990-T		• •	oxy tax	x un	der sectio	n 6033(	(e))		_	OMB No. 1545	)-008/
	For calendar year 2013 or other tax year beginning $07/01$ , 2013, and ending $06/30$ , 20							, <b>20</b> 1	4.	201	3
	► In	formation about Form 9	90-T and	its ins	structions is avail	ilable at w	ww.irs.gov/foi	rm990t	t. –	Open to Public Ins	epection for
	► Do		1		• •				,		
address changed				ox II nar	ne changed and se	e instruction	is. <i>)</i>				
mpt under section		KENYON COLLEGE	2								
501(C)(3)		Number, street, and room o	or suite no. I	lf a P.O.	box, see instructio	ns.			-		
	Туре							E			vity code
				y, and z	IP or foreign posta	I code		-	0111	0 5 2 5	
	<b>F</b> 0							/	ZIII	0 525	1990
0 526 669		<u> </u>				501/c	) truct		01(a) t	ruct C	Other true
								4	01(a) ii		
								in?		► Yes	s X N
						Subsidialy	controlled grou	ip:			, 11 1
		, ,	•	-porau		Telephor	ne number 🕨	740	-427	-5181	
					(A) Inco					(C) Ne	et
		610,263.									
Less returns and allowa	inces	c	Balance 🕨	1c	610	),263.					
Cost of goods sol	d (Sched	ule A, line 7)		2	424	1,953.					
Gross profit. Sub	tract line	2 from line 1c		3	185	5,310.				18	35,310
Capital gain net in	ncome (a	attach Form 8949 and Sch	edule D)	4a							
Net gain (loss) (Fo	orm 4797,	Part II, line 17) (attach Form	4797)	4b							
Capital loss dedu	ction for t	rusts		4c							
. ,			,	5	-741	.,820.	ATCH	2		-74	41,82
				6							
Unrelated debt-fir	nanced in	come (Schedule E)		7							
Interest, annuities, roya	lties, and rer	nts from controlled organizations	(Schedule F)	8							
				9							
· ·	-										
					EE 6	E E 1 O				E E	
							l aductions		cont fo		
		•							eptit		15,
							/		14		
											59,67
											10,599
									19		
Charitable contrib	outions (S	See instructions for limitati	on rules.)						20		
Depreciation (atta	ach Form	4562)				21	60,2	133.			
							42,2	215.	22b	1	17,918
Depletion									23		
		compensation plans							24		
Contributions to c	deferred								25	2	23,10
Employee benefit	programs	s									
Employee benefit Excess exempt ex	program: penses (\$	s Schedule I)							26		
Employee benefit Excess exempt ex Excess readership	programs penses (\$ costs (S	s Schedule I) chedule J)		· · ·					27		
Employee benefit Excess exempt ex Excess readership Other deductions	programs penses (\$ costs (S (attach s	s Schedule I) ichedule J) ichedule)	 	· · ·	AT	ТАСНМ	ENT 3	· · ·	27 28		
Employee benefit Excess exempt ex Excess readership Other deductions Total deductions.	programs penses (\$ costs (S (attach s Add line	s Schedule I) ichedule J) ichedule) is 14 through 28	· · · · · · ·	· · · ·	AT	ТАСНМ	ENT.3	· · · ·	27 28 29		18,703
Employee benefit Excess exempt ex Excess readership Other deductions <b>Total deductions</b> . Unrelated busine	programs penses (\$ costs (S (attach s Add line ss taxab	s Schedule I) ichedule J) ichedule) is 14 through 28 ile income before net o	operating	loss	AT	TACHM tract line	ENT 3	e 13	27 28 29 30		18,703
Employee benefit Excess exempt ex Excess readership Other deductions <b>Total deductions</b> . Unrelated busine Net operating loss	programs penses (\$ costs (S (attach s Add line ss taxab s deducti	s Schedule I) ichedule J) ichedule) is 14 through 28 ile income before net o ion (limited to the amount	operating t on line 30	loss 0)	deduction. Sub	TACHM tract line	ENT.3. 29 from line	e 13	27 28 29 30 31	-67	18,70 75,21
Employee benefit Excess exempt ex Excess readership Other deductions Total deductions. Unrelated busine Net operating loss Unrelated busine	programs penses ( costs (S (attach s Add line ss taxab s deducti ss taxab	s Schedule I) Ichedule J) Ichedule) Is 14 through 28 Is income before net of Ion (limited to the amount e income before specific	operating t on line 30 deductior	loss 0) n. Subt	AT deduction. Sub ract line 31 from	TACHM tract line line 30	ENT. 3 29 from line	e 13	27 28 29 30 31 32	-67	18,701 75,211 75,211
Employee benefit Excess exempt ex Excess readership Other deductions Total deductions Unrelated busine Net operating loss Unrelated busines Specific deductio	programs penses (S costs (S (attach s Add line ss taxab s deducti ss taxabl n (Gener	s Schedule I) ichedule J) ichedule) is 14 through 28 ile income before net of ion (limited to the amount e income before specific ally \$1,000, but see line	operating t on line 30 deductior 33 instruc	loss 0) n. Subt	AT deduction. Sub ract line 31 from or exceptions.)	TACHM tract line line 30	ENT. 3	e 13	27 28 29 30 31	-67	18,701 75,211 75,211
Employee benefit Excess exempt ex Excess readership Other deductions <b>Total deductions</b> Unrelated busine Net operating loss Unrelated busine Specific deductio <b>Unrelated busine</b>	programs penses (\$ o costs (S (attach s Add line ss taxab s deducti ss taxab n (Gener <b>ess taxa</b>	s Schedule I) Ichedule J) Ichedule) Is 14 through 28 Is income before net of Ion (limited to the amount e income before specific	operating t on line 3( deductior 33 instruc ne 33 fr	loss 0) n. Subt tions fo	AT deduction. Sub ract line 31 from or exceptions.) ne 32. If line 3	TACHM tract line line 30 33 is grea	ENT. 3	e 13 e 32,	27 28 29 30 31 32 33	-67 -67	7,408 18,701 75,211 75,211 1,000
