

kpmg

2024 Income Tax Return

SAINT MICHAEL'S COLLEGE

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 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 Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SAINT MICHAEL'S COLLEGE		D Employer identification number 03-0179403
	Doing business as		E Telephone number 802-654-2915
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	ONE WINOOSKI PARK, BOX 274		G Gross receipts \$ 110,648,651.
	City or town, state or province, country, and ZIP or foreign postal code COLCHESTER, VT 05439		
F Name and address of principal officer: ROBERT R. ROBINSON ONE WINOOSKI PARK, BOX 274, COLCHESTER, VT		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number 0928	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.SMCVT.EDU**

K Form of organization: Corporation Trust Association Other

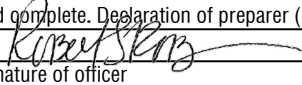

L Year of formation: **1913** **M** State of legal domicile: **VT**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	28
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	1172
	6 Total number of volunteers (estimate if necessary)	6	1051
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	155,324.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	10,168,308.	7,607,359.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	79,480,667.	77,410,789.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,382,489.	8,453,858.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,405,527.	1,018,559.
		98,436,991.	94,490,565.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	40,343,932.	39,438,486.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	35,592,581.	37,884,783.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	77,401.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	2,468,247.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	32,370,805.	32,278,691.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	108,384,719.	109,601,960.	
19 Revenue less expenses. Subtract line 18 from line 12	-9,947,728.	-15,111,395.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	196,624,631.	179,408,557.
	22 Net assets or fund balances. Subtract line 21 from line 20	68,596,649.	65,839,009.
	128,027,982.	113,569,548.	

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.

Sign Here		5/13/2026
	Signature of officer	Date
Paid Preparer Use Only	ROBERT R. ROBINSON, TREASURER/VP OF FINANCE	
	Type or print name and title	
Paid Preparer Use Only	Preparer's name RAGINI BANURU	Preparer's signature 
	Firm's name KPMG LLP	Date 05/12/26
Paid Preparer Use Only	Firm's address 60 SOUTH STREET BOSTON, MA 02111	Check if self-employed <input type="checkbox"/> PTIN P01906959
		Firm's EIN 13-5565207
		Phone no. 617-988-1000

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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: IT IS THE MISSION OF SAINT MICHAEL'S COLLEGE TO CONTRIBUTE THROUGH HIGHER EDUCATION TO THE ENHANCEMENT OF THE HUMAN PERSON AND TO THE ADVANCEMENT OF HUMAN CULTURE IN THE LIGHT OF THE CATHOLIC FAITH.

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 \$ 64,952,482. including grants of \$ 39,438,486.) (Revenue \$ 58,140,071.) ACADEMIC PROGRAM AND FINANCIAL AID, SEE SCH O

4b (Code:) (Expenses \$ 15,275,931. including grants of \$ 0.) (Revenue \$ 17,313,260.) AUXILIARY ENTERPRISES, SEE SCH O

4c (Code:) (Expenses \$ 16,588,726. including grants of \$) (Revenue \$) STUDENT SERVICES, SEE SCH O

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 96,817,139.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements.

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

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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, business 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 Enter the number of voting members of the governing body at the end of the tax year (28); 1b Enter the number of voting members included on line 1a, above, who are independent (27); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O (X).

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 Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed VT
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. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
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
MELISSA TOURVILLE - 802-654-2915
ONE WINOOSKI PARK, BOX 274, COLCHESTER, VT 05439

