement of Re	ven	ue						_
		Check if Schedule O	conta	ains a resp	onse	or note to any line	<u>e in this Part VIII …</u> (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluc from tax unde sections 512 - 5
ants unts	1 a	Federated campaigns		1a						
uno	b	Membership dues								
Ĕ	с	Fundraising events		1c						
ar A		–								
Bevenue 3 4 5 6	е	Government grants (contr	ibuti	ons) 1e		7,256,678.				
Š	f	All other contributions, gifts,	grant	s, and						
the		similar amounts not included	abov	re 1 f		20,483,879.				
0 P	g	Noncash contributions included in	lines 1	a-1f 1g	\$	5,126,347.				
an	h	Total. Add lines 1a-1f				>	27,740,557.			
	0.0			Business Code						
	2 a	a GROSS TUITION		611710	90,000,831.	90,000,831.				
e	b			721310	21,576,806.	21,576,806.				
en	С	TRI-COLLEGE PROGRAMS			611710	2,011,640.	2,011,640.			
Sev	d	OTHER AUXILIARY SVC				532000	1,626,724.	1,508,648.	118,076.	
	е	PUBLIC SERVICE FEES				611710	1,206,592.	1,206,592.		
	f	All other program service				900099	439,126.	439,126.		
+	g	Total. Add lines 2a-2f					116,861,719.			
	3	Investment income (includ	•			· ·	F0 475 00C		0 011 021	47 664 0
		other similar amounts)					50,475,996.		2,811,031.	
		Income from investment o		•			127.			1
	5	Royalties								
				(i) Re	ai	(ii) Personal				
		Gross rents	<u>6a</u>							
		Less: rental expenses	6b							
		Rental income or (loss)	<u>6c</u>							
enue		Net rental income or (loss)			(ii) Othor				
	7 a	Gross amount from sales of	_	(i) Secur		(ii) Other				
		assets other than inventory	7a '	109,618,	421.					
	b	Less: cost or other basis		22 047	260					
		and sales expenses		823,047,						
		Gain or (loss)					96 571 052			96 571 0
		Net gain or (loss)			····		86,571,052.			86,571,0
2	8 а	Gross income from fundraisi	-							
)		including \$								
		contributions reported on								
	L	Part IV, line 18								
		Less: direct expenses								
		Net income or (loss) from Gross income from gamin								
	9 a	-	-							
	h	Part IV, line 19								
		Less: direct expenses								
		Net income or (loss) from			es					
	iu a	Gross sales of inventory, I			10a					
	h	and allowances Less: cost of goods sold								
		Net income or (loss) from								
+	U		Jaits		JIY	Business Code				
.	11 🤉	VENDING, MISC. SALE	S.			900099	384,630.			384,6
anc	n a b									
Revenue	c									
Be		All other revenue								
Revenue							384,630.			
	~	Total. Add lines 11a-11d								

12 2021.05070 BRYN MAWR COLLEGE

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BRYN MAWR COLLEGE

Part IX Statement of Functional Expenses

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

Check if Sch	edule O contains a response	e or note to any line in t	this Part IX	·····	
Do not include amounts rep 7b, 8b, 9b, and 10b of Part		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistan	ce to domestic organizations				
and domestic government	ts. See Part IV, line 21 🛛 🔜 🗖	1,928,863.	1,928,863.		
2 Grants and other assis	tance to domestic				
individuals. See Part IV	/, line 22	46,098,536.	46,098,536.		
3 Grants and other assis	tance to foreign				
organizations, foreign g	governments, and foreign				
individuals. See Part IV	, lines 15 and 16	213,073.	213,073.		
4 Benefits paid to or for I	members				
5 Compensation of curre	ent officers, directors,				
trustees, and key empl	oyees	4,518,546.	543,376.	3,586,729.	388,441.
6 Compensation not include	ed above to disqualified				
persons (as defined under	r section 4958(f)(1)) and				
persons described in sect	ion 4958(c)(3)(B)				
7 Other salaries and wag	les	53,692,125.	44,207,688.	6,752,280.	2,732,157.
8 Pension plan accruals and					
section 401(k) and 403(b)) employer contributions)	4,857,947.	3,591,494.	998,505.	267,948.
	ts	8,086,905.	5,996,527.	1,660,733.	429,645.
		3,758,286.	2,821,968.	736,539.	199,779.
11 Fees for services (none					
a Management	-				
b Legal		203,690.	35,333.	168,347.	10.
c Accounting		360,056.		360,056.	
d Lobbying		18,249.	475.	17,774.	
e Professional fundraising s					
f Investment manageme	nt fees	10,036,709.	51,996.	9,983,684.	1,029.
g Other. (If line 11g amour					
column (A), amount, list l	ine 11g expenses on Sch O.)	4,920,847.	3,321,985.	1,510,897.	87,965.
12 Advertising and promo	tion	152,130.	44,753.	106,823.	554.
13 Office expenses		9,967,192.	6,899,190.	2,903,059.	164,943.
	/ [2,620,002.	1,513,070.	1,063,608.	43,324.
15 Royalties					
		2,607,244.	2,246,455.	330,041.	30,748.
		1,006,054.	892,386.	50,243.	63,425.
18 Payments of travel or e	entertainment expenses				
for any federal, state, c	or local public officials				
19 Conferences, conventi	ons, and meetings	1,229,569.	576,286.	519,578.	133,705.
20 Interest		4,853,907.	4,493,528.	275,846.	84,533.
	n, and amortization	13,196,973.	11,094,840.	1,872,303.	229,830.
••• ·	[1,191,760.	133,464.	1,058,296.	
24 Other expenses. Itemize e					
above. (List miscellaneous line 24e amount exceeds	s expenses on line 24e. If 10% of line 25. column (A).				
amount, list line 24e expe					
a LIBRARY ACQUISITI	ONS	2,513,482.	2,513,482.		
b POOLED INCOME FUN	ID EXP	1,710,272.		1,710,272.	
c STUDY ABROAD PROG	RAM	1,432,188.	1,432,188.		
d BI/TRI-CLG. SHARE	D EXP	427,229.	420,991.	6,238.	
e All other expenses					
25 Total functional expenses	s. Add lines 1 through 24e	181,601,834.	141,071,947.	35,671,851.	4,858,036.
26 Joint costs. Complete this	s line only if the organization				
reported in column (B) joi	int costs from a combined				
educational campaign and	I fundraising solicitation.				
Check here 🕨 📄 if follo	wing SOP 98-2 (ASC 958-720)				
132010 12-09-21					Form 990 (2021)

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		Check if Schedule O contains a response or not	e to any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			9,829.	1	7,827.
	2	Savings and temporary cash investments			112,790,765.	2	123,096,035.
	3	Pledges and grants receivable, net			22,344,327.	3	14,802,938.
	4	Accounts receivable, net			3,196,819.	4	2,990,829.
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se person	s		5	
Assets	6	Loans and other receivables from other disquali	fied perso	ons (as defined			
		under section 4958(f)(1)), and persons described	d in sectio	n 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net			2,226,240.	7	2,057,561.
	8	Inventories for sale or use				8	
	9	Duran side some some som stade forma stade some so			1,353,611.	9	1,535,400.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	443,938,371.			
	b	Less: accumulated depreciation		244,405,319.	192,413,872.	10c	199,533,052.
	11				740,113,854.	11	549,553,981.
	12	Investments - other securities. See Part IV, line			484,236,733.	12	691,339,021.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	5,881,289.	15	5,234,068.		
	16	Total assets. Add lines 1 through 15 (must equ	1,564,567,339.	16	1,590,150,712.		
	17	Accounts payable and accrued expenses	13,001,521.	17	12,102,293.		
	18	Grants payable	415,040.	18	241,356.		
	19	Deferred revenue	3,821,702.	19	4,446,254.		
	20	Tax-exempt bond liabilities	122,820,520.	20	119,060,709.		
	21	Escrow or custodial account liability. Complete				21	
	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
ilidi		controlled entity or family member of any of the		22			
Lia	23	Secured mortgages and notes payable to unrela	-	F		23	
	24	Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D	,		9,663,786.	25	11,624,684.
	26	T 1 1 1 1 1 1 1 1 1 1			149,722,569.	26	147,475,296.
		Organizations that follow FASB ASC 958, che			, ,		, , ,
es		and complete lines 27, 28, 32, and 33.					
anc	27			682,475,070.	27	710,083,496.	
Bala	28			732,369,700.	28	732,591,920.	
μ		Organizations that do not follow FASB ASC 9			, ,		, ,
Fur		and complete lines 29 through 33.	00, 011001				
ç	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or ea				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,414,844,770.	32	1,442,675,416.
Ż	33	Total liabilities and net assets/fund balances			1,564,567,339.	33	1,590,150,712.
	100					00	Form 990 (2021)

Form **990** (2021)

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Form	990 (2021) BRYN MAWR COLLEGE	23-1352	621	Pa	_{ae} 12
	rt XI Reconciliation of Net Assets				2
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	282	,034,	081.
2	Total expenses (must equal Part IX, column (A), line 25)	2	181	,601,	834.
3	Revenue less expenses. Subtract line 2 from line 1	3	100	,432,	247.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,414	,844,	770.
5	Net unrealized gains (losses) on investments	5	-72	,601,	601.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			٥.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	1,442	,675,	416.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a			. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2 b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			v	
	review, or compilation of its financial statements and selection of an independent accountant?		. <u>2c</u>	X	
~	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit		v	1
	Act and OMB Circular A-133?	1	<u>3a</u>	X	
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir			х	1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b	^ 000	<u> </u>

Form **990** (2021)

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Department of the Treasury Internal Revenue Service

(Form 990)

Total

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.