	mpt under section 501( C) (3) 408(e) 220(e) 408A 530(a) 529(a) k value of all assets nd of year 30, 526, 669. escribe the organiz uring the tax year, "Yes," enter the na te books are in card til Unrelated Gross receipts or st Less returns and allows Cost of goods sol Gross profit. Sub Capital gain net in Net gain (loss) (For Capital loss dedu Income (loss) from Rent income (Sch Unrelated debt-fin Interest, annuities, roya Investment income of a Exploited exempt Advertising incom Other income (Sch Unrelated debt-fin Interest, annuities, roya Investment income of a Exploited exempt Advertising incom Other income (Sch Unrelated debt-fin Interest, annuities, roya Investment income of a Exploited exempt Advertising incom Other income (Sch Unrelated debt-fin Interest, annuities, roya Investment income of a Exploited exempt Advertising incom Other income (Sch Unrelated debt-fin Interest, annuities, roya Investment income of a Exploited exempt Advertising incom Other income (Sch Unrelated debt-fin Interest (attach sch Taxes and license Charitable contrib Depreciation (attach Compensation of	Image: Note of the Treasury       Image: Note of the Treasury         Insert of the Treasury       Image: Note of the Treasury         Insert of the Treasury       Image: Note of the Treasury         Insert of the Treasury       Image: Note of the Treasury         Insert of the Treasury       Image: Note of the Treasury         Insert of the Treasury       Image: Note of the Treasury         State of the Treasury       Image: Note of Treasury         State of Treasury       Image: Note of Treasury         Capital Gain net income (Schedule C)       Image: Note of Treasury         Interest, annuities, royalties, and reference of Treasury       Image: Note of Treasury         Interest, annuities, royalties, and reference of Treasury       Image: Note of Treasury         Interest, annuities, royalties, and reference of Treasury       Image: Note of Treasury     <	For calendar year 2013 or other tax         Information about Form 9         Do not enter SSN numbers or         Check box if address changed         mpt under section         501 (C) (3)         408(e)       220(e)         408(a)       530(a)         529(a)         ik value of all assets and of year         F       Group exemption number (Sector)         60, 526, 669       G         G       Check organization type         escribe the organization's primary unrelated business uring the tax year, was the corporation a subsidiary         "Yes," enter the name and identifying number of the te books are in care of SHIRLEY O'BRIEN         Cost of goods sold (Schedule A, line 7)         Gross profit. Subtract line 2 from line 1c         Capital gain net income (attach Form 8949 and Sch Net gain (loss) (Form 4797, Part II, line 17) (attach Form Capital loss deduction for trusts         Income (loss) from partnerships and S corporations (attach Rent income (Schedule C)         Unrelated debt-financed income (Schedule E)         Interest, annuities, royalties, and rents from controlled organization ( Exploited exempt activity income (Schedule I)         Advertising income (Sce instructions; attach schedule.), Total. Combine lines 3 through 12.         Compensation of officers, directors, and trustees (Sc Salaries and wages         Repairs and maintenance	For calendar year 2013 or other tax year begin         See         Information about Form 990-T and         Check box if         address changed         mpt under section         501 (C) (3)         408(e)       220(e)         5330(a)         529(a)         k value of all assets         nd of year         For calendar year 2013 or other tax year begin         Name of organization (C) (C 3)         405,526,669         For cup exemption number (See instruct GAMB LER, OH 43022         For cup exemption number (See instruct G Check organization type )         X sorther the name and identifying number of the parent co the books are in care of > SHIRLEY O'BRIEN         Image: Cost of goods sold (Schedule A, line 7)         Cost of goods sold (Schedule A, line 7)         Capital gain net income (attach Form 8949 and Schedule D)         Net gain (loss) (form 4797, Part II, line 17) (attach Form 4797).         Capital loss deduction for trusts         Income (Schedule C)         Unrelated debt-financed income (Schedule E)         Interest, annuities, royalties, and rents from controlled organization (Schedule F)         Investment income (Schedule C)         Unrelated debt-financed income (Schedule E)         Interest, anuities, royalties, and rents from controlled	For calendar year 2013 or other tax year beginning	For calendar year 2013 or other tax year beginning	For calendar year 2013 or other tax year beginning07/01_2013, and endi         See separate instructions.         Information about Form 990-F and its instructions.         Denot enter SSN numbers on this form as it may be made public if your organdress changed         mpt under section         501(C)(3)         608(e)         230(a)         KexINVON COLLEGE         Number, street, and room or suite no. If a P.O. box, see instructions.         609(a)         2530(a)         60 year         10, 526, 669.         C Check boxil in ame of all assets and organization type         10, 526, 669.         C Check organization sprimary unrelated business activity.         Yes., "enter the name and identifying number of the parent corporation.         Yes., "enter the name and identifying number of the parent corporation.         Yes., "enter the name and identifying number of the parent corporation.         Cost of goods sold (Schedule A, line 7).         2 4224,953.         Gross profit. Subtract line 2 from line 1c.         Cost of goods sold (Schedule A, line 7).         2 4224,953.         Gross profit. Subtract line 2 from line 1c.         Cost of goods sold (Schedule A, line 7).         Vet gain (loss) (Form 4797, Part II, line 17) (attach Form 4797).         4b <td>For calendar year 2013 or other tax year beginning_07/01, 2013, and ending       06/30         ment of the Tessury Revenue Service address changed mpt under section 501(C) (2)       &gt; Information about Form 990-T and its instructions is available at www.rsp.cow/Ro address changed mpt under section 501(C) (2)       Name of organization (C)       Check box if name changed and see instructions.)         Mode 0408A       2020(e) 0408A       Solid 503(a)       Name of organization (C)       Check box if name changed and see instructions.)         Mode 0408A       Solid 503(a)       For coup exemption numbers on this forganization scripte       Name of organization scripte       Name of organization provide         Value       Color of all assets nod of year       For coup exemption number (See instructions.)       