

Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

# 2024

Open to Public Inspection

**A** For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization CARLETON COLLEGE		<b>D</b> Employer identification number 41-0694747	
	Doing business as			
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number 507-222-4000	
	ONE NORTH COLLEGE STREET			
City or town, state or province, country, and ZIP or foreign postal code NORTHFIELD, MN 55057		<b>G</b> Gross receipts \$ 299,525,564.		
<b>F</b> Name and address of principal officer: ALISON BYERLY SAME AS C ABOVE		<b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527		<b>H(b)</b> Are all subordinates included? Yes No		
<b>J</b> Website: WWW.CARLETON.EDU		<b>H(c)</b> Group exemption number		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other		<b>L</b> Year of formation: 1866	<b>M</b> State of legal domicile: MN	

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: TO PROVIDE AN EXCEPTIONAL UNDERGRADUATE LIBERAL ARTS EDUCATION.		
	<b>2</b> Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	34
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	33
	<b>5</b> Total number of individuals employed in calendar year 2024 (Part V, line 2a)	<b>5</b>	3072
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	2985
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	10,021,095.
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	8,853,892.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	44,938,663.	41,295,400.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	162,175,452.	176,373,737.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	69,326,331.	94,470,570.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,514,248.	2,942,705.
		278,954,694.	315,082,412.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	62,022,954.	69,812,098.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	105,153,850.	107,438,913.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	6,929,184.	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	86,815,637.	83,987,779.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	253,992,441.	261,238,790.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	24,962,253.	53,843,622.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	1,883,994,794.	1,992,369,854.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	230,515,234.	222,014,718.
	1,653,479,560.	1,770,355,136.	

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of Officer <i>Eric Runestad</i>	Date 4/8/2026			
	Signature of Officer ERIC RUNESTAD, VP & TREASURER	Date			
<b>Paid Preparer Use Only</b>	Preparer's name SARAH HINTZ	Preparer's signature SARAH HINTZ	Date 04/10/26	Check if self-employed <input type="checkbox"/>	PTIN P00492291
	Firm's name CLIFTONLARSONALLEN LLP	Firm's EIN 41-0746749	Phone no. 719-635-0330		
Firm's address 121 SOUTH TEJON STREET, SUITE 1100 COLORADO SPRINGS, CO 80903					

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

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 prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 147,592,843. including grants of \$ 68,060,091. ) (Revenue \$ 144,128,029. ) INSTRUCTION - CARLETON COLLEGE EXISTS TO PROVIDE AN EXCEPTIONAL LIBERAL ARTS EDUCATION FOR STUDENTS, PREPARING THEM FOR LEADERSHIP IN THEIR COMMUNITIES, COUNTRIES AND THE WORLD (2,086 STUDENTS). A STUDENT - FACULTY RATIO OF 8:1 SUPPORTS CLASSROOM, LABORATORY, OFF-CAMPUS STUDY AND RESEARCH OPPORTUNITIES, AVERAGE CLASS SIZE IS 16, STUDENT FINANCIAL AID PROGRAMS - CARLETON MEETS 100% OF THE DEMONSTRATED FINANCIAL NEED OF ALL ADMITTED STUDENTS (1,165 STUDENTS).

4b (Code: ) (Expenses \$ 29,964,970. including grants of \$ 1,085,000. ) (Revenue \$ 0. ) ACADEMIC SUPPORT - PROGRAMS TO ENHANCE THE CARLETON LIBERAL ARTS EXPERIENCE WITH LIBRARY AND INFORMATION TECHNOLOGY RESOURCES (2,086 STUDENTS).

4c (Code: ) (Expenses \$ 23,938,761. including grants of \$ 0. ) (Revenue \$ 0. ) STUDENT SERVICES PROGRAMS - PROGRAMS DESIGNED TO SUPPORT THE RESIDENTIAL CARLETON COLLEGE STUDENT LIFE EXPERIENCE INCLUDING CO-CURRICULAR AND RECREATIONAL OPPORTUNITIES (2,086 STUDENTS).

4d Other program services (Describe on Schedule O.) (Expenses \$ 30,587,359. including grants of \$ 667,007. ) (Revenue \$ 32,245,708. )

4e Total program service expenses 232,083,933.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	X	
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....	X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	X	
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions .....		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		X
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....	X	
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	X	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (34), 1b (33), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, MN, NH, WA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - 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) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KELSEY DESHLER CHIEF INVESTMENT OFFICER	60.00				X		925,537.	0.	72,079.	
(2) ALISON BYERLY PRESIDENT	60.00	X		X			736,099.	0.	127,105.	
(3) TIMOTHY GRIFFETH DIRECTOR OF INVESTMENTS	60.00					X	508,373.	0.	68,478.	
(4) ERIC RUNESTAD VP AND TREASURER	60.00			X			368,659.	0.	67,432.	
(5) MICHELLE MATTSON PROVOST & VP OF ACADEMIC AFFAIRS	60.00			X			326,550.	0.	45,614.	
(6) CAROLYN H. LIVINGSTON VP FOR STUDENT LIFE & DEAN OF STUDEN	60.00				X		249,000.	0.	107,582.	
(7) ART D. RODRIGUEZ VP & DEAN OF ADMISSIONS & FINANCIAL	60.00				X		278,981.	0.	64,956.	
(8) DAREN BATKE VP OF DEVELOPMENT & ALUMNI RELATIONS	60.00			X			304,142.	0.	39,097.	
(9) MICHAEL T HEMESATH PROFESSOR OF ECONOMICS	60.00					X	243,861.	0.	59,375.	
(10) ELISE ESLINGER CHIEF OF STAFF	60.00					X	234,323.	0.	59,463.	
(11) JULIE J NEIWORTH PROFESSOR OF PSYCHOLOGY	60.00					X	236,697.	0.	29,311.	
(12) JEFF DSIDA ASSOCIATE DIRECTOR OF INVESTMENTS	60.00					X	227,426.	0.	28,624.	
(13) DAN RUSTAD VP OF EXTERNAL RELATIONS (INTERIM)	60.00			X			200,352.	0.	53,986.	
(14) STEVEN G. POSKANZER PRESIDENT (FORMER)	60.00					X	191,161.	0.	45,618.	
(15) GRETCHEN E HOFMEISTER DEAN OF THE COLLEGE INTERIM (FORMER)	60.00					X	167,347.	0.	42,792.	
(16) CATHY PAGLIA TRUSTEE CHAIR	8.00	X		X			0.	0.	0.	
(17) JENINNE MCGEE TRUSTEE VICE CHAIR	8.00	X		X			0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOHN HARRIS SECRETARY	8.00	X		X				0.	0.	0.
(19) GREG AMUSU TRUSTEE	5.00	X						0.	0.	0.
(20) MARK APPLEBAUM TRUSTEE	5.00	X						0.	0.	0.
(21) EMILY BARR TRUSTEE	5.00	X						0.	0.	0.
(22) KURCHI BASU TRUSTEE	5.00	X						0.	0.	0.
(23) ALAN BAUER TRUSTEE	5.00	X						0.	0.	0.
(24) ELIZABETH BAUSCH TRUSTEE	5.00	X						0.	0.	0.
(25) JONATHAN CAPEHART TRUSTEE	5.00	X						0.	0.	0.
(26) VINAYA CHEPURI TRUSTEE	5.00	X						0.	0.	0.
<b>1b Subtotal</b>								5,198,508.	0.	911,512.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								5,198,508.	0.	911,512.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 239