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) RICHARD PLUMB PRESIDENT/TRUSTEE	40.00 0.00	X		X				383,500.	0.	94,149.
(2) DAWN M. ELLINWOOD VP FOR STUDENT AFFAIRS	40.00 6.00				X			189,844.	0.	50,123.
(3) ROBERT ROBINSON VP FOR FINANCE/TREASURER	40.00 0.00			X				188,169.	0.	43,545.
(4) GRETCHEN GALBRAITH VP ACADEMIC AFFAIRS	40.00 0.00				X			189,902.	0.	35,866.
(5) JEFFERY TRUMBOWER PROFESSOR OF RELIGIOUS STUDIES	40.00 0.00					X		159,007.	0.	34,880.
(6) SARAH HASTINGS PROFESSOR PSYCHOLOGY	40.00 0.00					X		150,166.	0.	35,847.
(7) MICHAEL LARSEN PROFESSOR MATHEMATICS	40.00 0.00					X		141,140.	0.	39,050.
(8) JEFFREY AYERS PROFESSOR POLITICAL SCIENCE	40.00 0.00					X		158,428.	0.	20,924.
(9) TERRI SELBY EXECUTIVE DIRECTOR IN INST. ADV.	40.00 0.00					X		132,294.	0.	25,756.
(10) ANSEL AUGUSTINE, PHD. TRUSTEE	2.00 0.00	X						0.	0.	0.
(11) MR. JOSEPH A. BELLISSIMO TRUSTEE	1.00 0.00	X						0.	0.	0.
(12) REV. MSGR. BERNARD W. BOURGEOIS TRUSTEE	1.00 0.00	X						0.	0.	0.
(13) MR. PATRICK N. BROWN, PHD TRUSTEE	2.00 0.00	X						0.	0.	0.
(14) DR. GREGORY F. BRUCATO TRUSTEE	1.00 0.00	X						0.	0.	0.
(15) MS. PATRICIA A. CASEY TRUSTEE	5.00 0.00	X						0.	0.	0.
(16) MR. GARRETT CLARK TRUSTEE	4.00 0.00	X						0.	0.	0.
(17) MR. RICHARD COTE TRUSTEE	1.00 0.00	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) VERY REV. DAVID G. CRAY, SSE TRUSTEE	10.00 0.00	X						0.	0.	0.
(19) MR. MARK S. DALTON TRUSTEE	12.00 0.00	X						0.	0.	0.
(20) REV. STANLEY M. DERESIENSKI, SS TRUSTEE	5.00 0.00	X						0.	0.	0.
(21) MR. TIMOTHY E. FORD TRUSTEE	4.00 0.00	X						0.	0.	0.
(22) MR. WILLIAM H. GALLAGHER TRUSTEE	2.00 0.00	X						0.	0.	0.
(23) REV. THOMAS F. X. HOAR, PHD, SS TRUSTEE	1.00 0.00	X						0.	0.	0.
(24) MR. GEORGE C. KEADY, III TRUSTEE	2.00 0.00	X						0.	0.	0.
(25) MR. BRIAN G. LACEY TRUSTEE	6.00 0.00	X						0.	0.	0.
(26) MS. SUZANNE M. LEOUS TRUSTEE	2.00 0.00	X						0.	0.	0.
1b Subtotal								1,692,450.	0.	380,140.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,692,450.	0.	380,140.

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 11

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 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? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	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
KJ CONSTRUCTION 219 PEARL STREET, ESSEX, VT 05452	GENERAL CONTRACTOR	1,752,490.
OMADA TECHNOLOGIES LLC 36 MAPLEWOOD AVENUE, PORTSMOUTH, NH 03801	IT CONSULTANT	632,220.
BENOIT ELECTRIC 254 INDUSTRIAL LANE, BARRE, VT 05641	ELECTRICAL CONTRACTOR	474,225.
PREMIER COACH CO INC 946 ROUTE 7S, MILTON, VT 05468	CHARTER SERVICES	393,244.
EAB GLOBAL INC PO BOX 603519, CHARLOTTE, NC 28260	CONSULTING SERVICES	392,483.

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 22

SEE PART VII, SECTION A CONTINUATION SHEETS

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,091,019.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	5,516,340.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 531,939.				
	h Total. Add lines 1a-1f			7,607,359.			
Program Service Revenue	2 a TUITION AND FEES	Business Code					
		611710	58,140,071.	58140071.			
	b RESIDENCE AND DINING	721310	16,548,138.	16548138.			
	c SPECIAL EVENTS	812930	1,418,680.		24,842.	1393838.	
	d BOOK STORE	459210	538,778.			538,778.	
	e SPORTS CAMPS	713940	414,724.	414,724.			
	f All other program service revenue	900099	350,398.	350,398.			
g Total. Add lines 2a-2f			77,410,789.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,088,158.		21,316.	3066842.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	345,969.			
			(ii) Personal				
	b Less: rental expenses ...	6b	0.				
	c Rental income or (loss)	6c	345,969.				
	d Net rental income or (loss)			345,969.		345,969.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	21,516,981.	(ii) Other	6,805.	
	b Less: cost or other basis and sales expenses	7b	16,158,086.	0.			
	c Gain or (loss)	7c	5,358,895.	6,805.			
d Net gain or (loss)			5,365,700.		109,166.	5256534.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER OPERATING INCOME	Business Code					
		900099	672,590.			672,590.	
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d			672,590.				
12 Total revenue. See instructions			94,490,565.	75453331.	155,324.	11274551.	