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

OMB No. 1545-0047	
2021	

Open to Public Inspection

Nar	ne of t	the organization	Go to www.n3.go					mployer	identification number
			IAWR COLLEGE						23-1352621
Pa	nrt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.		
The	organ	ization is not a private found							
1	Ŭ	A church, convention of ch					1)(A)(i).		
2	X	A school described in sect					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
3	\square	A hospital or a cooperative)(b)(1)(A)(i	ii).		
4	\square	A medical research organiz). Enter	the hospital's name.
		city, and state:	, i	,				/-	,
5		An organization operated for	or the benefit of a col	llege or university owned	l or operat	ed by a go	overnmental unit o	describe	ed in
Ŭ		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).		
7	\square	An organization that norma	0				.,	neneral r	ublic described in
•		section 170(b)(1)(A)(vi). (C	-		on a gov	Similar		gonorarp	
8		A community trust describe		(1)(A)(vi) (Complete Par	+ 11)				
9	\square	An agricultural research org			-	ed in conii	inction with a lan	nd-orant	college
•		or university or a non-land-g	-			-		-	-
		university:	jiani conogo or agiro				,	, comogo	
10	\square	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns. membership f	fees. and	aross receipts from
		activities related to its exer							
		income and unrelated busir		-					-
		See section 509(a)(2). (Co		(,,					,
11		An organization organized a	• •	ivelv to test for public sa	fetv. See	section 50	09(a)(4).		
12	\square	An organization organized a	-		•			out the i	purposes of one or
		more publicly supported or	•		•				•
		lines 12a through 12d that	-						
a		Type I. A supporting orga	• •					-	giving
		the supported organization		-	• • • •	-			
		organization. You must o							
k	, []	Type II. A supporting org	-		tion with its	s supporte	ed organization(s)), by hav	ing
		control or management o	-					-	-
		organization(s). You mus			•		C C		
c	:	Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functionally ir	ntegrate	d with,
		its supported organization	n(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.	-	
c		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported	d organiz	ation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an	n attentiv	eness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
e		Check this box if the orga	anization received a \	written determination fro	m the IRS	that it is a	Type I, Type II, T	Гуре III	
		functionally integrated, or	r Type III non-functio	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
<u>c</u>		vide the following informatior							
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10		anization listed ing document?	(v) Amount of mo		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instru	uctions)	support (see instructions)

Schedule A	(Form	990	2021
		000	

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	A (Form 990) 2021 BRYN	N MAWR COLLEGE		23-1352621	Pa
Part II	Support Schedule for Or	rganizations Descr	ibed in Sections 170(b)(1)(A)(i	v) and 170(b)(1)(A)(vi)	
	(Complete only if you checked th	he box on line 5, 7, or 8	of Part I or if the organization failed to o	qualify under Part III. If the organiz	ation
	fails to qualify under the tests lis	stad balaw, plaasa comp	loto Part III.)		

fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	61,253,193.	42,794,567.	26,188,644.	47,879,373.	27,740,557.	205,856,334.
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	61,253,193.	42,794,567.	26,188,644.	47,879,373.	27,740,557.	205,856,334.
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)						1,947,968.
6	Public support. Subtract line 5 from line 4.						203,908,366.
	ction B. Total Support	,					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	61,253,193.	42,794,567.	26,188,644.	47,879,373.	27,740,557.	205,856,334.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	47,055,486.	48,260,431.	49,286,492.	49,512,405.	50,476,123.	244,590,937.
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	423,343.	359,241.	432,245.	278,581.	384,630.	1,878,040.
11	Total support. Add lines 7 through 10	,	,	,		, ,	452,325,311.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	545,325,309.
13	First 5 years. If the Form 990 is for th						
	organization, check this box and stor	-					
See	ction C. Computation of Publi						
	Public support percentage for 2021 (I			olumn (f))		14	45.08 %
15	Public support percentage from 2020					15	45.52 %
16a	33 1/3% support test - 2021. If the o					ore, check this bo	k and
	stop here. The organization qualifies					,	
b	33 1/3% support test - 2020. If the o		-				
	and stop here. The organization qual					, 	
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			-	-		
h	10% -facts-and-circumstances test	-			-		
~	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organization		•				
				., ,	, <u></u>		(Form 990) 2021

Schedule A (Form 990) 2021

132022 01-04-22

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disgualified 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) orga	nization,
check this box and stop here						
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2021 (I	ine 8, column (f), c	livided by line 13,	column (f))		15	%
16 Public support percentage from 2020	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20)21 (line 10c, colu	mn (f), divided by l	ine 13, column (f))		17	%
18 Investment income percentage from	2020 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2021. If the					3 1/3%, and	line 17 is not
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2020. If the						/3%, and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						
132023 01-04-22						dule A (Form 990) 2021
		10				

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1

2

Yes No

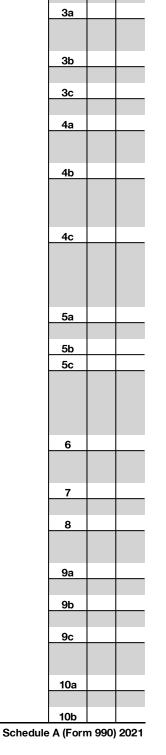
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
C	tion B. Type I Supporting Organizations			
			Yes	Ν
I	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
C	tion C. Type II Supporting Organizations			
			Yes	Ν
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
C	tion D. All Type III Supporting Organizations			
			Yes	1
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
eC	tion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	1 <u>s).</u>	
	Activities Test. Answer lines 2a and 2b below.		Yes	Ν
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
b				
c	one or more of the organization's supported organization(s) would have been endaded in? If "Yes " explain in			
b	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
b	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	<u>2b</u>		
b	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	2b 3a		
a	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			

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Yes No

 Schedule A (Form 990) 2021
 BRYN
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 COLLEGE

 Part IV
 Supporting Organizations
 (continued)

Has the organization accepted a gift or contribution from any of the following persons?
A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below; the generating bedu of a supported ergenization?

chedule A (Form 990) 2021 BRYN MAWR COLLEGE Part V Type III Non-Functionally Integrated 509(a)(3) Supporti	na Oraani [.]	zations	23-1352621 Pag
Check here if the organization satisfied the Integral Part Test as a qualify			Part VI). See instruction
All other Type III non-functionally integrated supporting organizations mu		•	,
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	anization (see

Schedule A (Form 990) 2021

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instructions).

Sche	dule A (Form 990) 2021 BRYN MAWR COLLEGE				23-1352621	Page 7
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	ied)		
Sect	ion D - Distributions				Current Y	'ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
_7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	IS	(iii) Distributa Amount for	
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
c	From 2018					
d	From 2019					
e	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
a	Excess from 2017					
b	Excess from 2018					
C	Excess from 2019					
d	Excess from 2020					
e	Excess from 2021					

Schedule A (Form 990) 2021

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Schedule A	(Form 990) 2021	BRYN MA	WR COLLEGE	23-1352621	Page 8
Part VI	Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c	, line 10; Part II, line 17a or 17b; Part III, line 1 ; Part IV, Section B, lines 1 and 2; Part IV, Sec nd 3b; Part V, line 1; Part V, Section B, line 1 ete this part for any additional information.	2; tion C,
132028 01-04-2	2		23	Schedule A (Fo	rm 990) 2021

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If the organization answered "Yes," or • Section 501(c)(3) organizations: Com			e 46 (Political Campai	ign Activities), then
 Section 501(c) (other than section 50 	01(c)(3)) organizations: Complete P	arts I-A and C below.	Do not complete Part I	-В.
 Section 527 organizations: Complete 	•			
If the organization answered "Yes," or				
 Section 501(c)(3) organizations that 	have filed Form 5768 (election und	er section 501(h)): Co	mplete Part II-A. Do not	t complete Part II-B.
 Section 501(c)(3) organizations that 	have NOT filed Form 5768 (election	n under section 501(h)): Complete Part II-B. D	Do not complete Part II-A.
If the organization answered "Yes," or	n Form 990, Part IV, line 5 (Proxy	Tax) (See separate i	nstructions) or Form 9	990-EZ, Part V, line 35c (Proxy
Tax) (See separate instructions), then				
 Section 501(c)(4), (5), or (6) organization 	tions: Complete Part III.			
Name of organization			F	mployer identification number
BRYN MAWR	janization is exempt under	r section 501(c) (r is a section 527	23-1352621
				organization.
			Devi N/	
1 Provide a description of the organiz				
2 Political campaign activity expendit				►\$
3 Volunteer hours for political campai	gn activities			
Part I-B Complete if the org	anization is exempt under	section 501(c)(3	3).	
1 Enter the amount of any excise tax	•			► \$
2 Enter the amount of any excise tax				
3 If the organization incurred a sectio				
4a Was a correction made?				
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	janization is exempt under	r section 501(c),	except section 50)1(c)(3).
1 Enter the amount directly expended	by the filing organization for secti	on 527 exempt functi	on activities	► \$
2 Enter the amount of the filing organ				
exempt function activities		C C		▶\$
3 Total exempt function expenditures				
line 17b				▶\$
4 Did the filing organization file Form				
5 Enter the names, addresses and en				
made payments. For each organiza	tion listed, enter the amount paid f	rom the filing organiz	ation's funds. Also ente	er the amount of political
contributions received that were pro-	omptly and directly delivered to a s	eparate political orga	nization, such as a sep	arate segregated fund or a
political action committee (PAC). If	additional space is needed, provid	e information in Part I	V.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om (e) Amount of political
			filing organization'	
			funds. If none, enter	-0 promptly and directly delivered to a separate
				political organization.
				If none, enter -0

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

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

Schedule C (Form 990) 2021

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OMB No. 1545-0047

2021 **Open to Public** Inspection

SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election und section 501(h)). A Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, for expenses, and share of excess lobbying expenditures). B Check ▶ if the filing organization checked box A and "limited control" provisions apply. B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing organization's totals (b) Affiliat totals Image: the term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals (b) Affiliat totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) Image: total section sectin secting section section section section secting sect	IN,
A Check ▶ □ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, I expenses, and share of excess lobbying expenditures). B Check ▶ □ if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) □ b Total lobbying expenditures (add lines 1a and 1b) □ d Other exempt purpose expenditures (add lines 1c and 1d) □ f Lobbying nontaxable amount. Enter the amount from the following table in both columns. □ If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: □	ed group
expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals (b) Affiliat total 1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	ed group
B Check if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals (b) Affiliat (b) Affiliat total 1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals (b) Affiliat total 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d)	
(The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:	
d Other exempt purpose expenditures	
e Total exempt purpose expenditures (add lines 1c and 1d)	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:	
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:	
Not over \$500,000 20% of 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 \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000 \$1,000,000.	
 h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 	
reporting section 4911 tax for this year? Yes Ye	NoNo
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)	
Lobbying Expenditures During 4-Year Averaging Period	
Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) T	otal
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) 2021