Name of organization hype       X         10, 526, 659.       Gorbeck organization hype       X       Solid (C) corporation       Solid(C) trust         10, 526, 659.       Gorbeck organization hype       X       Solid(C) corporation.       Name of the parent corporation.         10       Solid (Schedule A, line 7)       X       Solid(C) corporation       Solid(C) trust         10       Solid (Schedule A, line 7)       Balance       10       610, 263.         10       Cost of goods sold (Schedule A, line 7)       44       10       10         10       Cost of goods sold (Schedule A, line 7)<td>For calendar year 2013 or other tax year beginning 07/01, 2013, and ending 06/30, 201         Merevue Service         Information about Form 990-T and its instructions is available at www.rsg.gov/orm9900         Index to xit         address changed         mpt under section         501 (C )(3)         Otak to xit         address changed         private         S20(a)         220(a)         Aga (a 30)(a)         Point         Name of organization (i C heck box if name changed and see instructions.)         Point         Value (a)         220(a)         S29(a)         V value of all assets         F       Group exemption number (See instructions.)         City or town, state or province, country, and ZIP or foreign postal code         GAMBLER, OH 43022         G Check organization is primary unrelated business activity.         Again (b)         City or town, state or province, country, and ZIP or foreign postal code         G Check organization type ▶ X 501(c) corporation         Solic (c) trust       4         Again (b)       ATTACHMENT 1         uring the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?         Yes, "inter the nam</td><td>For calendar year 2013 or other tax year beginning07/01_2013, and ending06/30_2014.      </td><td>For calendar year 2013 or other tax year reginning</td></td>	For calendar year 2013 or other tax year beginning_07/01, 2013, and ending       06/30         ment of the Tessury Revenue Service address changed mpt under section 501(C) (2)       > Information about Form 990-T and its instructions is available at www.rsp.cow/Ro address changed mpt under section 501(C) (2)       Name of organization (C)       Check box if name changed and see instructions.)         Mode 0408A       2020(e) 0408A       Solid 503(a)       Name of organization (C)       Check box if name changed and see instructions.)         Mode 0408A       Solid 503(a)       For coup exemption numbers on this forganization scripte       Name of organization scripte       Name of organization provide         Value       Color of all assets nod of year       For coup exemption number (See instructions.)       Name of organization hype       X         10, 526, 659.       Gorbeck organization hype       X       Solid (C) corporation       Solid(C) trust         10, 526, 659.       Gorbeck organization hype       X       Solid(C) corporation.       Name of the parent corporation.         10       Solid (Schedule A, line 7)       X       Solid(C) corporation       Solid(C) trust         10       Solid (Schedule A, line 7)       Balance       10       610, 263.         10       Cost of goods sold (Schedule A, line 7)       44       10       10         10       Cost of goods sold (Schedule A, line 7) <td>For calendar year 2013 or other tax year beginning 07/01, 2013, and ending 06/30, 201         Merevue Service         Information about Form 990-T and its instructions is available at www.rsg.gov/orm9900         Index to xit         address changed         mpt under section         501 (C )(3)         Otak to xit         address changed         private         S20(a)         220(a)         Aga (a 30)(a)         Point         Name of organization (i C heck box if name changed and see instructions.)         Point         Value (a)         220(a)         S29(a)         V value of all assets         F       Group exemption number (See instructions.)         City or town, state or province, country, and ZIP or foreign postal code         GAMBLER, OH 43022         G Check organization is primary unrelated business activity.         Again (b)         City or town, state or province, country, and ZIP or foreign postal code         G Check organization type ▶ X 501(c) corporation         Solic (c) trust       4         Again (b)       ATTACHMENT 1         uring the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?         Yes, "inter the nam</td> <td>For calendar year 2013 or other tax year beginning07/01_2013, and ending06/30_2014.      </td> <td>For calendar year 2013 or other tax year reginning</td>	For calendar year 2013 or other tax year beginning 07/01, 2013, and ending 06/30, 201         Merevue Service         Information about Form 990-T and its instructions is available at www.rsg.gov/orm9900         Index to xit         address changed         mpt under section         501 (C )(3)         Otak to xit         address changed         private         S20(a)         220(a)         Aga (a 30)(a)         Point         Name of organization (i C heck box if name changed and see instructions.)         Point         Value (a)         220(a)         S29(a)         V value of all assets         F       Group exemption number (See instructions.)         City or town, state or province, country, and ZIP or foreign postal code         GAMBLER, OH 43022         G Check organization is primary unrelated business activity.         Again (b)         City or town, state or province, country, and ZIP or foreign postal code         G Check organization type ▶ X 501(c) corporation         Solic (c) trust       4         Again (b)       ATTACHMENT 1         uring the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?         Yes, "inter the nam	For calendar year 2013 or other tax year beginning07/01_2013, and ending06/30_2014.	For calendar year 2013 or other tax year reginning