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	6,200.	6,200.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	39,206,371.	39,206,371.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	225,915.	225,915.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,889,688.	935,562.	431,186.	522,940.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	26,518,372.	21,979,804.	3,451,090.	1,087,478.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	594,933.	490,984.	69,950.	33,999.
9 Other employee benefits	6,880,936.	5,674,906.	952,635.	253,395.
10 Payroll taxes	2,000,854.	1,620,302.	271,767.	108,785.
11 Fees for services (nonemployees):				
a Management				
b Legal	154,677.		154,677.	
c Accounting	260,703.		260,703.	
d Lobbying	1,617.		1,617.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	419,010.		419,010.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	270,571.	179,985.	84,686.	5,900.
13 Office expenses	3,965,795.	3,494,942.	286,481.	184,372.
14 Information technology	1,876,671.	964,394.	902,347.	9,930.
15 Royalties				
16 Occupancy	4,479,061.	4,356,052.	123,009.	
17 Travel	2,103,490.	1,954,919.	94,209.	54,362.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest	3,053,757.	2,997,438.	56,319.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,230,765.	5,702,496.	528,269.	
23 Insurance	807,060.	733,879.	73,181.	
24 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.)				
a CATERING/LECTURER/OTHER	8,655,514.	6,292,990.	2,155,438.	207,086.
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	109,601,960.	96,817,139.	10,316,574.	2,468,247.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <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
Assets	1 Cash - non-interest-bearing	5,091,545.	1	7,269,949.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	4,782,875.	3	1,262,316.
	4 Accounts receivable, net	1,116,896.	4	819,948.
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	1,414,026.	7	905,869.
	8 Inventories for sale or use	386,375.	8	353,151.
	9 Prepaid expenses and deferred charges	2,556,555.	9	2,220,565.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 228,242,153.		
	b Less: accumulated depreciation	10b 156,457,599.	75,280,196.	10c 71,784,554.
	11 Investments - publicly traded securities	53,151,572.	11	47,304,722.
	12 Investments - other securities. See Part IV, line 11	52,560,911.	12	47,331,918.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	283,680.	15	155,565.
16 Total assets. Add lines 1 through 15 (must equal line 33)	196,624,631.	16	179,408,557.	
Liabilities	17 Accounts payable and accrued expenses	6,484,038.	17	4,939,126.
	18 Grants payable		18	
	19 Deferred revenue	2,576,678.	19	2,107,418.
	20 Tax-exempt bond liabilities	56,408,859.	20	50,973,633.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	5,000,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,127,074.	25	2,818,832.
	26 Total liabilities. Add lines 17 through 25	68,596,649.	26	65,839,009.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	53,773,601.	27	40,961,616.
	28 Net assets with donor restrictions	74,254,381.	28	72,607,932.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	128,027,982.	32	113,569,548.
	33 Total liabilities and net assets/fund balances	196,624,631.	33	179,408,557.

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	94,490,565.
2	Total expenses (must equal Part IX, column (A), line 25)	2	109,601,960.
3	Revenue less expenses. Subtract line 2 from line 1	3	-15,111,395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	128,027,982.
5	Net unrealized gains (losses) on investments	5	370,466.
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	282,495.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	113,569,548.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
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:
 Separate basis Consolidated basis 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?
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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization SAINT MICHAEL ' S COLLEGE	Employer identification number 03-0179403
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16348022.	13785143.	5165602.	10168309.	7607359.	53074435.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	16348022.	13785143.	5165602.	10168309.	7607359.	53074435.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3256160.
6 Public support. Subtract line 5 from line 4.						49818275.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	16348022.	13785143.	5165602.	10168309.	7607359.	53074435.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1297355.	3861760.	3794452.	4039048.	3412811.	16405426.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	378,588.	8,731.		48,027.	46,158.	481,504.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	959,574.	421,496.	2126182.	730,640.	672,590.	4910482.
11 Total support. Add lines 7 through 10						74871847.
12 Gross receipts from related activities, etc. (see instructions)					12	417,375,324.
13 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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	66.54 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	62.56 %
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2023. 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 stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2024. 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 stop here. 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 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. 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; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 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; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17.