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(4	a)	(1)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?		X		
g			X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		10.010
	Other activities?	X			18,249.
j	Total. Add lines 1c through 1i		v		18,249.
	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				
Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	n 501(c)(5) or sec	tion	
I UI	501(c)(6).		0, 01 000		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization agree to carry over lobbying and political campaign activity expenditures from th		····· —		
	t III-B Complete if the organization is exempt under section 501(c)(4), sectio			tion	I
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3, is
	answered "Yes."		.,		-
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
с					
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	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 II-	A, lines 1 a	nd 2 (See	
instru	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART	II-B, LINE 1, LOBBYING ACTIVITIES:				
BRYN	I MAWR COLLEGE MAINTAINS PROFESSIONAL MEMBERSHIPS WITH MANY EXEMPT				
ORGA	NIZATIONS THAT AS PART OF THEIR MISSIONS STRIVE TO REPRESENT THE				
T10.1,F	RESTS AND VIEWPOINTS OF HIGHER EDUCATION TO THE NATIONAL AND STATE				
LEGI	SLATURES. ACCORDINGLY, A PORTION OF THE DUES PAID TO THESE				
MEME	BERSHIP ORGANIZATIONS IS REPORTED HERE AS IT MAY BE ATTRIBUTABLE TO				

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Schedule C (Form 990) 2021

Part IV Supplemental Information (continued)

LOBBYING ACTIVITIES. SOME OF THESE ORGANIZATIONS ARE: NATIONAL

ASSOCIATION OF COLLEGE AND UNIVERSITY BUSINESS OFFICERS (NACUBO),

ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES OF PENNSYLVANIA

(AICUP), AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW), PENNSYLVANIA

CONSORTIUM FOR THE LIBERAL ARTS (PCLA), NATIONAL ASSOCIATION OF STUDENT

FINANCIAL AID ADMINISTRATORS (NASFAA), NATIONAL ASSOCIATION OF COLLEGE

AND UNIVERSITY ATTORNEYS (NACUA), NATIONAL ASSOCIATION OF CLERY

COMPLIANCE OFFICERS AND PROFESSIONALS (NACCOP), NATIONAL ASSOCIATION

FOR COLLEGE ADMISSION COUNSELING (NACAC), COLLEGE AND UNIVERSITY

PROFESSIONAL ASSOCIATION FOR HUMAN RESOURCES (CUPA-HR), CONSORTIUM ON

FINANCING HIGHER EDUCATION (COFHE), ASSOCIATION OF AMERICAN COLLEGES

AND UNIVERSITIES (AAC&U).

Schedule C (Form 990) 2021

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SCHEDULE [)
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Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. he latest information. OMB No. 1545-0047 **Open to Public** Inspection

Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and t
Name of the organization	on

Employer identification number

23-	1	2 5	2	6 2	1
23-	T.	32	2	ᇰᇰ	T 1

_	BRYN MAWR COLLEGE		23-1352621
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?	· · · · ·	
Par	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	historically important land area
	Protection of natural habitat		certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied 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		2a
b			
с	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register	-	
3	Number of conservation easements modified, transferred, rel		
	year ►		5
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
	•		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on easements during the year
	▶\$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	·····	Yes No
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statemen	ts that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	d balance sheet works
	of art, historical treasures, or other similar assets held for put	lic exhibition, education, or research in furt	herance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	lance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• • •
2	If the organization received or held works of art, historical treat		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		• • •
			N A
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2021
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Sche	dule D (Form 990) 2021 BRYN MAWR (1352621	Page 2	
Par	t III Organizations Maintaining C	ollections of Art	i, Historical Tre	asures, or Othe	er Similar Ass	ets _{(contir}	nued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the f	ollowing that make	significant use of	its		
	collection items (check all that apply):							
а	X Public exhibition	d	X Loan or exc	hange program				
b	X Scholarly research	е						
с	X Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	empt purpose in P	art XIII.		
5	During the year, did the organization solicit o							
	to be sold to raise funds rather than to be ma					Yes	X No	
Par	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Pa		5			, , , ,		
1a	Is the organization an agent, trustee, custodi	an or other intermedi	arv for contributions	s or other assets no	t included			
	on Form 990, Part X?					Yes	No	
b	If "Yes," explain the arrangement in Part XIII							
~			owing table.			Amoun	t	
с	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
	Ending balance				16 1f			
	Did the organization include an amount on Fe					Yes	No	
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •			
Par								
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ack (e) Four	years back	
1a	Beginning of year balance	1,224,350,585.	901,011,027.	925,190,917.			633,825.	
b	Contributions	16,353,429.	19,128,366.				683,671.	
С								
d								
	Other expenditures for facilities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	0,001,110			072,607.	
e		41,195,219.	41,361,957.	40,603,781.	40,078,95	5 39	059,760.	
f	and programs Administrative expenses	13,040,000.	11,362,000.				071,188.	
		1,240,892,999.					991,646.	
g 2	End of year balance Provide the estimated percentage of the curr				525,150,51	.,.	,010.	
2	Board designated or guasi-endowment	43.3600	%	ji fielu as.				
a h	Permanent endowment 25.3900	%	70					
	Term endowment 31.2500							
С	The percentages on lines 2a, 2b, and 2c sho							
20	Are there endowment funds not in the posse		tion that are hold on	d administered for	the organization			
Ja		ssion of the organiza		iu auministereu ior	ine organization	Ì	Yes No	
	by: (i) Unrelated organizations					3a(i)	x	
							X	
h	(ii) Related organizations							
1	Describe in Part XIII the intended uses of the					30		
Par	t VI Land, Buildings, and Equipm		wittent fullus.					
	Complete if the organization answere		Part IV, line 11a, S	ee Form 990, Part)	(line 10			
	Description of property	(a) Cost or o			Accumulated	(d) Boo	k valuo	
	Description of property	basis (investr	• • •		epreciation	(u) 600	r value	
10	Land	`	,	,606,002.		8	606,002.	
	Land			,360,521.	204,615,616.		744,905.	
	BuildingsLeasehold improvements			, _ ,	,,,,.	102,	,	
			59	,691,938.	34,893,524.	24	798,414.	
	Equipment			,279,910.	4,896,179.		383,731.	
	Other	•		, ,	1,000,110.		533,052.	
rota	. Add lines 1a through 1e. (Column (d) must e	quai ⊢orm 990, Part)	<u>x, coiumn (B), line 1(</u>	UC.)			-	
					Sched	lule D (Forn	1990) 2021	

10500403 153424 0175265-00002

	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Fina	ncial derivatives			
2) Clos	ely held equity interests			
(3) Othe	er			
(A) ¹	PRIVATE EQUITY	618,783,402.	END-OF-YEAR MARKET VALUE	
(B) ¹	DIVERSIFIERS	72,555,619.	END-OF-YEAR MARKET VALUE	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	ol. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	691,339,021.		
Part V	Investments - Program Related.			
	Complete if the organization answered "Yes" of			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	h (h) must squal Form 000 Dart V sol (B) line 12)			
Part I	bl. (b) must equal Form 990, Part X, col. (B) line 13.) ► X Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1d See Form 990 Part X line 15	
	(a)			(b) Book value
(1)	(a)	Description		(b) Book value
(1)	(a)			(b) Book value
(2)	(a)			(b) Book value
(2) (3)	(a)			(b) Book value
(2) (3) (4)	(a)			(b) Book value
(2) (3) (4) (5)	(a)			(b) Book value
(2) (3) (4) (5) (6)	(a)			(b) Book value
(2) (3) (4) (5) (6) (7)	(a)			(b) Book value
(2) (3) (4) (5) (6)	(a)			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)		Description		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)	Solumn (b) must equal Form 990, Part X, col. (B) line	Description		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C	olumn (b) must equal Form 990, Part X, col. (B) line	Description		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C Part)	Column (b) must equal Form 990, Part X, col. (B) line	Description		
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (C Part)	Column (b) must equal Form 990, Part X, col. (B) line	Description		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C Part) [1. (1)	Column (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability	Description		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (C Part) 1. (1) (2)	Column (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability Federal income taxes	Description		(b) Book value 6,853,125
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (C Part) (1) (1) (2)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		(b) Book value 6,853,125
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C Part) (1) (1) (2) (3) (3)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		(b) Book value 6,853,125
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (C Part) (1) (2) (3) (4)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		(b) Book value 6,853,125
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C Part) (9) Total. (C (1) (2) (2) (3) (4) (5)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		(b) Book value 6,853,125
(2) (3) (4) (5) (6) (7) (8) (9) Total. (C) Part 2 (1) (2) (2) (2) (3) (4) (5) (6)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (C Part) (9) Fotal. (C) (4) (2) (2) (4) (5) (6) (7)	Column (b) must equal Form 990, Part X, col. (B) line Complete if the organization answered "Yes" of (a) Description of liability Federal income taxes ANNUITY OBLIGATIONS	Description		(b) Book value 6,853,125

Schedule D (Form 990) 2021

132053 10-28-21

Schedule D (Form 990) 2021 BRYN MAWR COL Part VIII Investments - Other Securities. BRYN MAWR COLLEGE

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATE EQUITY	618,783,402.	END-OF-YEAR MARKET VALUE
(B) DIVERSIFIERS	72,555,619.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	691,339,021.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line ⁻	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

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Sche	dule D (Form 990) 2021 BRYN MAWR COLLEGE			23-13	52621 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	152,110,195.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-72,601,601.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-42,439,977.		
е	Add lines 2a through 2d			2e	-115,041,578.
3	Subtract line 2e from line 1			3	267,151,773.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	14,882,308.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	14,882,308.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	282,034,081.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per F	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	124,279,549.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	124,279,549.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	14,882,308.		
b	Other (Describe in Part XIII.)	4b	42,439,977.		
с	Add lines 4a and 4b			4c	57,322,285.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.)			5	181,601,834.
Pa	rt XIII Supplemental Information.				
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	IV, lines 1b	and 2b; Part V, line 4	; Part X,	line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional inforr	nation.		