Form	990-T (20	13) KENYON COLLEGE	31-	4379507	Page <b>2</b>
Par	t III	Tax Computation			
35	Organi	zations Taxable as Corporations. See instructions for tax computation. Controlled group			
	-	s (sections 1561 and 1563) check here  See instructions and:			
а		our share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):			
	(1) \$	(2) \$ (3) \$			
h		ganization's share of: (1) Additional 5% tax (not more than \$11,750)			
		tional 3% tax (not more than \$100,000)	1		
•		tax on the amount on line 34	35c		
с 36	Trusts	<b>Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on	350		
		bunt on line 34 from: Tax rate schedule or Schedule D (Form 1041)	26		
37			37		
38 39		ive minimum tax dd lines 37 and 38 to line 35c or 36, whichever applies	38		
			39		
		Tax and Payments			
40 a	•	tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a	-		
		redits (see instructions)	-		
		business credit. Attach Form 3800 (see instructions) 40c	-		
		or prior year minimum tax (attach Form 8801 or 8827)	-		
е		edits. Add lines 40a through 40d	40e		
41		t line 40e from line 39	41		
42	Other ta	xes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .	42		
43	Total ta	<b>x</b> . Add lines 41 and 42	43		(
44 a	Paymer	ts: A 2012 overpayment credited to 2013			
b	2013 es	timated tax payments			
с	Tax dep	osited with Form 8868			
d	Foreign	organizations: Tax paid or withheld at source (see instructions) 44d			
е	Backup	withholding (see instructions)			
f	Credit f	or small employer health insurance premiums (Attach Form 8941) 44f			
g	Other c	redits and payments: Form 2439			
	F	orm 4136 Other Total ► 44g			
45	Total p	ayments. Add lines 44a through 44g	45		
46	-	ed tax penalty (see instructions). Check if Form 2220 is attached	46		
47		. If line 45 is less than the total of lines 43 and 46, enter amount owed	47		
48		yment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48		
49		e amount of line 48 you want: Credited to 2014 estimated tax			
Par	t V	Statements Regarding Certain Activities and Other Information (see instruction	is)		
1		ime during the 2013 calendar year, did the organization have an interest in or a signature or other authorit		a financial	Yes No
		(bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1,			
		d Financial Accounts. If YES, enter the name of the foreign country here FINGLAND, ITALY	•	0	Х
2		he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ian trus	t?	Х
	-	ee instructions for other forms the organization may have to file.	5		
3	,	e amount of tax-exempt interest received or accrued during the tax year <b>&gt;</b> \$			
		A - Cost of Goods Sold. Enter method of inventory valuation			
1		ry at beginning of year 1 6 Inventory at end of year	6		
2	Purchas				
3		labor			
		al section 263A costs Part I, line 2	7	2	124,953.
τa		schedule) 4a 8 Do the rules of section 263A (w			Yes No
b		osts (attach schedule) 4b** 424,953. property produced or acquired for		•	100 110
5		dd lines 1 through 4b5424,953.propertyproducedoracquiredfor			X
<u> </u>		penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best	of my kr	owledge and h	
Siar	correc	t, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	,		,
Sigr				IRS discuss	
Her				preparer sh ions)? X Ye	
	Jugit	Print/Type preparer's signature Date		PTIN	s No
Paid		Check		t	
Prep			employed		26559
	Only			34-067	
	-	Firm's address ▶ 1111 SUPERIOR AVENUE, SUITE 700 Phon	e no.	216-36	
	* 7	ATCH 4 CLEVELAND, OH 44114		Form 9	<b>90-T</b> (2013)