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
TERRA GENERAL CONTRACTORS, LLC 21025 COMMERCE BLVD, ROGERS, MN 55374	GENERAL CONSTRUCTION	28,448,669.
BON APPETIT, 100 HAMILTON AVE STE 400, PALO ALTO, CA 94301	DINING SERVICES	11,845,233.
INCLINE ALCHEMY, INC, P.O. BOX 1058 160 ALAMO PLAZA, ALAMO, CA 94507	IT CONSULTANT	1,015,258.
JE DUNN CONSTRUCTION COMPANY, 800 WASHINGTON AVE N STE 600, MINNEAPOLIS, MN	GENERAL CONSTRUCTION	945,471.
RIVER CITY BUILDERS PO BOX 7, NERSTRAND, MN 55053	GENERAL CONSTRUCTION	917,818.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 52

SEE PART VII, SECTION A CONTINUATION SHEETS

<b>Part VII</b> Section A. <b>Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> (continued)										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DAVID DIAMOND TRUSTEE	5.00	X						0.	0.	0.
(28) HERB FRITCH TRUSTEE	5.00	X						0.	0.	0.
(29) LIA GORE TRUSTEE	5.00	X						0.	0.	0.
(30) MICHAEL HASENSTAB TRUSTEE	5.00	X						0.	0.	0.
(31) SARA HAYS TRUSTEE	5.00	X						0.	0.	0.
(32) BRENT IRVIN TRUSTEE	5.00	X						0.	0.	0.
(33) DASHINI JEYATHURAI TRUSTEE	5.00	X						0.	0.	0.
(34) BOLUWATIFE JOHNSON TRUSTEE	5.00	X						0.	0.	0.
(35) LESLIE KAUTZ TRUSTEE	5.00	X						0.	0.	0.
(36) PAM KIECKER ROYALL TRUSTEE	5.00	X						0.	0.	0.
(37) ELIZABETH KING TRUSTEE	5.00	X						0.	0.	0.
(38) CHRISTIAN LEE TRUSTEE	5.00	X						0.	0.	0.
(39) BRAD NORDHOLM TRUSTEE	5.00	X						0.	0.	0.
(40) JENNIFER PIETENPOL TRUSTEE	5.00	X						0.	0.	0.
(41) RAUL RAYMUNDO TRUSTEE	5.00	X						0.	0.	0.
(42) NONOKO SATO TRUSTEE	5.00	X						0.	0.	0.
(43) DAVID SMITH TRUSTEE	5.00	X						0.	0.	0.
(44) JUSTIN WENDER TRUSTEE	5.00	X						0.	0.	0.
(45) MICHAEL WIEBOLT TRUSTEE	5.00	X						0.	0.	0.
(46) CANDACE WILLIAMS TRUSTEE	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	8,034,170.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	33,261,230.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 5,026,755.				
	<b>h Total.</b> Add lines 1a-1f		41,295,400.				
Program Service Revenue	<b>2 a</b> TUITION AND FEES	<b>Business Code</b>	611710	144,128,029.	144,128,029.		
	<b>b</b> HOUSING & FOOD SERVICE		611710	31,197,584.	31,197,584.		
	<b>c</b> SUMMER LIBERAL ARTS IN		611310	1,048,124.	1,048,124.		
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			176,373,737.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			25,950,981.		9,874,133.	
	<b>4</b> Income from investment of tax-exempt bond proceeds					16,076,848.	
	<b>5</b> Royalties			1,717.		1,717.	
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	397,441.			
			(ii) Personal				
				446,946.			
	<b>b</b> Less: rental expenses	<b>6b</b>		-49,505.			
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)			-49,505.		-49,505.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	52,388,148.			
			(ii) Other	127,647.			
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		-16,990,268.	986,474.		
	<b>c</b> Gain or (loss)	<b>7c</b>		69,378,416.	-858,827.		
	<b>d</b> Net gain or (loss)			68,519,589.		68,519,589.	
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue	<b>11 a</b> OTHER REVENUE	<b>Business Code</b>	900099	2,843,531.		2,843,531.	
	<b>b</b> WIND TURBINE		221000	146,962.	146,962.		
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			2,990,493.			
<b>12 Total revenue.</b> See instructions			315,082,412.	176,373,737.	10,021,095.	87,392,180.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	1,752,007.	1,752,007.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....	68,060,091.	68,060,091.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	3,106,769.	211,800.	2,448,794.	446,175.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....	376,900.	75,380.	220,060.	81,460.
<b>7</b> Other salaries and wages .....	80,410,158.	71,337,501.	6,240,840.	2,831,817.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,191,703.	5,602,997.	1,260,570.	328,136.
<b>9</b> Other employee benefits .....	10,757,014.	9,443,187.	869,100.	444,727.
<b>10</b> Payroll taxes .....	5,596,369.	4,717,190.	631,690.	247,489.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	500,098.		500,098.	
<b>c</b> Accounting .....	101,466.		101,466.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	5,242,989.		5,242,989.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	8,723,576.	5,668,508.	1,871,885.	1,183,183.
<b>12</b> Advertising and promotion .....	81,552.	12,569.	52,307.	16,676.
<b>13</b> Office expenses .....	4,841,748.	4,320,494.		521,254.
<b>14</b> Information technology .....	3,803,374.	3,475,634.	270,889.	56,851.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	9,479,074.	9,479,074.		
<b>17</b> Travel .....	8,980,659.	8,276,561.	245,324.	458,774.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	1,351,404.	970,393.	183,324.	197,687.
<b>20</b> Interest .....	4,222,564.	4,222,564.		
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	16,095,339.	15,979,775.	104,208.	11,356.
<b>23</b> Insurance .....	1,373,104.	586,074.	786,455.	575.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> STUDENT DINING SERVICES	10,241,734.	10,241,666.	68.	
<b>b</b> MISCELLANEOUS EXPENSES	5,363,660.	5,026,378.	316,341.	20,941.
<b>c</b> MEMBERSHIP FEES	3,585,438.	2,624,090.	879,265.	82,083.
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> Total functional expenses. Add lines 1 through 24e	261,238,790.	232,083,933.	22,225,673.	6,929,184.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	37,077,747.	<b>2</b>	60,942,231.
	<b>3</b> Pledges and grants receivable, net .....	13,137,894.	<b>3</b>	12,117,066.
	<b>4</b> Accounts receivable, net .....	3,574,767.	<b>4</b>	2,787,646.
	<b>5</b> Loans and other receivables from 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	453,469.	<b>8</b>	489,685.
	<b>9</b> Prepaid expenses and deferred charges .....	2,466,716.	<b>9</b>	2,710,188.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 618,412,922.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 200,138,253.		
		392,921,373.	<b>10c</b>	418,274,669.
	<b>11</b> Investments - publicly traded securities .....	610,908,268.	<b>11</b>	662,416,976.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	765,240,811.	<b>12</b>	801,384,121.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	1,455,914.	<b>13</b>	1,192,669.
	<b>14</b> Intangible assets .....		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 .....	56,757,835.	<b>15</b>	30,054,603.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,883,994,794.	<b>16</b>	1,992,369,854.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	30,134,094.	<b>17</b>	25,821,538.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	5,299,903.	<b>19</b>	7,968,012.
	<b>20</b> Tax-exempt bond liabilities .....	173,867,603.	<b>20</b>	167,233,431.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	448,279.	<b>21</b>	198,994.
	<b>22</b> Loans and other 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	20,765,355.	<b>25</b>	20,792,743.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	230,515,234.	<b>26</b>	222,014,718.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	734,262,157.	<b>27</b>	761,813,614.
	<b>28</b> Net assets with donor restrictions .....	919,217,403.	<b>28</b>	1,008,541,522.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	1,653,479,560.	<b>32</b>	1,770,355,136.
<b>33</b> Total liabilities and net assets/fund balances .....	1,883,994,794.	<b>33</b>	1,992,369,854.	