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.

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.

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
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
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 of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
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 of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
2a		
2b		
3a		
3b		

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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

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 - <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). 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 - <i>explain in Part VI</i>). 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 Total 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. 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 OPERATING INCOME

2020 AMOUNT: \$ 959,574.

2021 AMOUNT: \$ 421,496.

2022 AMOUNT: \$ 2,126,182.

2023 AMOUNT: \$ 730,640.

2024 AMOUNT: \$ 672,590.

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.

Name of organization SAINT MICHAEL 'S COLLEGE	Employer identification number (EIN) 03-0179403
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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 \$ _____
- 3 Volunteer hours for political campaign activities _____

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 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">IF the amount on line 1e, column (a) or (b), is:</th> <th>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.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		1,617.
j Total. Add lines 1c through 1i			1,617.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 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."

1 Dues, assessments, and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 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	
5 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:

THE COLLEGE IS A MEMBER OF THE ASSOCIATION OF VERMONT INDEPENDENT COLLEGES (AVIC) WHICH REPRESENTS ITS MEMBER IN VARIOUS FORMS SERVING THE INTERESTS OF HIGHER EDUCATION, INCLUDING GOVERNMENT LEGISLATION. ANNUAL MEMBERSHP FEES PAID TO THIS ORGANIZATION WERE \$17,791. APPROXIMATELY \$1,617 OF THIS AMOUNT WAS ALLOCATED TO LOBBYING.

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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

SAINT MICHAEL'S COLLEGE

Employer identification number

03-0179403

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?

Yes No

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)?

Yes No

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

(ii) Assets included in Form 990, Part X

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	95,450,950.	93,377,443.	94,357,409.	103,031,940.	77,654,938.
b Contributions	4,148,783.	2,443,410.	834,679.	1,270,364.	3,340,987.
c Net investment earnings, gains, and losses	8,077,764.	11,292,031.	6,858,292.	-5,622,692.	25,767,599.
d Grants or scholarships	5,588,680.	5,442,796.	4,201,665.	3,135,107.	2,999,947.
e Other expenditures for facilities and programs	15,133,853.	5,842,662.	4,027,633.	565,084.	378,138.
f Administrative expenses	414,897.	376,476.	443,639.	622,012.	353,499.
g End of year balance	86,540,067.	95,450,950.	93,377,443.	94,357,409.	103,031,940.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 19.8947 %
 - b Permanent endowment 50.3971 %
 - c Term endowment 29.7082 %
- 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? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 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		1,888,203.		1,888,203.
b Buildings		180,215,195.	124,566,135.	55,649,060.
c Leasehold improvements				
d Equipment		40,947,406.	28,303,164.	12,644,242.
e Other		5,191,349.	3,588,300.	1,603,049.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				71,784,554.

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) CASH EQUIVALENTS	21,766,913.	END-OF-YEAR MARKET VALUE
(B) INTERNATIONAL EQUITIES	2,116,909.	END-OF-YEAR MARKET VALUE
(C) DIRECTIONAL HEDGE		
(D) COMPOSITE	81,877.	END-OF-YEAR MARKET VALUE
(E) PRIVATE EQUITY	1,816,985.	END-OF-YEAR MARKET VALUE
(F) GLOBAL FIXED INCOME		
(G) COMPOSITE	8,203,047.	END-OF-YEAR MARKET VALUE
(H) REAL ASSET COMPOSITE	5,618,126.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	47,331,918.	

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)		
Total. (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)	
Total. (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) AMOUNTS HELD ON BEHALF OF OTHERS	437,330.
(3) REFUNDABLE ADVANCES	301,993.
(4) ANNUITY OBLIGATION	23,965.
(5) CAPITAL LEASE OBLIGATION	154,881.
(6) OTHER LIABILITIES	1,900,663.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	2,818,832.

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.

1	Total revenue, gains, and other support per audited financial statements		1	55,292,230.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	370,466.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	282,495.	
e	Add lines 2a through 2d	2e		652,961.
3	Subtract line 2e from line 1		3	54,639,269.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	419,010.	
b	Other (Describe in Part XIII.)	4b	39,432,286.	
c	Add lines 4a and 4b	4c		39,851,296.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	94,490,565.