PART III, LINE 4:

THE COLLEGE'S ART AND ARTIFACT COLLECTIONS NUMBER MORE THAN 50,000

OBJECTS. THESE COLLECTIONS ENCOMPASS FIVE AREAS: FINE ARTS AND MUSIC;

ARCHAEOLOGY; DECORATIVE ARTS; AND GEOLOGY. THE COLLECTIONS ENHANCE THE

MISSION OF BRYN MAWR COLLEGE AND SERVE AS A RESOURCE FOR DIVERSE ACADEMIC

DEPARTMENTS, INCLUDING HISTORY OF ART, CLASSICS, ANTHROPOLOGY, FINE ARTS,

GROWTH AND STRUCTURE OF CITIES, GEOLOGY, HISTORY AND LANGUAGES. EACH YEAR

HUNDREDS OF OBJECTS FROM THE COLLECTIONS ARE UTILIZED FOR RESEARCH BY

FACULTY, STUDENTS, AND OUTSIDE SCHOLARS. IN ADDITION, OBJECTS ARE

REGULARLY LOANED TO REGIONAL, NATIONAL, AND INTERNATIONAL MUSEUM

EXHIBITIONS.

132054 10-28-21

PART V, LINE 4:

THE COLLEGE'S ENDOWMENT FUNDS CONSIST OF BOTH DONOR RESTRICTED AND BOARD

DESIGNATED FUNDS. THE ENDOWMENT SUPPORTS UNDERGRADUATE AND GRADUATE

STUDENT GRANTS, INSTRUCTIONAL AND RESEARCH PROGRAMS, LECTURES, LIBRARY

PURCHASES, AND GENERAL OPERATIONS.

PART X, LINE 2:

FIN 48 FOOTNOTE

THE COLLEGE HAS BEEN GRANTED TAX-EXEMPT STATUS AS A NON-PROFIT

ORGANIZATION UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE, AND

ACCORDINGLY, FILES ANNUALLY FEDERAL TAX FORM 990 (RETURN OF ORGANIZATION

EXEMPT FROM INCOME TAX). THE COLLEGE ALSO FILES FEDERAL TAX FORM 990-T

(EXEMPT ORGANIZATIONS BUSINESS INCOME TAX RETURN). THE COLLEGE MONITORS

AND EVALUATES ITS ACTIVITIES FOR UNRELATED BUSINESS INCOME.

THE TAX CUTS AND JOBS ACT (THE "ACT") WAS ENACTED ON DECEMBER 22, 2017.

THE ACT IMPACTS THE COLLEGE IN SEVERAL WAYS, INCLUDING A NEW EXCISE TAX ON

NET INVESTMENT INCOME. CHANGES TO THE NET OPERATING LOSS RULES. REPEAL OF

THE ALTERNATIVE MINIMUM TAX (AMT), AND THE COMPUTATION OF UBTI SEPARATELY

FOR EACH UNRELATED TRADE OR BUSINESS. THE COLLEGE HAS USED THE PUBLISHED

FEDERAL GUIDANCE TO ESTIMATE THE TAX LIABILITY THAT THE ACT HAS CREATED

FOR THE YEARS ENDING WITH MAY 31, 2022 AND MAY 31, 2021.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DISCOUNTS FOR TUITION, ROOM, AND BOARD (RECLASS) -42,439,977.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DISCOUNTS FOR TUITION, ROOM, AND BOARD (RECLASS)

42,439,977.

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Schedule D (Form 990) 2021

132055 10-28-21

(Form 990)

Schools

OMB No. 1545-0047

ZUZ Open to Public

1

Complete if the organization answered "Yes" on Form 990,
Part IV, line 13, or Form 990-EZ, Part VI, line 48.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization

BRYN MAWR COLLEGE

Inspection Employer identification number

23 - 1352621

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Pa	rtl			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
_	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarsh	ips? 2	х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
-	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	х	
	BRYN MAWR COLLEGE'S POLICY IS POSTED ON ITS WEBSITE AND	······ –		
	CONTAINED IN PRINTED ENROLLMENT MATERIALS PROVIDED TO ALL			
	PROSPECTIVE STUDENTS.			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis	? 4b	Х	
с	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
b c d e f g	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g		X X X X X X X X X X
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II		X	X
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule E (Fo	rm 990) 2021

Schedule E (Form 990) 2021 BRYN MAWR COLLEGE		23-1352621 Page 2
Part II Supplemental Information. Provide the explanations requ	uired by Part I, lines 3, 4d, 5h, 6b, and 7, as	
applicable. Also provide any other additional information.		
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:		
BRYN MAWR COLLEGE RECEIVES FEDERAL, STATE, AND LOCAL GOVER	NMENT FUNDING	
FOR FINANCIAL AID, PROGRAM SUPPORT, AND RESEARCH.		
132062 10-18-21		Schedule E (Form 990) 2021
40		
500403 153424 0175265-00002 2021.	05070 BRYN MAWR COLLEG	E 01752

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10500403 153424 0175265-00002

132071 12-20	-21					
			41			
10500403	153424	0175265-00002	2021.05070	BRYN	MAWR	COLLEGE

BRYN MAWR COLLEGE					23-1352621	
Part I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organ	ization answered "Y	es" on
Form 990, Part I	V, line 14b.					
1 For grantmakers. Doe	s the organizatior	n maintain record	ds to substantiate the amount of its gra	ants and other a	assistance,	
the grantees' eligibility	for the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	tance? X	Yes
2 For grantmakers. Des	cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	her assistance outsi	de the
United States.						
3 Activities per Region. (1	he following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of			(e) If activ	vity listed in (d)	(f)
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	exper for
	in the region	independent	gram services, investments, grants to		e specific type	inves
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the
CENTRAL AMERICA AND				RESEARCH AN	ID	
THE CARIBBEAN	0	0	PROGRAM SERVICES	PROFESSION	L DEVELOPMENT	
EAST ASIA AND THE				RESEARCH AN		
PACIFIC	0	0	PROGRAM SERVICES	PROFESSION	L DEVELOPMENT	
EAST ASIA AND THE						
PACTETC	0	0	PROGRAM SERVICES	STUDY ABROZ	,n	.

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.

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

Department of the Treasury Internal Revenue Service

SCHEDULE F (Form 990)

Name of the organization

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number

the grantees' eligibility fo	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance?	Yes 🗌 No
2 For grantmakers. Desci	ribe in Part V the	organization's p	procedures for monitoring the use of its	s grants and other assistance outsi	de the
United States.					
3 Activities per Region. (Th		I, line 3 table ca	n be duplicated if additional space is r	eeded.)	
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-	(e) If activity listed in (d) is a program service,	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to		for and
	in the region	contractors in the region	recipients located in the region)	of service(s) in the region	investments in the region
CENTRAL AMERICA AND				RESEARCH AND	
THE CARIBBEAN	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	4,910.
EAST ASIA AND THE				RESEARCH AND	
PACIFIC	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	1,997.
EAST ASIA AND THE					
PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROAD	17,346.
EAST ASIA AND THE					
PACIFIC	0	0	PROGRAM SERVICES	FELLOWSHIPS	9,386.
					5,000.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	FUNDRAISING		408.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CURRICULUM	78 166
ICELAND & GREENLAND)	0	0	FROGRAM SERVICES	CORRICOLOM	78,166.
EUROPE (INCLUDING				RESEARCH AND	
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	51,797.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0		PROGRAM SERVICES	STUDY ABROAD	702,741.
3 a Subtotal	0	0			866,751.
b Total from continuation		_			
sheets to Part I	0	5			290,660,956.
c Totals (add lines 3a	0	E			001 527 707
and 3b) LHA For Paperwork Reducti		5			291,527,707. Form 990) 2021

Schedule F (Form 990) 2021

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Part I Continuation	on of Activitie				1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	FELLOWSHIPS	108,979
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	4	PROGRAM SERVICES	SUMMER LANGUAGE SCHOOL	112,301
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	CURRICULUM	11 160
NORTH AFRICA	0	0	FROGRAM SERVICES	CORRICOLOM	11,160
MIDDLE EAST AND				RESEARCH AND	
NORTH AFRICA	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	3,595.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	FELLOWSHIPS	6,908
		Ŭ			0,500
				RESEARCH AND	
NORTH AMERICA	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	7,735
NORTH AMERICA	0	0	PROGRAM SERVICES	FELLOWSHIPS	36,000
				RESEARCH AND	
SOUTH AMERICA	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	2,100
SOUTH AMERICA	0	0	PROGRAM SERVICES	FELLOWSHIPS	36,000
SUB-SAHARAN AFRICA	0	1	PROGRAM SERVICES	CURRICULUM	28,458
Totals	•				

132181 04-01-21

Part I Continuation	n of Activitie	s per Region	• (Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditure: for region
RUSSIA AND NEWLY					
NDEPENDENT STATES	0	0	PROGRAM SERVICES	FELLOWSHIPS	800
UB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	FELLOWSHIPS	15,000
UROPE (INCLUDING					
CELAND & GREENLAND)	0	0	INVESTMENTS		18,824,813
NORTH AMERICA	0	0	INVESTMENTS		15,989,27
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS		255,477,834
Totals		5			290,660,95

132181 04-01-21

3 Enter total number of other organizations or entities

44

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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.

Schedule F (Form 990) 2021

BRYN MAWR COLLEGE

23-1352621

Page 2

Schedule F (Form 990) 2021

Part III	Grants and Other Assistance to Individuals Outside the United States.	Complete if the
	Part III can be duplicated if additional space is needed.	

BRYN MAWR COLLEGE

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	EAST ASIA AND THE						
FELLOWSHIP AND PRIZES	PACIFIC	2	9,386.	BANK CHECK	0.		FMV
	EUROPE (INCLUDING						
	ICELAND &						
FELLOWSHIP AND PRIZES	GREENLAND)	32	108,979.	BANK CHECK	0.		FMV
	MIDDLE EAST AND						
FELLOWSHIP AND PRIZES	NORTH AFRICA	4	6,908.	BANK CHECK	0.		FMV
FELLOWSHIP AND PRIZES	NORTH AMERICA	1	36,000.	BANK CHECK	0.		FMV
	RUSSIA AND NEIGHBORING						
FELLOWSHIP AND PRIZES	STATES	1	800.	BANK CHECK	0.		FMV
FELLOWSHIP AND PRIZES	SOUTH AMERICA	1	36,000.	BANK CHECK	0.		FMV
	SUB-SAHARAN						
FELLOWSHIP AND PRIZES	AFRICA	2	15,000.	BANK CHECK	0.		FMV
			,				

ne organization answered "Yes" on Form 990, Part IV, line 16.