Form 990 (2024)

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	315,082,412.
2	Total expenses (must equal Part IX, column (A), line 25)	2	261,238,790.
3	Revenue less expenses. Subtract line 2 from line 1	3	53,843,622.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,653,479,560.
5	Net unrealized gains (losses) on investments	5	64,734,138.
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	-1,702,184.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,770,355,136.

**Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		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:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	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:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2024)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	85,839,092.	48,857,408.	45,960,724.	44,938,663.	41,295,400.	266,891,287.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	85,839,092.	48,857,408.	45,960,724.	44,938,663.	41,295,400.	266,891,287.
<b>5</b> 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)						38,314,110.
<b>6 Public support.</b> Subtract line 5 from line 4.						228,577,177.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4	85,839,092.	48,857,408.	45,960,724.	44,938,663.	41,295,400.	266,891,287.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	35,397,163.	18,594,822.	9,841,440.	17,974,375.	16,476,006.	98,283,806.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on	2,410,974.	3,850,421.	5,922,701.	2,075,167.	9,740,432.	23,999,695.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,316,585.	3,266,351.	4,121,668.	2,502,738.	2,843,531.	15,050,873.
<b>11 Total support.</b> Add lines 7 through 10						404,225,661.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	770,511,554.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	<b>14</b>	56.55 %
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14	<b>15</b>	57.35 %
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c 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.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls... b A family member... c A 35% controlled entity...

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity... Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s)...

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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... Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected... Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice...

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test... b The organization is the parent of each of its supported organizations... c The organization supported a governmental entity... Row 2: Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes... b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement... Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees... b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	<b>Adjusted Net Income</b> (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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2024

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.  
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

2020 AMOUNT: \$ 2,316,585.  
 2021 AMOUNT: \$ 3,266,351.  
 2022 AMOUNT: \$ 4,121,668.  
 2023 AMOUNT: \$ 2,502,738.  
 2024 AMOUNT: \$ 2,843,531.

**Schedule B  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

Name of the organization

CARLETON COLLEGE

Employer identification number

41-0694747

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (Rev. 12-2024)

Name of organization  CARLETON COLLEGE	Employer identification number  41-0694747
--	--

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 6,128,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 1,871,541.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 1,633,709.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 931,710.	Person Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 911,414.	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  CARLETON COLLEGE	Employer identification number  41-0694747
--	--

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	SECURITIES _____ _____ _____	\$ 931,710.	06/30/25
6	SECURITIES _____ _____ _____	\$ 411,414.	06/30/25
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization  CARLETON COLLEGE	Employer identification number  41-0694747
--	--

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Table with 2 columns: Name of organization (CARLETON COLLEGE) and Employer identification number (EIN) (41-0694747)

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political campaign activity expenditures \$ 0.
3 Volunteer hours for political campaign activities 0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 0.
2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ 0.
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
4a Was a correction made? Yes No
b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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

Schedule C (Form 990) 2024

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under 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, EIN, 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) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b>	Other exempt purpose expenditures .....														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">IF the amount on line 1e, column (a) or (b), is:</th> <th style="text-align: left;">THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		IF the amount on line 1e, column (a) or (b), is:	THEN 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.		
IF the amount on line 1e, column (a) or (b), is:	THEN 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.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b>	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? .....														

Yes  No

**4-Year Averaging Period Under Section 501(h)**  
 (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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....	X		
<b>e</b> Publications, or published or broadcast statements? .....	X		
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		
<b>i</b> Other activities? .....	X		126,366.
<b>j</b> Total. Add lines 1c through 1i .....			126,366.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments, and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions .....	5	

**Part IV Supplemental Information**

Provide 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 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

COLLEGE RELATIONS OCCASIONALLY CONTACT LEGISLATORS TO EXPRESS THE COLLEGE'S VIEWS ON PENDING LEGISLATION WHICH WOULD AFFECT THE COLLEGE. COSTS INCURRED IN CONNECTION WITH THESE ACTIVITIES ARE INSIGNIFICANT AND NO SEPARATE ACCOUNT IS MADE FOR THESE COSTS. IN ADDITION, STUDENTS PARTICIPATE IN A VOLUNTEER ACTIVITY SPONSORED BY THE MINNESOTA PRIVATE COUNCIL (MPCC) CALLED "DAY AT THE CAPITAL" TO DISCUSS THE IMPORTANCE OF THE STATE GRANT PROGRAM WITH REPRESENTATIVES. COSTS INCURRED BY THE COLLEGE TO SUPPORT THIS PROGRAM ARE DE MINIMIS. CARLETON COLLEGE IS A MEMBER OF MINNESOTA PRIVATE COLLEGE COUNCIL (MPCC), AN ORGANIZATION DESCRIBED IN SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE. MPCC IS AN ASSOCIATION OF PRIVATE NONPROFIT INSTITUTIONS OF HIGHER EDUCATION THAT