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.

1	Total expenses and losses per audited financial statements		1	69,750,664.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1		3	69,750,664.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	419,010.	
b	Other (Describe in Part XIII.)	4b	39,432,286.	
c	Add lines 4a and 4b	4c		39,851,296.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	109,601,960.

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 V, LINE 4:

SAINT MICHAEL'S COLLEGE ENDOWMENT AND QUASI-ENDOWMENT CONSIST OF APPROXIMATELY 239 INDIVIDUAL ENDOWMENT ACCOUNTS ESTABLISHED FOR A VARIETY OF PURPOSES IN ACCORDANCE WITH APPLICABLE LAW AND DONOR INTENT AND FUNDS DESIGNATED BY THE COLLEGE'S BOARD TO OPERATE AS ENDOWMENT (QUASI-ENDOWMENT). A MAJORITY OF THE FUNDS PROVIDE SCHOLARSHIPS AND FINANCIAL AID ASSISTANCE TO UNDERGRADUATE STUDENTS. OTHER USES OF THE FUNDS INCLUDE, BUT ARE NOT LIMITED TO, PROVIDING STUDY ABROAD AND RESEARCH OPPORTUNITIES, CREATION AND FUNDING OF FACULTY CHAIRS, SUPPORT FOR STUDENT SERVICES AND ACTIVITIES, LIBRARY ACQUISITIONS AND FUNDING FOR LECTURE SERIES. THE PRIMARY OBJECTIVE OF THE PORTFOLIO IS TO ACHIEVE AN ANNUALIZED TOTAL RETURN, NET OF FEES, THROUGH APPRECIATION AND INCOME, EQUAL TO OR GREATER THAN THE RATE OF INFLATION PLUS ANY SPENDING AND ADMINISTRATIVE EXPENSES THUS, AT A MINIMUM MAINTAINING THE PURCHASING POWER OF THE PORTFOLIO. THE INVESTMENTS ARE MANAGED UNDER THE UNIFORM PRUDENT INVESTOR ACT STANDARD REQUIRING THE EXERCISE OF REASONABLE CARE, SKILL, AND CAUTION WHILE BEING APPLIED TO INVESTMENTS NOT IN ISOLATION, BUT IN THE CONTEXT OF THE PORTFOLIO AS A WHOLE AND AS A PART OF AN OVERALL STRATEGY HAVING RISK AND RETURN OBJECTIVES REASONABLY SUITED TO THE PORTFOLIO. SINCE SHORT TERM MARKET FLUCTUATION MAY CAUSE VARIATIONS IN INVESTMENT PERFORMANCE, IT IS INTENDED THAT THE OBJECTIVES WILL BE ACHIEVED OVER A FULL MARKET CYCLE.

PART X, LINE 2:

UNCERTAIN TAX POSITIONS

THE COLLEGE IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3)

Part XIII Supplemental Information (continued)

OF THE INTERNAL REVENUE CODE AND IS GENERALLY EXEMPT FROM INCOME TAX PURSUANT TO SECTION 501(A) OF THE CODE. THE COLLEGE BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ACCOUNTING ADJUSTMENT 282,495.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

STUDENT FINANCIAL AID 39,432,286.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

STUDENT FINANCIAL AID 39,432,286.

PART V, LINE 2
ENDOWMENT FUNDS

THE COLLEGE HAS ADOPTED FASB ASU 2016-14, PRESENTATION OF THE FINANCIAL STATEMENTS OF NOT-FOR-PROFIT ENTITIES. AS A RESULT, THE JUNE 30, 2025 AUDITED FINANCIAL STATEMENTS CLASSIFY NET ASSETS AS EITHER NET ASSETS WITHOUT DONOR RESTRICTIONS, OR NET ASSETS WITH DONOR RESTRICTIONS.

FOR PURPOSES OF PART V, LINE 2, THE COLLEGE HAS REPORTED ITS YEAR END ENDOWMENT BALANCE WITHOUT DONOR RESTRICTION AS QUASI-ENDOWMENT AND ITS YEAR END BALANCE WITH DONOR RESTRICTIONS AS PERMANENT ENDOWMENT AND TEMPORARILY RESTRICTED ENDOWMENT, REPSECTIVELY.