Page 3

### Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

#### 1. Description of property

(1)			
(2)			
(3)			
(4)			

(4)										
	2. Rent receive	d or accru	ed							
(a) From personal property (if the for personal property is more the more than 50%)	nan 10% but not	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)										
(2)										
(3)										
(4)										
Total	Fotal									
(c) Total income. Add totals of c here and on page 1, Part I, line 6					<ul> <li>(b) Total deductions.</li> <li>Enter here and on page 1,</li> <li>Part I, line 6, column (B) ►</li> </ul>					
Schedule E - Unrelated D	ebt-Financed Inc	come (se	ee instructions)							
1. Description of del		2. Gross income from allocable to debt-financ				ced propert	у			
·			property			line depreciation h schedule)		Other deductions attach schedule)		
<u>(1)</u>										
(2)										
(3)										
(4)										
<ul> <li>4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> <li>5. Average adjusted ba of or allocable to debt-financed property (attach schedule)</li> </ul>			6. Column 4 divided by column 5			come reportable 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)				%						
(2)				%						
(3)			%							
(4)			%							
Totals					Part I, line	and on page 1, 7, column (A).		ere and on page 1, line 7, column (B).		
Total dividends-received deduct Schedule F - Interest, And		s and P	ents From Control	 Ilad	Organizat	ions (soo instru	uctions)			
Schedule i - Interest, An			xempt Controlled Org							
1. Name of controlled organization	2. Employer identification numl	ber	3. Net unrelated income (loss) (see instructions)	<b>4</b> . T	otal of specified	<b>5.</b> Part of column included in the organization's groups and the second	controlling	6. Deductions directly connected with income in column 5		
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organ	nizations									
7. Taxable Income	8. Net unrelated i (loss) (see instruc		9. Total of specifie payments made		includ	art of column 9 that is ded in the controlling zation's gross income	cor	11. Deductions directly connected with income in column 10		
(1)										
(2)										
(3)										
(4)										

Add columns 6 and 11.

Enter here and on page 1,

Part I, line 8, column (B).

Add columns 5 and 10.

Enter here and on page 1,

Part I, line 8, column (A).

►

Totals

Form 990-T (2013)	KENYON C	COLLEGE						31-4	379507	Page 4
Schedule G - Investment In	ncome of a Sec	ction 501(c	)(7),	(9), or (17) Orga	nizat	<b>ion</b> (see inst	ruct	ions)		
1. Description of income	2. Amount o	fincome	income 3. Deductions directly connected (attach schedule)				t-asido scheo		<ol> <li>Total de and set-asic plus co</li> </ol>	des (col. 3
(1)										
<u>(</u> 2)										
<u>(</u> 3)										
<u>(4)</u>										
								Enter here an Part I, line 9,		
Totals										
Schedule I - Exploited Exe	empt Activity In	come, Othe	er Th		com	<b>e</b> (see instru	ctior	ns)		
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income		4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	fror is	Gross income n activity that not unrelated iness income <b>6.</b> Expenses attributable to column 5		ttributable to	expe (column column more	ss exempt enses n 6 minus 5, but not e than mn 4).
(1)										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col.	tl,						on p	nere and age 1, , line 26.
Totals										
Schedule J - Advertising In				idated Decia						
Part I Income From Per	Iodicals Report	ted on a Co	nsoi	laated Basis						
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs		<ol> <li>Advertising gain or (loss) (col.</li> <li>2 minus col. 3). If a gain, compute cols. 5 through 7.</li> </ol>	5. Circulation income		6. Readership costs		costs ( minus co not me	s readership column 6 lumn 5, but ore than mn 4).
(1)										
(2)				-					-	
(3)				-						
(4)				-						
Totals (carry to Part II, line (5))         Part II         Income From Pe         2 through 7 on a I	riodicals Repo	rted on a S s.)	Бера	rate Basis (For e	each	periodical I	iste	d in Part	II, fill in c	columns
1. Name of periodical	2. Gross advertising income	<b>3.</b> Direct advertising c		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		. Readership costs	costs ( minus co not me	s readership column 6 lumn 5, but ore than mn 4).		
(1)										
<u>(1)</u> (2)									+	
<u>(3)</u>									+	
(4)									+	
Totals from Part I					1					
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Pa line 11, col.	rt I	-					on p	here and bage 1, I, line 27.
Totals, Part II (lines 1-5)										
Schedule K - Compensatio	on of Officers, D	)irectors, a	nd Tr	<b>ustees</b> (see instru	uction	s)				
1. Name				2. Title		<ol> <li>Percent of time devoted t business</li> </ol>			ensation attrib	
(1)							%			
(2)							%			
(3)							%			
(4)							%			
Total. Enter here and on page 1, P	art II, line 14	<u> </u>		<u></u> .		<u></u>	. ►			
JSA									Form <b>99</b>	<b>0-T</b> (2013)