**Part IV** Supplemental Information *(continued)*

SERVES A VARIETY OF ITS MEMBERS' SHARED NEEDS, INCLUDED, BUT NOT ONLY, NONPARTISAN AND NON-ELECTORAL ADVOCACY FOR PUBLIC POLICY THAT MEETS STUDENTS' NEEDS AND ADVANCES THE INTEREST OF PRIVATE HIGHER EDUCATION. CARLETON COLLEGE PAID MEMBER DUES TO MPCC IN THE AMOUNT OF \$137,101 DURING THE TAXABLE YEAR. MPCC HAD DIVIDED ITS EXPENSES FOR ITS TAXABLE YEAR ENDING JUNE 30, 2025 INTO TWO GROUPS. GROUP 1 CONSISTS OF THOSE EXPENSES THAT DID NOT IN ANY WAY SUPPORT ATTEMPTS TO INFLUENCE LEGISLATION WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("LOBBYING"), AND GROUP 2 CONSISTS OF ALL OTHER EXPENSES. GROUP 2 INCLUDES MANY EXPENSES SUCH AS PERSONNEL COSTS THAT SUPPORT BOTH LOBBYING AND NONLOBBYING ACTIVITIES. MPCC DID NOT ATTEMPT TO ALLOCATE THE GROUP 2 EXPENSES BETWEEN LOBBYING AND NONLOBBYING ACTIVITIES. MPCC HAD DETERMINED THAT THE AMOUNT OF THE GROUP 2 EXPENSES REPRESENTS 92.17% OF THE AMOUNT OF DUES THAT MPCC COLLECTED IN THE SAME TAXABLE YEAR. ASSUMING THAT ALL GROUP 2 EXPENSES WERE PAID FROM MEMBER DUES, AND ALLOCATING THOSE EXPENSES PRO RATA BASED ON THE DUES PAID BY EACH MEMBER, \$126,366 OF CARLETON COLLEGE'S DUES WERE USED TO PAY GROUP 2 EXPENSES. THE AMOUNT OF LOBBYING EXPENSES PAID FROM CARLETON COLLEGE'S DUES WAS SIGNIFICANTLY LESS THAN THAT AMOUNT.

**SCHEDULE D**

(Form 990)  
(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

CARLETON COLLEGE

Employer identification number

41-0694747

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)     Preservation of a historically important land area  
 Protection of natural habitat     Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified 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
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \_\_\_\_\_

4 Number of states where property subject to conservation easement is located \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 .....	\$	0.
(ii) Assets included in Form 990, Part X .....	\$	9,748,529.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....	\$	
b Assets included in Form 990, Part X .....	\$	

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,245,543,035.	1,176,531,478.	1,112,930,501.	1,177,591,148.	877,276,225.
b Contributions	18,057,747.	9,092,832.	16,049,584.	24,155,753.	63,397,175.
c Net investment earnings, gains, and losses	139,783,860.	120,016,013.	104,179,465.	-31,932,372.	290,531,660.
d Grants or scholarships	16,634,658.	14,844,972.	14,901,264.	13,763,033.	12,562,398.
e Other expenditures for facilities and programs	38,727,413.	37,227,344.	35,159,550.	34,441,127.	32,615,343.
f Administrative expenses	4,293,917.	8,024,972.	6,567,258.	8,679,867.	8,436,171.
g End of year balance	1,343,728,654.	1,245,543,035.	1,176,531,478.	1,112,930,501.	1,177,591,148.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 31.7700 %
  - b Permanent endowment 68.2300 %
  - c Term endowment .0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| (i) Unrelated organizations?   | X   |    |
| (ii) Related organizations?  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? |     |    |
| <b>3b</b>  |     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,493,728.		2,493,728.
b Buildings		425,996,473.	126,570,818.	299,425,655.
c Leasehold improvements				
d Equipment		113,051,444.	73,567,435.	39,484,009.
e Other		76,871,277.		76,871,277.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				418,274,669.

**Part VII Investments - Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATE EQUITY	326,700,367.	END-OF-YEAR MARKET VALUE
(B) HEDGE FUNDS	263,838,306.	END-OF-YEAR MARKET VALUE
(C) REAL ASSETS	157,657,963.	END-OF-YEAR MARKET VALUE
(D) PLANNED GIFT AGREEMENTS AND OTHER	53,187,485.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))	801,384,121.	

**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)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**Part X Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	18,073,625.
(3) ASSET RETIREMENT OBLIGATION	2,719,118.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	20,792,743.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	305,258,232.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	64,734,138.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-1,255,238.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	63,478,900.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	241,779,332.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	5,242,989.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	68,060,091.
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	73,303,080.
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<b>5</b>	315,082,412.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	188,382,656.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	446,946.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	446,946.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	187,935,710.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	5,242,989.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	68,060,091.
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	73,303,080.
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<b>5</b>	261,238,790.

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4:

CARLETON'S ART COLLECTION IS FOR STUDENT RESEARCH AND STUDY INCLUDING COLLEGE ARCHIVES OF INSTITUTIONALLY SIGNIFICANT TREASURES AN LIBRARY COLLECTIONS.

PART IV, LINE 2B:

THE COLLEGE REPORTS ON FORM 990, PART X, LINE 21 AMOUNTS HELD FOR THE PERKINS LOAN PROGRAM THAT ARE REFUNDABLE TO THE GOVERNMENT AND REPORTED AS A LIABILITY ON THE COLLEGE'S FINANCIAL STATEMENTS.

PART V, LINE 4:

ENDOWMENT FUNDS ARE TO SUPPORT GRANTS TO STUDENTS AND THE PROGRAM SERVICES OF THE COLLEGE.

PART X, LINE 2:

THE COLLEGE IS A NONPROFIT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND SIMILAR STATUTES OF MINNESOTA LAW. IT IS EXEMPT FROM INCOME TAXES ON RELATED INCOME. THE COLLEGE FILES U.S. FEDERAL AND VARIOUS STATE TAX RETURNS ON NET UNRELATED BUSINESS INCOME.

THE TAX CUTS AND JOBS ACT (TCJA), ENACTED ON DECEMBER 22, 2017, REQUIRES THE COLLEGE TO PAY AN EXCISE TAX ON NET INVESTMENT INCOME FOR TAXABLE YEARS BEGINNING AFTER DECEMBER 31, 2017 WHENEVER THE AGGREGATE FAIR MARKET VALUE OF ASSETS AT THE END OF THE PRECEDING TAXABLE YEAR IS AT LEAST \$500,000 PER STUDENT. THE COLLEGE RECORDED AN ESTIMATED TAX OBLIGATION OF

**Part XIII** Supplemental Information *(continued)*

\$800,000 FOR THE FISCAL YEAR ENDED JUNE 30, 2025. EXCISE TAX REMITTED FOR THE PERIOD ENDED JUNE 30, 2024 WAS \$456,418.

THE ONE BIG BEAUTIFUL BILL ACT (OBBBA) SIGNED INTO LAW ON JULY 4, 2025 ELIMINATED THE EXCISE TAX ON NET INVESTMENT INCOME FOR INSTITUTIONS ENROLLING FEWER THAN 3,000 STUDENTS FOR FISCAL YEARS BEGINNING AFTER DECEMBER 31, 2025.