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	X Yes	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	X Yes	No

Schedule F (Form 990) 2021

132074 12-20-21

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

BRYN MAWR COLLEGE STUDENTS MUST SUBMIT AN APPLICATION TO PARTICIPATE IN

THE STUDY ABROAD PROGRAM. THE PROGRAM OFFICE MAINTAINS A LIST OF FOREIGN

INSTITUTIONS WHICH MEET THE ACADEMIC REQUIREMENTS OF THE COLLEGE. A

COMMITTEE REVIEWS AND APPROVES EACH APPLICATION. STUDENTS ENROLLED IN A

STUDY ABROAD PROGRAM ARE BILLED COLLEGE TUITION AND ALL FINANCIAL AID FOR

STUDY ABROAD IS POSTED TO STUDENTS ACCOUNTS AT THE COLLEGE. THE COLLEGE

REMITS TUITION PAYMENTS DIRECTLY TO THE OVERSEAS PROGRAM ON BEHALF OF THE

STUDENTS. GRADUATE STUDENTS WHO RECEIVE FELLOWSHIPS TO PURSUE RESEARCH

OVERSEAS ARE MONITORED BY ADVISORS THROUGH REPORTS AND MEASUREMENT OF

ACADEMIC PROGRESS.

132075 12-20-21

SCHEDULE I (Form 990)			arants and Oth vernments, ar					OMB No. 1545-0047		
(10111330)			ete if the organizatio					2021		
Department of the Treasury		oomp.		Attach to For				Open to Public		
Internal Revenue Service			Go to www.ir	s.gov/Form990 fo	or the latest inform	nation.		Inspection		
Name of the organization	n BRYN MAWR COL	LEGE						Employer identification number 23-1352621		
Part I General Infe	ormation on Grants a	nd Assistance								
1 Does the organization	tion maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti			
	ard the grants or assis							X Yes No		
	/ the organization's pro									
	Other Assistance to	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any		
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.1 (a) Name and address of organization or government(b) EIN(c) IRC section (if applicable)(d) Amount of cash grant(e) Amount of noncash assistance(f) Method of valuation (book, 										
AMERICAN COUNCILS										
INTERNATIONAL EDUC										
MASSACHUSETTS AVE								L		
WASHINGTON, DC 200	36	52-1067256	501(C)(3)	1,829,719.	0.			FOREIGN LANGUAGE TRAINING		
FOUNDATION FOR COM 814 YARROW ST SHIP										
BRYN MAWR, PA 1901	.0	23-2844309	501(C)(3)	37,500.	0.			OPERATIONAL SUPPORT		
SMITHSONIAN INSTIT 1000 JEFFERSON DR										
WASHINGTON, DC 205	60	53-0206027	501(C)(3)	59,644.	0.			RESEARCH SUPPORT		
	r of section 501(c)(3) a	•	•	e line 1 table				3.		
3 Enter total number	r of other organization	s listed in the line ⁻	I table					►		

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

Schedule I (Form 990) 2021

Page 2

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

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1317	46,098,536.	٥.		
	recipients	recipients cash grant	recipients cash grant cash assistance	

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

PART I, LINE 2:

FINANCIAL AID TO INDIVIDUALS IS AWARDED BY THE COLLEGE'S FINANCIAL AID

PROFESSIONALS IN ACCORDANCE WITH COLLEGE POLICIES. FINANCIAL AID IS

ELECTRONICALLY DISBURSED AND CREDITED TO THE INDIVIDUAL STUDENT'S ACCOUNT

FOR TUITION, FEES, ROOM, BOARD, AND OTHER ELIGIBLE CHARGES. AWARDS TO

SUB-RECIPIENTS ARE IN ACCORDANCE WITH COLLEGE POLICIES AND PROVISIONS UNDER

UNIFORM GUIDANCE.

SC	HEDULE J Compensation Information										
(Fo	rm 990)	-	, Trustees, Key Employees, and Highest		20	01					
			nsated Employees		20						
Depa	tment of the Treasury		wered "Yes" on Form 990, Part IV, line 23.		Open to	Publ	ic				
	al Revenue Service		for instructions and the latest information.		Inspe						
Nam	ne of the organizatio			Employer ider							
		BRYN MAWR COLLEGE		23-135	2621						
Ра	rt I Question	s Regarding Compensation									
						Yes	No				
1a			the following to or for a person listed on Form	990,							
	·	line 1a. Complete Part III to provide any releva									
	X First-class or o		X Housing allowance or residence for persor								
	Travel for com		Payments for business use of personal res								
		ation and gross-up payments	\square Health or social club dues or initiation fees								
	Discretionary	Discretionary spending account Personal services (such as maid, chauffeur, ch									
L.	If any of the haves										
a	•	on line 1a are checked, did the organization fol	 iow a written policy regarding payment or e? If "No," complete Part III to explain 		1b	х					
2					di	21					
2		n require substantiation prior to reimbursing or	rding the items checked on line 1a?		2	х					
	trustees, and onice	is, including the CEO/Executive Director, regar			2						
3	Indicate which if a	ny, of the following the organization used to es	tablish the compensation of the organization's								
•				on to							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.										
	X Compensation committee X Written employment contract										
			X Compensation survey or study								
			X Approval by the board or compensation co	ommittee							
4	During the year, did	l any person listed on Form 990, Part VII, Secti	on A. line 1a. with respect to the filing								
	organization or a re										
а	•				4a		х				
b		eive payment from a supplemental nonqualifie			4b		х				
с	Participate in or rec	eive payment from an equity-based compensa	tion arrangement?		4c		х				
	If "Yes" to any of li	nes 4a-c, list the persons and provide the applic	cable amounts for each item in Part III.								
	Only section 501()(3), 501(c)(4), and 501(c)(29) organizations r	nust complete lines 5-9.								
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did th	e organization pay or accrue any compensation	n							
	contingent on the r	evenues of:									
а	The organization?				5a		X				
					5b		X				
	If "Yes" on line 5a	or 5b, describe in Part III.									
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did th	e organization pay or accrue any compensation	n							
	contingent on the r										
а	The organization?				6a		X				
	Any related organiz	ation?			6b		X				
		r 6b, describe in Part III.									
7			e organization provide any nonfixed payments								
	not described on lines 5 and 6? If "Yes," describe in Part III				7	Х					
8											
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III				8		X				
9		id the organization also follow the rebuttable p									
					9						
LHA	For Paperwork R	eduction Act Notice, see the Instructions for	⁻ Form 990.	Schedule	J (Forr	n 990)	2021				

132111 11-02-21

23-1352621

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) BROOKE H. JONES	(i)	487,568.	279,545.	0.	28,500.	32,366.	827,979.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	٥.
(2) KIMBERLY E. CASSIDY	(i)	519,563.	75,000.	33,514.	29,000.	130,453.	787,530.	٥.
PRESIDENT OF THE COLLEGE	(ii)	0.	0.	0.	0.	0.	0.	٥.
(3) ROBERT A. MILLER	(i)	283,872.	37,000.	٥.	29,000.	9,970.	359,842.	٥.
CHIEF ALUM RELATIONS & DEV OFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KARI FAZIO	(i)	279,014.	35,000.	0.	29,000.	10,997.	354,011.	0.
CFO & CEO	(ii)	0.	0.	٥.	0.	0.	0.	٥.
(5) MARY OSIRIM	(i)	239,494.	2,000.	٥.	24,925.	27,538.	293,957.	٥.
PROFESSOR	(ii)	0.	0.	٥.	0.	0.	0.	٥.
(6) TIMOTHY HARTE	(i)	231,848.	9,500.	0.	24,850.	26,938.	293,136.	٥.
PROVOST & PROFESSOR OF RUSSIAN	(ii)	0.	0.	0.	0.	0.	0.	٥.
(7) DARLYNE BAILEY	(i)	219,464.	2,000.	0.	22,345.	11,383.	255,192.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) GINA SIESING	(i)	200,378.	9,500.	11,990.	21,072.	10,270.	253,210.	0.
CIO AND DIRECTOR OF LIBRARIES	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SAMUEL B. MAGDOVITZ	(i)	196,422.	7,000.	0.	20,967.	24,860.	249,249.	0.
COLLEGE COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) DEEPAK KUMAR	(i)	211,396.	2,000.	0.	21,496.	10,997.	245,889.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) RUTH LINDEBORG	(i)	183,005.	9,500.	0.	20,300.	30,429.	243,234.	0.
SECRETARY OF THE COLLEGE	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) CHERYL LYNN HORSEY	(i)	185,682.	9,500.	٥.	19,959.	22,848.	237,989.	٥.
CHIEF ENROLLMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) JENNIFER WALTERS	(i)	184,090.	7,000.	0.	19,561.	22,964.	233,615.	0.
DEAN OF UNDERGRADUATE COLLEGE	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) GENE KIM	(i)	200,910.	2,000.	0.	17,700.	198.	220,808.	٥.
DIRECTOR OF INVESTMENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) KAREN GREIF	(i)	184,594.	2,000.	0.	18,713.	9,970.	215,277.	0.
PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	٥.
	(i)							
	(ii)							

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021

BRYN MAWR COLLEGE

Page 3

Part III Supplemental Information

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

PART I, LINE 1A:

FIRST-CLASS TRAVEL IS OCCASIONALLY ALLOWED FOR INTERNATIONAL FLIGHTS AND

RAIL TRANSPORTATION.

AS A CONDITION OF EMPLOYMENT. THE PRESIDENT IS REQUIRED TO RESIDE IN

COLLEGE-OWNED HOUSING. THE RESIDENCE MUST BE AND IS USED FOR COLLEGE

BUSINESS AND COLLEGE-SPONSORED FUNCTIONS. THE ESTIMATED VALUE OF THE

PRESIDENT'S HOUSING THAT IS EXCLUDED FROM TAXABLE INCOME BUT DISCLOSED ON

SCHEDULE J. COLUMN D. NONTAXABLE BENEFITS \$56,957.