**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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

SAINT MICHAEL 'S COLLEGE

Employer identification number

03-0179403

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	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?	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	X	
SEE PART II		
4 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	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?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
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?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
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	X	

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 3 - EXPLANATION OF NONDISCRIMINATION POLICY:
THE COLLEGE INCLUDES ITS RACIALLY NONDISCRIMINATORY POLICY IN
ITS BYLAWS, EMPLOYEE HANDBOOK, GRADUTE AND UNDERGRADUATE
CATALOGS, STUDENTS CODE OF CONDUCT AND COLLEGE POLICY
HANDBOOK, FACULTY REGULATIONS, ON OUR APPLICAITION
SUPPLEMENT, THE HOMEPAGE OF THE COLLEGE'S WEBSITE, AND WITHIN
THE NEASC SELF STUDY DOCUMENT FOR REACCREDITATION.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
SAINT MICHAEL'S COLLEGE RECEIVES GRANTS AND STUDENT AID FROM VARIOUS
GOVERNMENTAL AGENCIES FOR SUPPORT OF EDUCATIONAL AND STUDENT PROGRAMS.

**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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization SAINT MICHAEL 'S COLLEGE	Employer identification number 03-0179403
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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		2,821,366.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		2,943,569.
CENTRAL AMERICA AND THE CARRIBEAN	0	0	PROGRAM SERVICES	STUDY ABROAD	21,250.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROAD	70,686.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDY ABROAD	242,048.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD	41,297.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		ATHLETIC TRAINING	4,477.
NORTH AMERICA	0	0		ATHLETIC TRAINING	882.
3 a Subtotal	0	0			6,145,575.
b Total from continuation sheets to Part I	0	0			51,028.
c Totals (add lines 3a and 3b)	0	0			6,196,603.

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

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

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDENT SCHOLARSHIP	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	1	2,288.	WIRE	0.	NA	NA
STUDENT SCHOLARSHIP	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	6	85,052.	WIRE	0.	NA	NA
STUDENT SCHOLARSHIP	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	9	119,974.	WIRE	0.	NA	NA
STUDENT SCHOLARSHIP	CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	1	18,601.	WIRE	0.	NA	NA

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

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.

**SCHEDULE F, PART I, LINE 3F
ACTIVITIES OUTSIDE THE UNITED STATES**

STUDY PROGRAMS

SAINT MICHAEL'S COLLEGE INTERNATIONAL SHORT-TERM STUDY PROGRAMS ARE AN IMPORTANT AND CREATIVE WAY FOR FACULTY AND STUDENTS TO EXPAND THE BOUNDARIES OF THE SAINT MICHAEL'S CAMPUS. SHORT-TERM STUDY PROGRAMS ARE ACADEMIC COURSES DEVELOPED BY FACULTY. TYPICALLY LASTING TWO WEEKS, THESE PROGRAMS INVOLVE STUDY ABROAD, MAY INCLUDE DIRECT INVOLVEMENT IN ISSUES COVERED IN AN ON-CAMPUS COURSE AND PROVIDE DIRECT EXPERIENCE ON A PARTICULAR TOPIC IN A PARTICULAR LOCALE.

STUDY ABROAD

SAINT MICHAEL'S COLLEGE UTILIZES OVER 20 THIRD-PARTY PROGRAM PROVIDERS AND EXCHANGE PARTNERS TO PROVIDE STUDENTS WITH OPPORTUNITIES TO STUDY IN OVER 70 COUNTRIES. THERE ARE MANY DIVERSE PROGRAM OFFERINGS FOR A STUDENT'S STUDY ABROAD EXPERIENCE. IN OUR INCREASINGLY GLOBAL SOCIETY, MORE AND MORE STUDENTS RECOGNIZE THE VALUE OF SPENDING A SEMESTER OR A YEAR ABROAD.

SCHEDULE F, PART III

SCHOLARSHIPS - SCHOLARSHIPS RELATE TO STUDENTS STUDYING ABROAD FOR A SEMESTER OR A YEAR. ALL SCHOLARSHIPS ARE APPLIED TO THE STUDENT'S ACCOUNT BALANCE. THE COLLEGE'S PRACTICE HAS BEEN TO AWARD AID BASED ON MERIT AND/OR NEED TO STUDENTS ACCEPTED INTO THE STUDY ABROAD PROGRAM.