THE COLLEGE HAS EVALUATED ITS TAX POSITIONS AND DETERMINED IT HAS NO OTHER UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

NET CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-1,702,184.
RENTAL EXPENSES	446,946.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-1,255,238.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GRANTS TO STUDENTS	68,060,091.
--------------------	-------------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES	446,946.
-----------------	----------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GRANTS TO STUDENTS	68,060,091.
--------------------	-------------

**SCHEDULE E  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Schools**

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

**Attach to Form 990 or Form 990-EZ.**

**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

CARLETON COLLEGE

Employer identification number

41-0694747

**Part I**

**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? .....

	YES	NO
<b>1</b>	X	

**2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

<b>2</b>	X	
----------	---	--

**3** Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II .....

THE COLLEGE USES PAPER AND BROADCAST MEDIA IN SOLICITATION OF  
STUDENTS. WE PUBLICIZE OUR NONDISCRIMINATORY POLICY IN ALL  
PRINTED BROCHURES, MAGAZINES, APPLICATION MATERIAL AND  
WEBSITE INFORMATION.

<b>3</b>	X	
----------	---	--

**4** Does the organization maintain the following:

**a** Records indicating the racial composition of the student body, faculty, and administrative staff? .....

<b>4a</b>	X	
-----------	---	--

**b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ..

<b>4b</b>	X	
-----------	---	--

**c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....

<b>4c</b>	X	
-----------	---	--

**d** Copies of all material used by the organization or on its behalf to solicit contributions? .....

<b>4d</b>	X	
-----------	---	--

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

**5** Does the organization discriminate by race in any way with respect to:

**a** Students' rights or privileges? .....

<b>5a</b>		X
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**b** Admissions policies? .....

<b>5b</b>		X
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**c** Employment of faculty or administrative staff? .....

<b>5c</b>		X
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**d** Scholarships or other financial assistance? .....

<b>5d</b>		X
-----------	--	---

**e** Educational policies? .....

<b>5e</b>		X
-----------	--	---

**f** Use of facilities? .....

<b>5f</b>		X
-----------	--	---

**g** Athletic programs? .....

<b>5g</b>		X
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**h** Other extracurricular activities? .....

<b>5h</b>		X
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If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

**6a** Does the organization receive any financial aid or assistance from a governmental agency? .....

<b>6a</b>	X	
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**b** Has the organization's right to such aid ever been revoked or suspended? .....

<b>6b</b>		X
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If you answered "Yes" on either line 6a or line 6b, explain in Part II.

**7** Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II .....

<b>7</b>	X	
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**For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.**

**Schedule E (Form 990) (Rev. 12-2024)**

**Part II Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

CARLETON COLLEGE PARTICIPATES IN THE FEDERAL STUDENT FINANCIAL AID PROGRAM ADMINISTERED THROUGH THE U.S. DEPARTMENT OF EDUCATION. CARLETON STUDENTS RECEIVE FUNDING FROM CAMPUS-BASED PROGRAMS (PERKINS, SEOG, AND FEDERAL WORK STUDY) AS WELL AS FEDERAL PELL GRANTS AND FEDERAL STUDENT LOANS. IN ADDITION, CARLETON STUDENTS RECEIVE FUNDING FROM THE MINNESOTA STATE GRANT, WORK-STUDY AND SELF LOAN PROGRAMS ADMINISTERED THROUGH THE MINNESOTA OFFICE OF HIGHER EDUCATION.

**SCHEDULE F  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization  CARLETON COLLEGE	Employer identification number  41-0694747
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**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		457,463,137.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		10,880,010.
NORTH AMERICA	0	0	INVESTMENTS		3,013,947.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - STUDIO ART IN AUSTRALIA	552,508.
SOUTH ASIA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - BUDDHIST STUDIES IN BODH GAYA, INDIA	267,121.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - ECONOMICS IN CAMBRIDGE	350,448.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - ECOLOGY AND ANTHROPOLOGY IN TANZANIA	172,213.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - GEOLOGY IN NEW ZEALAND	485,088.
<b>3 a Subtotal</b> .....	0	0			473,184,472.
<b>b Total from continuation sheets to Part I</b> .....	0	0			2,598,995.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			475,783,467.

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - LIVING LONDON	391,476.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - SPANISH STUDIES IN MADRID	257,864.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - FRENCH AND FRANCOPHONE STUDIES IN PARIS	327,049.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - CROSS-CULTURAL PSYCHOLOGY IN PRAGUE	357,785.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - HISTORY, RELIGION, AND URBAN CHANGE IN MEDIEVAL AND RENAISSANCE ROME	527,733.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - POLITICAL ECONOMY AND ECOLOGY OF SOUTHEAST ASIA	308,151.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - COMPARATIVE WOMEN'S AND GENDER STUDIES IN EUROPE	171,210.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - RUSSOPHONE STUDIES IN CENTRAL ASIA	208,597.
NORTH AMERICA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES - SOCIAL JUSTICE AND CULTURAL IMMERSION IN MEXICO	49,130.
<b>Totals</b> .....					2,598,995.

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

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

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

3 Enter total number of other organizations or entities



**Part IV Foreign Forms**

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

Schedule F (Form 990) (Rev. 12-2024)

**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 3:

THE COLLEGE USES THE ACCRUAL METHOD OF ACCOUNTING TO REPORT EXPENDITURES  
ON PART I.

Lined area for supplemental information.

**SCHEDULE I  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

CARLETON COLLEGE

Employer identification number  
41-0694747

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" 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, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CALIFORNIA - DAVIS 1 SHIELDS AVENUE DAVIS, CA 95616	94-6036494	501(C)(3)	90,117.	0.	N/A	N/A	RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH
UNIVERSITY OF WISCONSIN - MADISON 21 N. PARK STREET SUITE 6301 MADISON, WI 53715	39-1805963	STATE GOV	159,981.	0.	N/A	N/A	RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH
UNIVERSITY OF CONNECTICUT 438 WHITNEY ROAD EXT. UNIT 1133 STORRS, CT 06269	06-0772160	STATE GOV	227,555.	0.	N/A	N/A	RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH
BIODIVERSITY RESEARCH INSTITUTE 276 CANCO ROAD PORTLAND, ME 04103	01-0515381	501(C)(3)	110,594.	0.	N/A	N/A	RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH
UNIVERSITY OF WASHINGTON BOX 354090, 3924 MONTLAKE BLVD NE SEATTLE, WA 98195	91-6001537	STATE GOV	41,251.	0.	N/A	N/A	TEMPORAL DYNAMICS OF MICROBIAL AND VIRAL FUNCTION AND ADAPTATION IN HYDROTHERMAL VENTS
UNIVERSITY OF CALIFORNIA AT SAN DIEGO - 5998 ALCALA PARK - SAN DIEGO, CA 92110	95-2544535	STATE GOV	35,547.	0.	N/A	N/A	DEVELOPMENT OF NOVEL AUGMENTED REALITY TOOL FOR TEACHING MOLECULAR VISUALIZATION IN

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 8.
- 3** Enter total number of other organizations listed in the line 1 table ..... 0.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (Rev. 12-2024)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF NORTHFIELD 801 WASHINGTON STREET NORTHFIELD, MN 55057	41-6005424	MUNICIPAL GOV	85,000.	0. N/A		N/A	COMMUNITY ENGAGEMENT
NORTHFIELD PUBLIC SCHOOLS 201 ORCHARD ST. S NORTHFIELD, MN 55057	41-6008327	MUNICIPAL GOV	1,000,000.	0. N/A		N/A	SUPPORT CONSTRUCTION OF NEW NORTHFIELD HIGH SCHOOL

**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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
STUDENT SCHOLARSHIPS	1842	68,060,091.	0.	N/A	N/A

**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:

GRANTS TO ORGANIZATIONS REQUIRE QUARTERLY PROGRAM REPORTING INCLUDING A NARRATIVE AND FINANCIAL SUMMARY THAT IS REVIEWED BY THE PROGRAM DIRECTOR.