Form **4562** 

# Depreciation and Amortization

Forr	(Including Information on Listed Property)							2013		
	rtment of the Treasury al Revenue Service (99)	► s	See separate instruc	tions.	► Atta	ach to ye	our ta	ix return.		Attachment Sequence No. <b>179</b>
Nam	e(s) shown on return	•	-	Bus	iness or activ	vity to whi	Identifying number			
KE	NYON COLLEGE			UN	IRELATEI	D BUS	INES	SS ACTIVI	TIES	31-4379507
Pa	rt Election To	Expense Ce	rtain Property U	nder Secti	on 179					
	Note: If you	have any list	ed property, com	nplete Part	V before	you co	omple	ete Part I.		
1	Maximum amount (se								1	0.00
2	Total cost of section	179 property pla	ced in service (see in	structions)					2	
3	Threshold cost of see					ns)			3	
4 5	Reduction in limitation Dollar limitation for tax yea	on. Subtract line 3	3 from line 2. If zero o	or less, enter -	0-				4	
	separately, see instructions			-o Il mamed ming					5	
6		(a) Description of	of property		(b) Cost (bu	isiness us	e only	(c) Electe	ed cost	-
										-
	Listed successful Factor		- lin - 00				-			-
7	Listed property. Ente						7			-
8 9	Total elected cost of									
9 10	Tentative deduction. Carryover of disallow	ed deduction fro	m line 13 of your 20	12 Eorm 4562	••••	• • • •	• • •	• • • • • • •	9	
11	Business income limit									
12	Section 179 expense					,			· · ·	
13	Carryover of disallow						13			
	e: Do not use Part II or					-				
			llowance and Ot			o not ir	nclud	e listed prope	rty.) (See	instructions.)
14	Special depreciation	n allowance for	r qualified property	y (other tha	an listed	property	) pla	iced in servic	e	
	during the tax year (se	ee instructions)					· · ·		14	
15	Property subject to se									
16	Other depreciation (in	ncluding ACRS)							16	60,133.00
Pa	rt III MACRS De									
	Section A									
17	MACRS deductions f	or assets placed	l in service in tax yea	rs beginning b	pefore 2013				17	
18	If you are electing		•	-	-				al	
	asset accounts, check									
	Secti	on B - Assets	Placed in Service (b) Month and year	(c) Basis for		<b>-</b>	-	General Dep	reclation S	ystem
	(a) Classification of	property	placed in service	(business/inv only - see in	vestment use	(d) Reco perio		(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property									
b	5-year property									
	7-year property									
	10-year property									
	15-year property									
	20-year property					05	-		0/1	
	25-year property					25 yr			S/L	
h	Residential rental					27.5 y		MM	S/L	
	property					27.5 y		MM	S/L S/L	
i	Nonresidential real					39 yr	5.	MM	S/L S/L	
	property	n C - Assats Pl	laced in Service D	Juring 2013	Tay Voar	lleinat	the A			System
20a	Class life	10 - A33013 1							S/L	
	12-year					12 yr	s.		S/L	
	40-year					40 yr		MM	S/L	
-	rt IV Summary	(See instruction	ons.)				I		1	l
21			,				_		21	
	Total. Add amounts							line 21. Enter	•••	
	and on the appropriat		-							60,133.00
23	For assets shown a									
	portion of the basis a	attributable to see	ction 263A costs				23			

For Paperwork Reduction Act Notice, see separate instructions.