**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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

SAINT MICHAEL'S COLLEGE

Employer identification number

03-0179403

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

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

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	1101	31,673,626.	0.		NA
UNDERGRADUATE ENDOWMENT FUNDED AID	324	3,578,750.	0.		NA
UNDERGRATE ATHLETIC GRANTS	349	3,559,732.	0.		NA
SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS	284	358,973.	0.		NA
GRADUATE STUDENT GRANTS	5	35,290.	0.		NA

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

SCHEDULE I, PART III

GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS IN THE U.S.

THE COLLEGE RECOGNIZES THE HIGH COST OF A PRIVATE EDUCATION AND ATTEMPTS TO ADDRESS AS MUCH AS WE PRACTICALLY CAN TO CLOSE THE GAP BETWEEN THE COST OF ATTENDANCE AND FAMILY RESOURCES USING A VARIETY OF SOURCES, INCLUDING FEDERAL, STATE AND INSTITUTIONAL (COLLEGE) FUNDING. THE THREE TYPES OF FINANCIAL ASSISTANCE WE EMPLOY INCLUDES GRANTS AND SCHOLARSHIPS, LOANS, AND STUDENT EMPLOYMENT. THE COLLEGE'S PRACTICE HAS BEEN TO AWARD AID BASED ON MERIT AND/OR NEED TO ALL STUDENTS ACCEPTED FOR ADMISSION. THE AMOUNT OF AID A STUDENT RECEIVES UPON INITIAL ENROLLMENT GENERALLY IS AWARDED FOR EACH YEAR HE/SHE ATTENDS SAINT MICHAEL'S COLLEGE.

**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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

SAINT MICHAEL'S COLLEGE

Employer identification number

03-0179403

Part I Questions Regarding Compensation

	Yes	No
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 type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input 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	X	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	X	
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"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <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?		X
b Participate in or receive payment from a supplemental nonqualified retirement plan?		X
c Participate in or receive payment from an equity-based compensation arrangement?		X
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?		X
b Any related organization?		X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?		X
b Any related organization?		X
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		X
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		X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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) RICHARD PLUMB PRESIDENT/TRUSTEE	(i)	381,511.	0.	1,989.	23,000.	71,149.	477,649.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAWN M. ELLINWOOD VP FOR STUDENT AFFAIRS	(i)	189,844.	0.	0.	5,902.	44,221.	239,967.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT ROBINSON VP FOR FINANCE/TREASURER	(i)	188,169.	0.	0.	5,942.	37,603.	231,714.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) GRETCHEN GALBRAITH VP ACADEMIC AFFAIRS	(i)	189,902.	0.	0.	5,821.	30,045.	225,768.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JEFFERY TRUMBOWER PROFESSOR OF RELIGIOUS STUDIES	(i)	159,007.	0.	0.	5,047.	29,833.	193,887.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SARAH HASTINGS PROFESSOR PSYCHOLOGY	(i)	150,166.	0.	0.	3,453.	32,394.	186,013.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MICHAEL LARSEN PROFESSOR MATHEMATICS	(i)	141,140.	0.	0.	3,617.	35,433.	180,190.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFREY AYERS PROFESSOR POLITICAL SCIENCE	(i)	158,428.	0.	0.	3,946.	16,978.	179,352.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) TERRI SELBY EXECUTIVE DIRECTOR IN INST. ADV.	(i)	132,294.	0.	0.	3,802.	21,954.	158,050.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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:

COMPENSATION INFORMATION

FOR ELIGIBLE EMPLOYEES, COLUMN (D) NONTAXABLE BENEFITS PRIMARILY CONSISTS OF HEALTH CARE AND DENTAL BENEFITS. DETAILS FOR AMOUNTS REPORTED IN COLUMNS B (III) AND COLUMN (D) ARE LISTED BELOW:

RICHARD PLUMB - COLUMN B (III) INCLUDES PERSONAL USE OF A COLLEGE VEHICLE. COLUMN (D) INCLUDES A HOUSING ALLOWANCE OF \$40,710.

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 for instructions and the latest information.