SCHOLARSHIPS AND GRANTS FOR STUDENTS ARE APPLIED DIRECTLY TO A STUDENT'S COLLEGE ACCOUNT AND APPLIED TO TUITION, FEES, ROOM AND BOARD. ALL FINANCIAL AID IS SUBJECT TO REVISION BASED ON AVAILABILITY, CHANGES IN FAMILY CONTRIBUTION AND/OR CREDIT LOAD. SATISFACTORY ACADEMIC PROGRESS MUST BE MAINTAINED ACCORDING TO STANDARDS PRESCRIBED BY THE COLLEGE. ANNUAL RENEWAL OF FINANCIAL AID IS CONTINUOUS IF INSTITUTIONAL FINANCIAL NEED REMAINS, ALL REQUIRED DOCUMENTS ARE COMPLETED BY THE PUBLISHED DEADLINE AND SATISFACTORY ACADEMIC PROGRESS IS MAINTAINED CONSISTENT WITH THE COLLEGE'S POLICY.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA - DAVIS

(H) PURPOSE OF GRANT OR ASSISTANCE: RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH TRANSMISSION

**Part IV Supplemental Information**

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF WISCONSIN - MADISON

(H) PURPOSE OF GRANT OR ASSISTANCE: RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH TRANSMISSION

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CONNECTICUT

(H) PURPOSE OF GRANT OR ASSISTANCE: RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH TRANSMISSION

NAME OF ORGANIZATION OR GOVERNMENT: BIODIVERSITY RESEARCH INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: RUI: LINKING ECOLOGY, BEHAVIOR, AND IMMUNOLOGY TO SPATIO-TEMPORAL VARIATION IN HELMINTH TRANSMISSION

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA AT SAN DIEGO

(H) PURPOSE OF GRANT OR ASSISTANCE: DEVELOPMENT OF NOVEL AUGMENTED REALITY TOOL FOR TEACHING MOLECULAR VISUALIZATION IN BIOCHEMISTRY

SCHEDULE I, PART II, COLUMN (H):

NSF SUBAWARD - STEP CENTER/INTEGRATE: INTERDISCIPLINARY TEACHING OF GEOSCIENCE FOR A SUSTAINABLE FUTURE

**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization <b>CARLETON COLLEGE</b>	Employer identification number <b>41-0694747</b>
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**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel  | <input checked="" type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence              |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees                |
| <input type="checkbox"/> Discretionary spending account            | <input checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) (Rev. 12-2024)

**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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KELSEY DESHLER CHIEF INVESTMENT OFFICER	(i) 487,980.	421,204.	16,353.	34,500.	37,579.	997,616.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ALISON BYERLY PRESIDENT	(i) 696,304.	0.	39,795.	34,500.	92,605.	863,204.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TIMOTHY GRIFFETH DIRECTOR OF INVESTMENTS	(i) 320,836.	186,727.	810.	33,206.	35,272.	576,851.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ERIC RUNESTAD VP AND TREASURER	(i) 363,847.	0.	4,812.	34,500.	32,932.	436,091.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MICHELLE MATTSON PROVOST & VP OF ACADEMIC AFFAIRS	(i) 326,550.	0.	0.	33,201.	12,413.	372,164.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CAROLYN H. LIVINGSTON VP FOR STUDENT LIFE & DEAN OF STUDEN	(i) 248,190.	0.	810.	25,954.	81,628.	356,582.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ART D. RODRIGUEZ VP & DEAN OF ADMISSIONS & FINANCIAL	(i) 277,739.	0.	1,242.	29,012.	35,944.	343,937.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DAREN BATKE VP OF DEVELOPMENT & ALUMNI RELATIONS	(i) 282,443.	0.	21,699.	28,500.	10,597.	343,239.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MICHAEL T HEMESATH PROFESSOR OF ECONOMICS	(i) 218,124.	0.	25,737.	22,982.	36,393.	303,236.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ELISE ESLINGER CHIEF OF STAFF	(i) 228,024.	0.	6,299.	24,403.	35,060.	293,786.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JULIE J NEIWORTH PROFESSOR OF PSYCHOLOGY	(i) 187,300.	0.	49,397.	19,020.	10,291.	266,008.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(12) JEFF DSIDA ASSOCIATE DIRECTOR OF INVESTMENTS	(i) 152,916.	74,078.	432.	16,058.	12,566.	256,050.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(13) DAN RUSTAD VP OF EXTERNAL RELATIONS (INTERIM)	(i) 183,110.	0.	17,242.	19,367.	34,619.	254,338.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(14) STEVEN G. POSKANZER PRESIDENT (FORMER)	(i) 186,970.	0.	4,191.	19,772.	25,846.	236,779.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(15) GRETCHEN E HOFWEISTER DEAN OF THE COLLEGE INTERIM (FORMER)	(i) 157,583.	0.	9,764.	16,795.	25,997.	210,139.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii)							

**Part III Supplemental Information**

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

ALISON BYERLY: RESIDENCE FOR PERSONAL USE (\$56,240) AND HOUSE CLEANING SERVICES (\$11,809), NOT INCLUDED IN TAXABLE INCOME AS THE HOUSING ASSIGNMENT IS REQUIRED BY THE COLLEGE AS A CONDITION OF EMPLOYMENT.

CAROLYN LIVINGSTON: RESIDENCE FOR PERSONAL USE (\$44,255), NOT INCLUDED IN TAXABLE INCOME AS THE HOUSING ASSIGNMENT IS REQUIRED BY THE COLLEGE AS A CONDITION OF EMPLOYMENT.

KELSEY DRESHLER: DELTAONE BUSINESS CLASS TRAVEL USE (\$9,094) FOR FOREIGN INVESTOR MEETINGS, NOT INCLUDED IN TAXABLE INCOME.

TIMOTHY GRIFFETH: DELTAONE BUSINESS CLASS TRAVEL USE (\$11,832) FOR FOREIGN INVESTOR MEETINGS, NOT INCLUDED IN TAXABLE INCOME.