OMB No. 1545-0172

-	n 4562 (201	,	mentu (kaluda	outomob	ilee	oortoin	oth		ioloo	oortoir		outoro			rth ( ) UO	Page 2
Pa			perty (Include ent, recreation, o			cenain	oth	ier ven	icies	, centair	i com	buters,	and	prope	ny use	
	No	ote: For a	ny vehicle for wh	ich you ai	e usin	g the s	tanda	ard milea	age ra	ate or de	ducting	lease	expense	ə, comp	olete <b>or</b>	<b>ily</b> 24a
			s (a) through (c) of Depreciation and								limite fo	rnasso	ngor au	utomobili	<u></u>	
24a			e to support the busi					Yes	No	24b If "					Yes	No
	(a)		(b)	(c)		olaintea		(e)		(f)		g)		(h)	(i	
	Type of pro		Date placed	Business/	Cost	(d) or other b		Basis for dep				:hod/		eciation	Elected	section
	vehicles	first)	in service	investment u percentage	se			business/in) use on		t period	Conv	rention	ded	uction	179	cost
25	Special	depreciatio	on allowance for	qualified lis	sted pr	operty	place	ed in sei	vice	during						
	the tax y	ear and us	ed more than 50%	in a qualifi	ied bus	iness us	se (se	e instruc	tions)	)		. 25				
26	Property	used mor	e than 50% in a qι	ualified busi	ness us	e:										
					%											
					%											
					%											
27	Property	used 50%	or less in a qualifi	ed busines	s use:											
					%						S/L -				_	
					%						S/L -				_	
					%						S/L -				_	
28	Add amo	ounts in col	umn (h), lines 25 t	through 27	. Enter	here a	nd on	line 21,	page	1		28				
29	Add amo	ounts in col	umn (i), line 26. E											. 29		
										ehicles						
Con	nplete this	section for	r vehicles used by swer the questions in	a sole prop Soction C t	orietor,	partner,	or ot	her "mor	e tha	n 5% own ploting this	er," or r	elated p	person.	lf you p	rovided	vehicles
10 y		ees, mst and		Section C (	1						-		T .			n
						a) icle 1	v v	(b) ehicle 2	, I	<b>(c)</b> Vehicle 3	-	d) icle 4		( <b>e)</b> nicle 5	Vehi	f) cle 6
30	Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)															
~ 1		•	0	,					_							
		-	iles driven during													
32			,	mmuting)												
22			a during the u													
33			n during the ye			0		C		0		0		0		0
24		0	available for		Yes	No	Yes		Ye		Yes	No	Yes	No	Yes	No
34			hours?	•	100		100			.0 110	100		100		100	
35			used primarily by													
55			elated person?													
36			e available for											-		
00	•			-												
			ction C - Questio		nplove	rs Who	Pro	vide Ve	hicle	s for Us	e by Th	eir Em	nlove	es	<u> </u>	
Ans	swer thes		s to determine if								-				who <b>are</b>	not
		•	r related persons (										.,			
37	Do γου	maintain a	a written policy s	tatement i	that nr	ohihits	all ne	ersonal		of vehicles	s inclu	dina co	mmutir	na hv	Yes	No
-	•				•							•		• •		
38	Do you	maintain a	a written policy s	statement	that pr	ohibits	perso	onal use	of v	ehicles, e	except of	commu	ting, by	y your		
	employe	es? See th	e instructions for v	ehicles us	ed by c	orporat	e offic	cers, dire	ctors	, or 1% or	more o	wners				
39			e of vehicles by em													
40			ore than five vel				s, ob	otain info	ormat	ion from	your er	mployee	es abo	ut the		
	use of th	e vehicles,	and retain the info	ormation re	eceived	?										
41			quirements conce													
_		-	er to 37, 38, 39, 4	0, or 41 is	"Yes," c	lo not c	omple	ete Sectio	on B f	or the cov	ered vel	hicles.				
Pa	rt VI A	mortizati	on									1				
		(a)		(b)			(	(c)		(d)		(e Amorti			(f)	
		Description o	f costs	Date amor begin		Ar		ble amount		Code s		perio		Amortiza	ation for th	nis year
40	A	then all a		, , , , , , , , , , , , , , , , , , ,			! .	4				percer	ntage			
42	Amortiza	ation of cos	ts that begins duri	ng your 20	13 tax	year (se	e ins	tructions	5): 							
42	Amorti-	tion of or -	to that haven haf		12 +	Voor										
43 44			ts that began befo in column (f). Se	-		-	ro to	report	• • •			• • • •	43			
			, in column (i). Se		10110115	ion write		ispoit_					44			