THE PRESIDENT WAS PROVIDED TAXABLE INCOME IN LIEU OF A PENSION CONTRIBUTION

FOR WHICH THE COLLEGE ALSO PROVIDED A GROSS-UP PAYMENT FOR TAXES. THESE

PAYMENTS ARE REPORTED IN COLUMN B(III).

PART I LINE 7:

THE COLLEGE REPORTS NON-FIXED PAYMENTS ON SCHEDULE J. PART II.

BONUSES, AS REPORTED IN COLUMN B(II), ARE BASED ON A NUMBER OF VARIABLES

SUCH AS INDIVIDUAL GOAL ACHIEVEMENTS. OPERATIONAL ACHIEVEMENTS. OR

Part III Supplemental Information

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

TEMPORARY ASSUMPTIONS OF EXTRA DUTIES. BONUSES ARE DETERMINED AS PART OF

THE OVERALL COMPENSATION REVIEW. THE EXECUTIVE COMMITTEE OF THE BOARD

APPROVES ANY BONUSES FOR THE PRESIDENT.

AN ADDITIONAL NON-FIXED PAYMENT, TAXABLE INCOME IN LIEU OF A COLLEGE

PENSION CONTRIBUTION, IS REPORTED IN COLUMN B(III). REFER TO THE

EXPLANATION FOR LINE 1A.

Schedule J (Form 990) 2021

Page 3

	•					_	ENTITY	1				E 00/7
Department of the Treasury	omplete if the org	anization answere explanations, and	formation on Ta d "Yes" on Form 99 I any additional info orm990 for instruct	0, Part IV, rmation in	line 24a. I Part VI.	Provide descrip	tions,			Op	B No. 1548 202 en to P pectior	1 ublic
Name of the organization								Emp	loyer i	dentific	ation n	umber
BRYN MAWR COLLEG									23-13	52621		
Part I Bond Issues SEE	PART VI FOR C	OLUMN (F) CONT	INUATIONS	1								
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	e price	(f) Descriptio	on of purpose	(g) De	feased	(h) On b of issu	1	Pooled ancing
								Yes	No	Yes	No Ye	s No
PA HGH ED FAC AT BRYN MAWR COLLEGE						CURRENT REFU						
A SERIES 2010	23-2243852	70917RF75	05/26/10	15,9	-	SER.1999;ISS			Х		x	X
PA HGH ED FAC AT BRYN MAWR COLLEGE						CURRENT REFU	ND					
B SERIES 2012A	23-2243852	70917SCS0	11/29/12	15,5	43,415.	SER.2002;ISS	UE COST;CPTL		Х		x	X
PA HGH ED FAC AT BRYN MAWR COLLEGE						CPTL PROJECT	;ISSUE					
C SERIES 2014	23-2243852	70917SKZ5	07/09/14	57,4	87,399.	COST; ADV. RFN	D SER.2012;CA	1	Х		x	х
MNTGMRY CNTY IND DEV AUTH BRYN MAWR						CRNT REFUNDI	NG OF PHEFA					
D SERIES 2017	23-2245125	61361RAF2	06/01/17	22,2	48,671.	SERIES 2007;	COST OF ISSUE	2	X		X	Х
Part II Proceeds												
			A			В	С		_		D	
1 Amount of bonds retired			7,	365,000.			6,53	35,000	•			
2 Amount of bonds legally defeased												
3 Total proceeds of issue			15,	962,636.		15,543,413.	57,70	0,349	•		22,24	8,671.
4 Gross proceeds in reserve funds												
5 Capitalized interest from proceeds							2,56	56,735	•			
6 Proceeds in refunding escrows												
7 Issuance costs from proceeds				302,627.		223,059. 46		464,162.				8,671
8 Credit enhancement from proceeds												
9 Working capital expenditures from proceeds												
10 Capital expenditures from proceeds		<u></u>				5,008,316.	30,18	81,823				
11 Other spent proceeds			15,	560,009.		10,312,038.	24,48	37,629			22,17	0,000
12 Other unspent proceeds												
13 Year of substantial completion			2	010		2014	20	17			201	.7
			Yes	No	Yes	No	Yes	No		Yes	N	0
14 Were the bonds issued as part of a refunding is	ssue of tax-exempt	bonds (or,										
if issued prior to 2018, a current refunding issu	ie)?		х		Х			Х		Х		
15 Were the bonds issued as part of a refunding is	ssue of taxable bon	ids (or, if		Т								
issued prior to 2018, an advance refunding iss	ue)?			Х		x	x					Х
16 Has the final allocation of proceeds been made	e?		Х		Х		х			Х		
17 Does the organization maintain adequate book	s and records to su	pport the										
final allocation of proceeds?			х		Х		Х			Х		

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

Schedule K (Form 990) 2021

	ENTITY 2 Supplemental Information on Tax-Exempt Bonds											OMB No.	1545.00	047
SCHEDU				ed "Yes" on Form 9				tions)21	141
	of the Treasury		explanations, and	anv additional inf	ormation in	Part VI.	-	liono,)pen t	o Pub	lic
Internal Rever		Form 990. 🕨 Go	to www.irs.gov/F	Form990 for instruc	ctions and t	he latest	information.		1			nspec		_
Name of t	he organization	-								-	dentif		n num	ber
Dent	BRYN MAWR COLLEG	E PART VI FOR C	OTTIMN (E) COM	TNUMEONC						23-13	52621			
Part I					(2) 12 21				(1-) 0-	h) On behalf				
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	e price	(f) Descripti	on of purpose	(g) De	ieaseu	of is		(i) Po finan	
							Yes	No			Yes			
PA HO	GH ED FAC AT BRYN MAWR COLLEGE						CRNT REFUNDI	NG PHEFA	165	NO	Yes		162	
A SERI	ES 2019	23-2243852	70917S4X8	09/05/19	30,3	27,611.	SERIES 2010A	CAPITAL PRJ		x		x		x
					- · ·	, .								[
В														ĺ
														[
С														ĺ
D														l
Part II	Proceeds													
		Α			В	С				D				
1 Amo	ount of bonds retired			2,	,040,000.									
2 Amo	ount of bonds legally defeased													
3 Tota	al proceeds of issue			32,	,038,814.									
4 Gro	ss proceeds in reserve funds													
5 Cap	italized interest from proceeds													
6 Proc	ceeds in refunding escrows													
7 Issu	ance costs from proceeds				86,721.									
8 Cree	dit enhancement from proceeds													
	king capital expenditures from proceeds		<u></u>											
				,	,074,293.									
				22,	,877,800.									
					2022									
<u>13</u> Yea	r of substantial completion		<u></u>		2022									
44 14/			have de las	Yes	No	Yes	No	Yes	No	_	Yes	+	No	
	re the bonds issued as part of a refunding i	•		x										
-	sued prior to 2018, a current refunding issues			····· A								+		
	re the bonds issued as part of a refunding i led prior to 2018, an advance refunding iss				x									
	the final allocation of proceeds been made	_			X							+		
-	es the organization maintain adequate book											+		
	I allocation of proceeds?			x										
							1							

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

Schedule K (Form 990) 2021

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Page 2

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Schedule K (Form 990) 2021 BRYN MAWR COLLEGE

23-135262	1
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OUTIO				25 .						
Par	t III Private Business Use									
			A		B			ç		
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No)	Yes	No	$ \rightarrow $	Yes
	which owned property financed by tax-exempt bonds?		X		x			x		
2	Are there any lease arrangements that may result in private business use of									
	bond-financed property?		X		x			x	$ \rightarrow $	
3a	Are there any management or service contracts that may result in private									
	business use of bond-financed property?		Х		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?								$ \longrightarrow $	
С	Are there any research agreements that may result in private business use of									
	bond-financed property?		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		.00 %		.00	%		.00	%	
5	Enter the percentage of financed property used in a private business use as a									
	result of unrelated trade or business activity carried on by your organization,									
	another section 501(c)(3) organization, or a state or local government		.00 %		.00	%		.00	%	
6	Total of lines 4 and 5		.00 %		.00	%		.00	%	
7	Does the bond issue meet the private security or payment test?		X		X			X		
8a	Has there been a sale or disposition of any of the bond-financed property to a non-									
	governmental person other than a 501(c)(3) organization since the bonds were issued?		х		x			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									
	nongualified bonds of the issue are remediated in accordance with the									
	requirements under Regulations sections 1.141-12 and 1.145-2?	x		х			х			х
Par	t IV Arbitrage									
			A		В			с		
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	,	Yes	No		Yes
•	Penalty in Lieu of Arbitrage Rebate?		X		X			X		
2	If "No" to line 1, did the following apply?									
	Rebate not due yet?		X		X			x		Х
	Exception to rebate?	x		x	1			x		
	No rebate due?		X	1	x		X			
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		I	1	1			1		
	performed									
3	Is the bond issue a variable rate issue?		x		x			x	-+	
3	וז נווב אטווע ושטער א אמומטוב ומנכ ושטער :						1			

D

No Х

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Page 2

No

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<u>%</u>

No

BRYN MAWR COLLEGE Schedule K (Form 990) 2021

Part III Private Business Use

1 01										
			<u>A</u>		E	3		ç	!	D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No		Yes	No	Yes	No	Yes	
	which owned property financed by tax-exempt bonds?		Х							
2	Are there any lease arrangements that may result in private business use of									
	bond-financed property?		Х							
3a	Are there any management or service contracts that may result in private									
	business use of bond-financed property?		Х							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
	counsel to review any management or service contracts relating to the financed property?									
с	Are there any research agreements that may result in private business use of									
	bond-financed property?		Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other									
	outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by entities									
	other than a section 501(c)(3) organization or a state or local government		.00	%		%		%		
5	Enter the percentage of financed property used in a private business use as a									
	result of unrelated trade or business activity carried on by your organization,									
	another section 501(c)(3) organization, or a state or local government		.00	%		%		%		
6	Total of lines 4 and 5		.00	%		%		%		
7	Does the bond issue meet the private security or payment test?		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?		Х							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or									
	disposed of		_	%		%		%		
с	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations									
	sections 1.141-12 and 1.145-2?									
9	Has the organization established written procedures to ensure that all									
	nonqualified bonds of the issue are remediated in accordance with the									
	requirements under Regulations sections 1.141-12 and 1.145-2?	Х								
Par	t IV Arbitrage									
			Α		E	3		С		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No		Yes	No	Yes	No	Yes	
	Penalty in Lieu of Arbitrage Rebate?		Х							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?	Х								
	Exception to rebate?		Х							
	No rebate due?		Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was									
	performed									
										-