PART I, LINE 7:  
INVESTMENT OFFICERS ARE COMPENSATED PER AN INCENTIVE COMPENSATION STRUCTURE DESIGNED TO ALIGN THE PERFORMANCE GOALS OF THE INVESTMENT OFFICE WITH THE NEEDS OF THE COLLEGE. THESE NON-FIXED PAYMENTS DEPEND ON THE ENDOWMENT PORTFOLIO PERFORMANCE.

**SCHEDULE K (Form 990)**  
 (Rev. December 2024)  
 Department of the Treasury  
 Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
 Attach to Form 990.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization: **CARLETON COLLEGE**

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

Part I Bond Issues	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
MN HIGHER EDUCATION FACILITIES A AUTHORITY SERIES 2017	41-0988525	60416H3W2	05/24/17	124,900,000.	WEITZ CENTER MUSIC							X
MN HIGHER EDUCATION FACILITIES B AUTHORITY SERIES 2023	41-0988525	60416JH3	09/07/23	60,495,000.	STUDENT HEALTH AND COUNSELING CENTER AND STU							X
C												
D												

Part II Proceeds	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		33,135,000.						
2 Amount of bonds legally defeased								
3 Total proceeds of issue		139,670,300.		66,458,054.				
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows		756,612.		454,531.				
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds		70,000,000.		66,000,000.				
11 Other spent proceeds		68,913,688.		3,523.				
12 Other unspent proceeds								
13 Year of substantial completion				2023				

	Yes		No		Yes		No	
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X			X				
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	X			X				
16 Has the final allocation of proceeds been made?	X			X				
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			X				

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		X		X				
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X		X				
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....	X			X				
<b>b</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? .....	X							
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X		X				
<b>d</b> 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? .....								
<b>4</b> 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 %		%		%
<b>5</b> 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 %		%		%
<b>6</b> Total of lines 4 and 5 .....		.00 %		.00 %		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....	X			X				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X		X				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....						%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X			X				

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X		X				
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X		X				
<b>b</b> Exception to rebate? .....		X		X				
<b>c</b> No rebate due? .....	X			X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X		X				

**Part IV Arbitrage (continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X		X				
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X		X				
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....		X		X				
<b>6</b> Were any gross proceeds invested beyond an available temporary period? .....								
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	X		X					

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations? .....	X		X					

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

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: MN HIGHER EDUCATION FACILITIES AUTHORITY SERIES 2017

(F) DESCRIPTION OF PURPOSE: WEITZ CENTER MUSIC ADDITION, SCIENCE COMPLEX CONSTRUCTION, UTILITY

(A) ISSUER NAME: MN HIGHER EDUCATION FACILITIES AUTHORITY SERIES 2023

(F) DESCRIPTION OF PURPOSE: STUDENT HEALTH AND COUNSELING CENTER AND STUDENT HOUSING

SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:

(A) ISSUER NAME: MN HIGHER EDUCATION FACILITIES AUTHORITY SERIES 2017

DATE THE REBATE COMPUTATION WAS PERFORMED: 04/26/2022

SCHEDULE K, PART I, BOND ISSUES, COLUMN (F)

(B) DESCRIPTION OF PURPOSE: WEITZ CENTER MUSIC ADDITION, SCIENCE COMPLEX CONSTRUCTION, UTILITY INFRASTRUCTURE IMPROVEMENTS & ADDITIONS

**SCHEDULE L**  
**(Form 990)**  
 (Rev. December 2024)  
 Department of the Treasury  
 Internal Revenue Service

**Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.  
 Attach to Form 990 or Form 990-EZ.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public Inspection**

Name of the organization <b>CARLETON COLLEGE</b>	Employer identification number <b>41-0694747</b>
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**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... \$ \_\_\_\_\_  
 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
<b>Total</b> .....							\$						

**Part III Grants or Assistance Benefiting Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		2,000.	SCHOLARSHIP	NATIONAL MERI
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990) (Rev. 12-2024)

SEE PART V FOR CONTINUATIONS



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2024**

Open to Public Inspection

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization: **CARLETON COLLEGE**  
Employer identification number: **41-0694747**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X		77,400.	APPRAISED
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	140	4,943,996.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ( INSTRUMENT - VI )	X	1	5,359.	APPRAISED
26	Other ( )				
27	Other ( )				
28	Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement ..... **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2024

**Part II Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):  
COLUMN (B) IS THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE M, PART I, LINE 32B:  
THE COLLEGE WILL RETAIN AN ATTORNEY FOR NON CASH REAL ESTATE GIFTS, AS NEEDED.

Multiple horizontal lines for supplemental information.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization <b>CARLETON COLLEGE</b>	Employer identification number <b>41-0694747</b>
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:  
 FOUNDED IN 1866, CARLETON COLLEGE IS A PRIVATE, COEDUCATIONAL LIBERAL  
 ARTS COLLEGE OF 2,007 STUDENTS LOCATED IN THE HISTORIC RIVER TOWN OF  
 NORTHFIELD, MINNESOTA. NATIONALLY RECOGNIZED AS THE NATION'S TOP  
 COLLEGE FOR UNDERGRADUATE TEACHING, CARLETON IS KNOWN FOR ITS ACADEMIC  
 RIGOR, INTELLECTUAL CURIOSITY, AND SENSE OF HUMOR. CARLETON OFFERS 33  
 MAJORS AND 40 MINORS IN THE ARTS, HUMANITIES, NATURAL SCIENCES,  
 MATHEMATICS, AND SOCIAL SCIENCES

THE CARLETON COLLEGE MISSION IS TO PROVIDE AN EXCEPTIONAL UNDERGRADUATE  
 LIBERAL ARTS EDUCATION. THE COLLEGE IS DEVOTED TO ACADEMIC EXCELLENCE,  
 DISTINGUISHED BY THE CREATIVE INTERPLAY OF TEACHING, LEARNING, AND  
 SCHOLARSHIP AND IS DEDICATED TO A DIVERSE RESIDENTIAL COMMUNITY AND  
 EXTENSIVE INTERNATIONAL ENGAGEMENTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:  
 AUXILIARY ENTERPRISES - CARLETON COLLEGE MAINTAINS A RURAL RESIDENTIAL  
 CAMPUS TO ENHANCE THE EDUCATIONAL EXPERIENCE OF THE STUDENT BODY WITH  
 ROOM AND BOARD PROGRAMS DESIGNED TO ENCOURAGE A SPIRIT OF COLLEGIALITY  
 AND CONVERSATION BEYOND THE CLASSROOM AND LABORATORY (2,024 STUDENTS).  
 EXPENSES \$ 21,661,467. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31,197,584.

RESEARCH - FACULTY AND STUDENT RESEARCH TO ENHANCE THE ACADEMIC  
 INSTRUCTIONAL EXPERIENCE.  
 EXPENSES \$ 7,849,708. INCLUDING GRANTS OF \$ 667,007. REVENUE \$ 0.