ATTACHMENT 1

# ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY.

HOTEL, SUMMER SPORTS CAMPS, CONFERENCES, AND INVESTMENTS IN PARTNERSHIPS THAT GENERATE UNRELATED BUSINESS INCOME

31-4379507

ATTACHMENT 2

# FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

ABS CAPITAL PARTNERS V, LP	-2,819.
ABS CAPITAL PARTNERS VI, LP	-12,489.
ADAMAS PARTNERS, LP	9,224.
AMBERBROOK VI, LLC	-796.
CHESAPEAKE INV III, LP	29,115.
ARCLIGHT ENERGY PARTNERS FUND V, LP	-33,294.
	244.
COLLER INTL PARTNERS V-A, LP	
DCP MIDSTREAM PARTNERS, LP	-12,326.
BUCKEYE PARTNERS, LP	-7,987.
BOARDWALK PIPELINE PARTNERS, LP	-10,784.
ACCESS MIDSTREAM PARTNERS, LP	-14,947.
LUBERT-ADLER REAL EST FUND VI, LP	-8,742.
LUBERT-ADLER REAL EST FUND VI-A, LP	-1,583.
MADISON DEARBORN CAP PARTNERS IV, LP	-22,246.
MADISON DEARBORN CAP PARTNERS V-B, LP	4,841.
CRESTWOOD MIDSTREAM PARTNERS, LP	-9,341.
METROPOLITAN REAL EST PARTNERS V, LP	48,572.
OVP VENTURE PARTNERS VI, LP	-44,431.
PAUL CAPITAL PARTNERS IX, LP	9,347.
PINNACLE NATURAL RESOURCES, LP	1,644.
ROCKBRIDGE REAL EST FUND III, LLC	93,735.
ROCKBRIDGE HOSPITALITY FUND IV, LP	-121,735.
SIGULER GULF DIST. OPP. FUND II(E), LP	-77.
VERDIS REAL ASSETS FUND, LP	88,408.
WALDEN VC II, LP	-27.
WESTON PRESIDIO V, LP	151,356.
YORKTOWN ENERGY PARTNERS VII, LP	4,609.
YORKTOWN ENERGY PARTNERS VII, LP	-118,065.
YORKTOWN ENERGY PARTNERS IX, LP	-279,668.
EL PASO PIPELINE PARTNERS, LP	-25,986.
ENERGY TRANSFER EQUITY, LP	-62,207.
ENTERPRISE PRODUCTS PARTNERS, LP	-69,138.
ADAMAS OPPORTUNITIES	58,158.
MAGELLAN MIDSTREAM PARTNERS, LP	-2,370.
ATLAS PIPELINE PARTNERS, LP	-23,815.
NUSTAR ENERGY, LP	-12,102.
PLAINS ALL AMERICAN PIPELINE, LP	-3,434.
POST LIMITED TERM HIGH YIELD FUND, LP	4,712.
POST LIMITED TERM HIGH YIELD FUND, LP	1,278.
PRIVATE ADVISORS SMALL CO. BUYOUT FUND IV	-12,706.
REGENCY ENERGY PARTNERS, LP	-104,449.
SPECTRA ENERGY PARTNERS, LP	-35,168.
TC PIPELINES, LP	-10,970.
CHV PARTNERS FUND III, LP	-11,675.
WESTERN GAS PARTNERS, LP	-13,335.
WILLIAMS PARTNERS, LP	-17,207.
	,

ATTACHMENT 2 (CONT'D)

COMMONFUND CAP.NAT.RSCS.PARTNERS VI, LP	11,503. 329.
MADISON DEARBORN CAP PARTNERS VI-B, LP	-62,736.
MARKWEST ENERGY PARTNERS, LP	
PAA NATURAL GAS STORAGE, LP	-7,680.
SUMMIT MIDSTREAM PARTNERS, LP	-21,073.
SUNOCO LOGISTICS PARTNERS, LP	2,216.
CEREP III, LP	-13,536.
ENDOWMENT VENTURE PARTNERS V, LP	536.
HEADLANDS CA.SECONDARY FUND, LP	-36.
JEN IV LP	57,271.
MIDCOAST ENERGY PARTNERS, LP	-26,787.
QEP MIDSTREAM PARTNERS, LP	-2,879.
ROCKBRIDGE HOSPITALITY FUND VI, LP	-48,331.
SIGULER GUFF DIST.REAL EST.OPP.FUND, LP	149.
SIGULER GUFF SMALL BUYOUT OPP.FUND II(T),LP	-9,775.
YORKTOWN ENERGY PARTNERS X, LP	-20,315.

INCOME (LOSS) FROM PARTNERSHIPS

-741,820.

ATTACHMENT 3

# FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

UTILITIES	6,028.
MISCELLANEOUS	1,380.
PART II - LINE 28 - OTHER DEDUCTIONS	7,408.

ATTACHMENT 4

# FORM 990T - SCHEDULE A - LINE 4B - OTHER COSTS

FOOD SERVICES	246,601.
INSURANCE	135.
KENYON INN - DEPRECIATION	42,215.
KENYON INN EXPENSES	43,336.
TRAVEL	1,177.
REAL ESTATE TAXES	26,543.
PRINTING AND SUPPLIES	7,821.
MAINTENANCE	57,125.
TOTAL OTHER COSTS	424,953.