Х

3 Is the bond issue a variable rate issue?

1

Schedule K (Form 990) 2021 BRYN MAWR COLLEGE			23-1	L352621				Page 3
Part IV Arbitrage (continued)					-			
		Ą		В		C		2
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?	X			Х		X		X
b Name of provider	UBS INVES	STMENT BANK						
c Term of hedge		19.5000000						
d Was the hedge superintegrated?		X						
e Was the hedge terminated?	Х							
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		X		Х
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		Х
7 Has the organization established written procedures to monitor the								
requirements of section 148?	x		Х		x		х	
Part V Procedures To Undertake Corrective Action								
		Α		В		C	D	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	x		Х		x		х	
Part VI Supplemental Information. Provide additional information for responses to question	ns on Schedul	le K. See instru	ctions.			F		

2

Schedule K (Form 990) 2021 BRYN MAWR COLLEGE			23-1	352621				Page 3
Part IV Arbitrage (continued)								
	A	1	E	3		С	Γ	כ
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	х							
Part V Procedures To Undertake Corrective Action								
	A	۱	E	3		ç	C	2
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	x							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: PA HGH ED FAC AT BRYN MAWR COLLEGE SERIES 2012A								
(F) DESCRIPTION OF PURPOSE:								
CURRENT REFUND SER.2002; ISSUE COST; CPTL PROJECT								
(A) ISSUER NAME: PA HGH ED FAC AT BRYN MAWR COLLEGE SERIES 2014								
(F) DESCRIPTION OF PURPOSE:								
CPTL PROJECT; ISSUE COST; ADV.RFND SER. 2012; CAP. INT								
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: PA HGH ED FAC AT BRYN MAWR COLLEGE SERIES 2014								
DATE THE REBATE COMPUTATION WAS PERFORMED: 09/08/2017								
PART IV, LINE 2C								
PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY BRYN MAWR COLLEGE								
SERIES 2014								
ARBITRAGE REBATE CALCULATED 8/9/17; NEGATIVE ARBITRAGE AS OF 6/30/17,								
THEREFORE NO REBATE DEPOSIT NECESSARY.								
132123 10-08-21						Scl	hedule K (For	m 990) 2021

Schedule K (Form 990) 2021	BRYN MAWR COLLEGE	23-1352621	Pag
Part VI Supplemental Informati	on. Provide additional information for responses to questio	ns on Schedule K. See instructions. (continued)	
ONTGOMERY COUNTY INDUSTRIA	AL DEVELOPMENT AUTHORITY BRYN MAWR SERIES		
017			
RBITRAGE REBATE CALCULATEI	D 10/16/2017; NO REBATE LIABILITY THROUGH TH	E	
ND OF THE COMPUTATION PERI	IOD ENDING 6/1/2022.		
ENNSYLVANIA HIGHER EDUCAT	IONAL FACILITIES AUTHORITY BRYN MAWR COLLEGE		
SERIES 2019			
RBITRAGE REBATE CALCULATEI	D 11/29/21; NEGATIVE ARBITRAGE AS OF		
.0/19/21, THEREFORE NO REBA	ATE DEPOSIT NECESSARY.		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

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

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

2021 Open to Public Inspection

Name of the organization

BRYN MAWR COLLEGE

Employer	identification	number
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23-1352621

Par	tl	Types	of Property							
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	6
1	Art -	Works of a	art							
2			treasures							
3			interests							
4			blications							
5			ousehold goods							
6			vehicles							
7			ies							
8			perty							
9			blicly traded	X	81	5,125,370.	FMV			
10			sely held stock							
11			tnership, LLC, or							
••		t interests								
12			scellaneous							
13			ervation contribution -							
13		oric structu								
14			res							
		l estate - Re								
15 16										
16 17			ommercial							
17 10			ther							
18										
19			, 							
20			dical supplies							
21										
22			icts							
23			imens							
24			artifacts	37	1	0.7.7				
25			AIR PURIFIERS)	X	1	977.	FMV			
26		er 🕨 ()							
27		er 🕨 ()							
28	Othe)							
29			ms 8283 received by the organiz							
	for v	vhich the o	rganization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
	_								Yes	No
30a			r, did the organization receive b							
			t least three years from the date		l contribution, and	which isn't required to be u	sed for			
			ses for the entire holding period	?				30a		X
b		-	be the arrangement in Part II.							
31	Doe	s the orgar	nization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribu	tions?	31	X	
32a	Doe	s the orgar	nization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	cont	tributions?						32a	X	
b	lf "Y	'es," descri	be in Part II.							
33	If the	e organizat	ion didn't report an amount in c	olumn (c) foi	r a type of property	r for which column (a) is che	cked,			
	desc	cribe in Par	t II.							

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

Schedule M (Form 990) 2021

132141 11-17-21

Chedule M (Form 990) 2021 BRYN MAWR COLLEGE Part II Supplemental Information. Provide the information.	23-1352621 Page ation required by Part I, lines 30b, 32b, and 33, and whether the organization
is reporting in Part I, column (b), the number of contribu	utions, the number of items received, or a combination of both. Also complete
this part for any additional information.	· · · · · · · · · · · · · · · · · · ·
THEDULE M, PART I, COLUMN (B):	
MBER OF CONTRIBUTIONS:	
HE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIN	BUTIONS.
CHEDULE M, LINE 32B:	
HIRD PARTY ASSISTANCE OF NONCASH CONTRIBUTIONS:	
HE COLLEGE USES A BROKER TO HANDLE RECEIPT AND SAI	LE OF DONATED
ECURITIES. SALE PROCEEDS, TRANSACTIONS STATEMENTS	, AND MONTHLY REPORTS
RE SENT TO THE COLLEGE.	
2142 11-17-21	Schedule M (Form 990) 20

SCHEDULE ()
(Form 990)	

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



Employer identification number 23-1352621

BRYN MAWR COLLEGE

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

BRYN MAWR COLLEGE EDUCATES STUDENTS TO THE HIGHEST STANDARD OF

EXCELLENCE TO PREPARE THEM FOR LIVES OF PURPOSE. THE COLLEGE'S RIGOROUS

LIBERAL ARTS CURRICULUM AND DISTINGUISHED GRADUATE PROGRAMS FOSTER A

THIRST FOR KNOWLEDGE, OPEN INQUIRY, GLOBAL PERSPECTIVES, CIVIC

ENGAGEMENT, AND INNOVATION THROUGH STUDY ACROSS THE ARTS, HUMANITIES,

SCIENCES, AND SOCIAL SCIENCES. A WORLD-CLASS FACULTY OF

TEACHER-SCHOLARS, A TALENTED STAFF, AND A TIGHT-KNIT STUDENT BODY

CULTIVATE INTELLECTUAL CURIOSITY, INDEPENDENCE, PERSONAL INTEGRITY, AND

RESILIENCE IN A COMMUNITY OF PASSIONATE, JOYFUL LEARNERS.

AS A RESIDENTIAL WOMEN'S COLLEGE AT THE UNDERGRADUATE LEVEL, AND

THROUGH COEDUCATIONAL GRADUATE PROGRAMS IN ARTS AND SCIENCES, IN SOCIAL

WORK, AND IN POST-BACCALAUREATE PREMEDICAL TRAINING, BRYN MAWR IS

COMMITTED TO WOMEN'S EDUCATION AND EMPOWERMENT, TO GENDER EQUITY, AND

TO SUPPORTING ALL STUDENTS WHO CHOOSE TO PURSUE THEIR STUDIES HERE.

EQUITY AND INCLUSION SERVE AS THE ENGINE FOR EXCELLENCE AND INNOVATION.

A COMMITMENT TO RACIAL JUSTICE AND TO EQUITY ACROSS ALL ASPECTS OF

DIVERSITY PROPELS OUR STUDENTS, FACULTY, AND STAFF TO REFLECT UPON AND

WORK TO BUILD FAIR, OPEN AND WELCOMING INSTITUTIONAL STRUCTURES,

VALUES, AND CULTURE.

EMERGING FROM THEIR BRYN MAWR EXPERIENCE EQUIPPED WITH POWERFUL TOOLS

AND WITH A DEEPER UNDERSTANDING OF THE WORLD AND EACH OTHER, OUR

GRADUATES DEFINE SUCCESS ON THEIR OWN TERMS AND LIFT UP OTHERS AS THEY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 11-11-21 63 Schedule O (Form 990) 2021

10500403 153424 0175265-00002

2021.05070 BRYN MAWR COLLEGE

Name of the organization

BRYN MAWR COLLEGE

Page 2 Employer identification number 23-1352621

MAKE A MEANINGFUL DIFFERENCE IN THE WORLD.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THIS DYNAMIC COMBINATION OF THE PRACTICAL AND THE ACADEMIC HELPS SHAPE

STUDENTS' PROFESSIONAL GOALS, GIVES THEM REAL WORK EXPERIENCE, AND

PROVIDES THE PHILADELPHIA METROPOLITAN AREA WITH MUCH-NEEDED SERVICES.

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

FORM 990 WAS PREPARED BY AN EXTERNAL INDEPENDENT ACCOUNTING FIRM. FORM

990-T WAS PREPARED BY THE SAME INDEPENDENT ACCOUNTING FIRM. A COPY OF THE

DRAFT OF FORM 990 WAS REVIEWED BY MANAGEMENT AND ANY CHANGES WERE MADE. THE

AUDIT COMMITTEE REVIEWS THE FORM AND RELATED SCHEDULES AND EACH COMMITTEE

MEMBER AFFIRMS EITHER THAT THE FORMS ARE ACCEPTABLE OR THAT CHANGES ARE

NEEDED. ALL COMMITTEE MEMBERS ARE INFORMED OF THE SUBSTANTIVE CHANGES MADE

DURING THIS PROCESS AND BEFORE THE DATE OF FILING. BEFORE FORM 990 IS

FILED, THE FULL BOARD OF TRUSTEES IS PROVIDED AN OPPORTUNITY TO REVIEW THE

FINAL COPY WITH THE EXCEPTION OF SCHEDULE B, WHICH IS WITHHELD TO PRESERVE

DONOR ANONYMITY.