SUMMER ACADEMIC PROGRAMS - PROGRAMS FOR HIGH SCHOOL STUDENTS IN GRADES  
 7-12 TO DEVELOP SKILLS FOR RIGOROUS ACADEMIC PROGRAMS (211 ATTENDEES).  
 EXPENSES \$ 1,076,184. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,048,124.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:  
 FRANCE, NEW ZEALAND, SPAIN, INDIA,  
 ETHIOPIA

FORM 990, PART VI, SECTION A, LINE 1A:  
 THE COLLEGE'S EXECUTIVE COMMITTEE INCLUDES THE CHAIR OF EACH BOARD  
 COMMITTEE AND THE PRESIDENT. BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, THE  
 EXECUTIVE COMMITTEE SHALL HAVE GENERAL SUPERVISION OF THE ADMINISTRATION  
 AND PROPERTY OF THE COLLEGE EXCEPT THAT UNLESS SPECIFICALLY EMPOWERED BY  
 THE BOARD OF TRUSTEES TO DO SO, IT MAY NOT TAKE ANY ACTION INCONSISTENT  
 WITH A PRIOR ACT OF THE BOARD OF TRUSTEES, ALTER BYLAWS, REMOVE OR APPOINT  
 THE PRESIDENT OF THE COLLEGE, OR TAKE ANY ACTION WHICH HAS BEEN RESERVED  
 FOR THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:  
 MANAGEMENT PRESENTED THE FORM IN ITS ENTIRETY TO THE AUDIT COMMITTEE OF THE  
 BOARD OF TRUSTEES PRIOR TO SUBMITTING IT TO THE IRS. THE FORM 990 IS ALSO  
 INCLUDED ON THE COLLEGE WEBSITE AND PROVIDED WITH THE BOARD MATERIALS FOR  
 ALL BOARD MEMBERS TO REFERENCE.

FORM 990, PART VI, SECTION B, LINE 12C:  
 OFFICERS, TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED TO ANNUALLY DISCLOSE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization CARLETON COLLEGE	Employer identification number 41-0694747
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INTERESTS THAT COULD GIVE RISE TO CONFLICTS. INTERESTS INCLUDE RELATED PARTY RELATIONSHIPS, SUBSTANTIAL BUSINESS OR INVESTMENT HOLDINGS AND OTHER TRANSACTIONS OR AFFILIATIONS WITH BUSINESSES OR OTHER ORGANIZATIONS. TRANSACTIONS WITH PARTIES WITH WHOM A CONFLICTING INTEREST EXISTS MAY BE UNDERTAKEN ONLY IF ALL OF THE FOLLOWING ARE OBSERVED: 1) THE CONFLICTING INTEREST IS FULLY DISCLOSED; 2) THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTIONS; 3) A COMPETITIVE BID FOR COMPARABLE VALUATION EXISTS; AND 4) THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES HAS DETERMINED THAT THE TRANSACTION IS IN THE BEST INTEREST OF THE ORGANIZATION.

INDIVIDUALS WITH AN IDENTIFIED CONFLICT OF INTEREST ARE RESTRICTED IN HOW THEY ARE ALLOWED TO PROCEED WITH THE TRANSACTION. THE INDIVIDUALS ARE ALLOWED TO PARTICIPATE IN THE DISCUSSION, BUT NOT ALLOWED TO VOTE ON THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:  
THE PRESIDENT'S COMPENSATION IS DETERMINED ANNUALLY BY CHAIR OF THE BOARD AND REVIEWED BY THE HUMAN RESOURCES SUBCOMMITTEE AND THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE REVIEW COMPARES DATA FROM 25 OF THE COLLEGE'S PEER INSTITUTIONS, AS WELL AS UTILIZING VARIOUS SALARY SURVEYS. EVERY THIRD YEAR THE COLLEGE USES AN INDEPENDENT COMPENSATION CONSULTANT TO CONDUCT THE REVIEW.

A FORMAL REVIEW OF COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES IS CONDUCTED ANNUALLY. THE REVIEW COMPARES DATA FROM 25 OF THE COLLEGE'S PEER INSTITUTIONS, AS WELL AS UTILIZING VARIOUS SALARY SURVEYS. THE COLLEGE USES THE PROCESS TO REVIEW THE FOLLOWING POSITIONS: VICE PRESIDENT & TREASURER, VICE PRESIDENT OF DEVELOPMENT AND ALUMNI RELATIONS, VICE PRESIDENT & PROVOST, VICE PRESIDENT & DEAN OF ADMISSIONS, VICE PRESIDENT OF STUDENT LIFE & DEAN OF STUDENTS, CHIEF OF STAFF, VICE PRESIDENT FOR INCLUSION, EQUITY, AND COMMUNITY, VICE PRESIDENT FOR COMMUNICATIONS, AND CHIEF INVESTMENT OFFICER. THE PRESIDENT SUBMITS SALARY RECOMMENDATIONS FOR THE VICE PRESIDENTS, THE CHAIR OF THE INVESTMENT COMMITTEE SUBMITS RECOMMENDATIONS FOR THE CHIEF INVESTMENT OFFICER, & THE CHIEF INVESTMENT OFFICER SUBMITS RECOMMENDATIONS FOR THE DIRECTOR OF INVESTMENTS TO BOTH THE HUMAN RESOURCES SUBCOMMITTEE AND THE EXECUTIVE COMMITTEE FOR APPROVAL. EVERY THIRD YEAR THE COLLEGE USES AN INDEPENDENT COMPENSATION CONSULTANT TO CONDUCT THE REVIEW.

THE PROCESSES DESCRIBED HERE WERE LAST COMPLETED IN 2024.

FORM 990, PART VI, SECTION C, LINE 19:  
CARLETON'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S WEBSITE AND ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:  
NET CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -1,702,184.

FORM 990, PART XII, LINE 2C:  
OVERSIGHT AND SELECTION OF AN INDEPENDENT AUDITOR IS A RESPONSIBILITY OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AND HAS NOT CHANGED FROM THE PRIOR YEAR.





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

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

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

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to related organization(s)		X
<b>c</b> Gift, grant, or capital contribution from related organization(s)		X
<b>d</b> Loans or loan guarantees to or for related organization(s)		X
<b>e</b> Loans or loan guarantees by related organization(s)		X
<b>f</b> Dividends from related organization(s)		X
<b>g</b> Sale of assets to related organization(s)		X
<b>h</b> Purchase of assets from related organization(s)		X
<b>i</b> Exchange of assets with related organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
<b>o</b> Sharing of paid employees with related organization(s)		X
<b>p</b> Reimbursement paid to related organization(s) for expenses		X
<b>q</b> Reimbursement paid by related organization(s) for expenses		X
<b>r</b> Other transfer of cash or property to related organization(s)		X
<b>s</b> Other transfer of cash or property from related organization(s)		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PATRICIA V. DAMON SCHOLARSHIP FUND	S	124,050. FMV	
(2) S. EUGENE BAILEY SCHOLARSHIP TRUST	S	208,946. FMV	
(3)			
(4)			
(5)			
(6)			



**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for providing supplemental information.