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

BRYN MAWR COLLEGE HAS THE FOLLOWING CONFLICT OF INTEREST POLICIES:

1-DUALITY OF INTEREST APPLICABLE TO TRUSTEES, INCLUDING ADVISORY MEMBERS OF

THE BOARD OF TRUSTEES, OFFICERS, AND KEY EMPLOYEES; 2-FINANCIAL CONFLICT

APPLICABLE TO MEMBERS OF THE TRUSTEE INVESTMENT COMMITTEE; 3-OUTSIDE

EMPLOYMENT APPLICABLE TO FACULTY STAFF; 4-ACCEPTANCE OF GIFTS APPLICABLE TO

FACULTY AND STAFF; 5-SIGNIFICANT FINANCIAL INTEREST APPLICABLE TO

RESEARCHERS AND PRINCIPAL INVESTIGATORS. ON AN ANNUAL BASIS, TRUSTEES,

OFFICERS, KEY EMPLOYEES, EMERITUS TRUSTEES AND SPECIAL ADVISORS TO THE

132212 11-11-21

Schedule O (Form 990) 2021	Page 2
Name of the organization BRYN MAWR COLLEGE	Employer identification number 23-1352621
BOARD OF TRUSTEES' COMMITTEES COMPLETE A QUESTIONNAIRE TO DISCOVER AND	
REPORT CIRCUMSTANCES WHICH MAY PRESENT A CONFLICT OF INTEREST. THE COLLEGE	
MONITORS COMPLIANCE WITH THE TRUSTEE/OFFICER CONFLICT OF INTEREST POLICY BY	
CHECKING THAT THE ANNUAL QUESTIONNAIRE IS SUBMITTED BY EACH PERSON IN A	
TIMELY BASIS TO COLLEGE COUNSEL AND BY PERIODIC REMINDERS OF THE POLICY AT	
FULL MEETINGS OF THE BOARD OF TRUSTEES. THE COLLEGE'S BY-LAWS REGARDING	
CONFLICT OF INTEREST STATE THAT ANY DUALITY ON THE PART OF ANY TRUSTEE	
SHALL BE DISCLOSED TO THE BOARD OF TRUSTEES AND MADE A MATTER OF RECORD	
THROUGH AN ANNUAL PROCEDURE AND ALSO WHEN THE INTEREST BECOMES A MATTER OF	
TRUSTEE ACTION. ANY TRUSTEE HAVING DUALITY OF INTEREST SHALL NOT VOTE OR	
USE HER OR HIS PERSONAL INFLUENCE ON THE MATTER, AND S/HE SHALL NOT BE	
COUNTED IN DETERMINING THE QUORUM FOR THE MEETING. THE MINUTES OF THE	
MEETING SHALL REFLECT THAT A DISCLOSURE WAS MADE, THE ABSTENTION FROM	
VOTING AND THE QUORUM SITUATION. ANY NEW TRUSTEE WILL BE ADVISED OF THIS	
POLICY UPON ENTERING THE DUTIES OF HER OR HIS OFFICE.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COLLEGE HAS A FORMAL PROCESS FOR DETERMINING COMPENSATION FOR THE CHIEF	
EXECUTIVE (PRESIDENT), OTHER OFFICERS, AND KEY EMPLOYEES. INDEPENDENT	
SURVEYS ARE COMMISSIONED ANNUALLY TO UPDATE APPROPRIATE MARKET DATA FOR	
EACH POSITION. THE PRESIDENT RECOMMENDS THE ANNUAL COMPENSATION FOR	
OFFICERS, AND KEY EMPLOYEES. THE EXECUTIVE COMMITTEE REVIEWS THE	
RECOMMENDATIONS AND APPROVES THE COMPENSATION AMOUNTS. THE PRESIDENT'S	
COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE. COMPENSATION	
DECISIONS ARE DOCUMENTED AND COMMUNICATED TO THE HUMAN RESOURCES OFFICE FOR	
ACTION.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
132212 11-11-21	Schedule O (Form 990) 2021

Name of the organization

BRYN MAWR COLLEGE

Page 2 Employer identification number 23-1352621

AK, CO, DC, MD, MA, MI, NV, NH, NY, OH, OK, OR, WA

FORM 990, PART VI, SECTION C, LINE 19:

THE COLLEGE MAKES IT GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES

AVAILABLE UPON REQUEST. THE COLLEGE POSTS ITS AUDITED FINANCIAL STATEMENTS

AND FORM 990 ON THE COLLEGE'S WEBSITE. FORM 990T IS AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2021

66 2021.05070 BRYN MAWR COLLEGE

132212 11-11-21

SCHEDULE R (Form 990) Related Organizations and Unrelated Partnerships Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.							
Name of the organiz	BRYN MAWR COLLEGE					Employer id 23-135	entification number 2621
Name, a	ation of Disregarded Entities. Complet (a) ddress, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year ass	ets Di	(f) rect controlling entity
		-					

(-)		Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.												
Code Public charity on status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?											
501(c)(3))		Yes	No											
С		rode Public charity Direct controlling n status (if section entity	code Public charity Direct controlling Section f n status (if section entity entity											

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

Schedule R (Form 990) 2021

OMB No. 1545-0047

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)								
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	alloca	ortionate ations?	Code V-UBI amount in box 20 of Schedule	Gener mana partn	^{Il or} Percentag ^{ing} ownershi er?								
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(state or foreign entity (C corp, S cor		(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	512(l contr	(i) ction (b)(13) trolled tity?
		country)						Yes	No
REMAINDER TRUSTS (TOTAL 25)									
C/O BRYN MAWR COLLEGE 101 N MERION AVE									
BRYN MAWR, PA 19010	CHARITABLE TRUST	PA	N/A	TRUST					х
CHARITABLE INCOME TRUSTS (TOTAL 14)									
C/O BRYN MAWR COLLEGE 101 N MERION AVE									
BRYN MAWR, PA 19010	CHARITABLE TRUST	PA	N/A	TRUST					х
CHARITABLE REMAINDER UNITRUSTS(TOTAL 15)									
C/O STATE STREET GLOBAL ADV. 1 IRON ST									
BOSTON, MA 02210	CHARITABLE TRUST	MA	N/A	TRUST					х
CHARITABLE GIFT ANNUITY FUND (TOTAL 1)									
C/O STATE STREET GLOBAL ADV. 1 IRON ST									
BOSTON, MA 02210	CHARITABLE TRUST	MA	N/A	TRUST					х
CHARITABLE POOLED INCOME FUND (TOTAL 1)									
C/O STATE STREET GLOBAL ADV. 1 IRON ST									
BOSTON, MA 02210	CHARITABLE TRUST	MA	N/A	TRUST					х

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or	(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	(h) Percentage ownership	Sec 512((i) ction (b)(13) trolled
of related organization		foreign country)	entity	or trust)	income	assets	ownersnip	ent	tity? No
CHARITABLE POOLED INCOME FUND (TOTAL 1)									
C/O STATE STREET GLOBAL ADV. 1 IRON ST									
BOSTON, MA 02210	CHARITABLE TRUST	MA	N/A	TRUST					х
·									

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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
<u>(4)</u>				
<u>(5)</u>				
(6)				

Schedule R (Form 990) 2021 BRYN MAWR COLLEGE

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(e Are partne 501(i org Yes	(f) Share of total income	(g) Share of end-of-year assets	(ř Dispr tior alloca Yes	opor- ate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes I	(k) ^{I or} Percentag ^{Ing} ownershi Io	ge ip

Schedule R (Form 990) 2021

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type of	Name of exempt organization or other filer, see in	Taxpayer identification number (TIN)							
print	BRYN MAWR COLLEGE	BRYN MAWR COLLEGE							
File by the due date f filing your return. See	Number, street, and room or suite no. If a P.O. bo 101 N MERION AVENUE	ox, see instruct	ions.	•					
instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. BRYN MAWR, PA 19010									
Enter th	e Return Code for the return that this application is fo	or (file a separat	te application for each return)				0 1		
Applica	tion	Return	Application			F	Return		
ls For		Code	Is For			(Code		
Form 9	00 or Form 990-EZ	01	Form 1041-A				08		
Form 4	720 (individual)	03	Form 4720 (other than individual)				09		
Form 99	90-PF	04	Form 5227				10		
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11		
Form 99	90-T (trust other than above)	06	Form 8870				12		
Form 99	00-T (corporation) CONTROLLER	07							
 If the If thi box > 1 the the	bohone No. ▶ 610-526-5632 e organization does not have an office or place of busics is for a Group Return, enter the organization's four or □ . If it is for part of the group, check this box ▶ request an automatic 6-month extension of time until ne organization named above. The extension is for the □ . alendar year or ■ X tax year beginning JUN 1, 2021 the tax year entered in line 1 is for less than 12 month □ Change in accounting period	ligit Group Exe	mption Number (GEN) ch a list with the names and TINs of 18, 2023 , to fil return for: d ending <u>MAY</u> 31, 2022	If this is fo f all membe	r the whole of ers the exter application organizat	group, cheo Ision is for.			
	this application is for Forms 990-PF, 990-T, 4720, or 6 ny nonrefundable credits. See instructions.	6069, enter the	tentative tax, less	3a	\$		0.		
	this application is for Forms 990-PF, 990-T, 4720, or 6	5069, enter any	refundable credits and		₩		- •		
	stimated tax payments made. Include any prior year o	-		Зb	\$		0.		
	alance due. Subtract line 3b from line 3a. Include you								
	sing EFTPS (Electronic Federal Tax Payment System).			3c	\$		0.		
	n: If you are going to make an electronic funds withdra			453-TE and	d Form 8879	-TE for pay	/ment		
LHA	For Privacy Act and Paperwork Reduction Act Not	tice, see instru	ictions.		Form 8	8868 (Rev.	1-2022)		

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