Name of the organization **SAINT MICHAEL'S COLLEGE** Employer identification number **03-0179403**

Part I	Bond Issues	SEE PART VI FOR COLUMN (F) CONTINUATIONS												
		(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	
	A	VT EDU & HEALTH BLDG FINANCE AGY SERIES 2015	23-7154467	924166HA2	11/10/15	19878706.	CONSTRUCTION, EQUIPMENT		X		X			X
	B	VT EDU & HEALTH BLDG FINANCE AGY SERIES 2023	23-7154467	924166LL3	05/24/23	36524099.	CONSTRUCTION, EQUIPMENT, REFUND		X		X			X
	C													
	D													

Part II	Proceeds									
		A		B		C		D		
	1	Amount of bonds retired	3,850,000.							
	2	Amount of bonds legally defeased								
	3	Total proceeds of issue	19,878,706.		36,524,099.					
	4	Gross proceeds in reserve funds	319,325.		2,785,363.					
	5	Capitalized interest from proceeds			1,072,729.					
	6	Proceeds in refunding escrows								
	7	Issuance costs from proceeds	377,716.		730,482.					
	8	Credit enhancement from proceeds								
	9	Working capital expenditures from proceeds								
	10	Capital expenditures from proceeds	19,181,665.		7,691,938.					
	11	Other spent proceeds			23,811,722.					
	12	Other unspent proceeds			431,865.					
	13	Year of substantial completion	2016		2025					
			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					

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

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

Part III Private Business Use								
	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

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

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

	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: VT EDU & HEALTH BLDG FINANCE AGY SERIES 2023

(F) DESCRIPTION OF PURPOSE:

CONSTRUCTION, EQUIPMENT, REFUNDING OF SERIES 2012 ISSUED 05/24/12

PART II, LINES 16-17

THE 2015 SERIES BONDS WERE USED TO CONSTRUCT AND FURNISH A NEW RESIDENCE HALL. THE PROJECT WAS COMPLETED IN AUGUST 2016. THE COLLEGE MAINTAINS BOOKS AND RECORDS TO SUPPORT ALLOCATION AND TO REQUEST REIMBURSEMENT OF EXPENSES FROM THE BOND TRUSTEE. THE BOND TRUSTEE REVIEWED ALL REQUESTS TO ENSURE THE EXPENSE WAS APPROPRIATE WITHIN THE PURPOSE AS DEFINED IN THE BOND DOCUMENTS. THE 2023 SERIES BONDS WERE ISSUED TO REFINANCE THE 2012 SERIES BONDS. THE COLLEGE'S 2015 SERIES BOND WAS NOT INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD AS THE BOND CLOSED IN NOVEMBER 2015 AND ALL FUNDS WERE EXPENSED BY APRIL 2018.

PART III, LINE 9 AND PART IV, LINE 7

ADOPTION OF MANAGEMENT PRACTICES:

THE COLLEGE HAS WORKED WITH CONSULTANTS AND BOND COUNCIL TO MAKE

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

CERTAIN COLLEGE PERSONNEL IS FAMILIAR WITH THE RULES AND REGULATIONS FOR POST-ISSUANCE COMPLIANCE OF ITS TAX-EXEMPT BOND LIABILITIES. ALL USE OF THE BUILDING IS TRACKED BY THE COLLEGE'S CONFERENCE AND SPECIAL EVENTS DEPARTMENT. THE COLLEGE'S TAX-EXEMPT DEBT POST-ISSUANCE COMPLIANCE POLICY HAVE BEEN CREATED, REVIEWED, AND IMPLEMENTED BY MANAGEMENT AND APPROVED BY THE BOARD OF TRUSTEES.

PART IV, LINE 2C

ABRITRAGE CALCULATIONS:

THE INITIAL REBATE CALCULATIONS FOR THE 2015 SERIES BONDS FOR THE TEMPORARY PERIOD, NOVEMBER 10, 2015 TO NOVEMBER 10, 2018, WAS COMPLETED ON DECEMBER 6, 2018, AND NO REBATE WAS DUE. THE FIRST YEAR REBATE CALCULATION FOR THE PERIOD NOVEMBER 10, 2015 TO NOVEMBER 10, 2020, ALSO REFLECTED NO REBATE WAS DUE.

PART V

PROCEDURES TO UNDERTAKE CORRECTIVE ACTION

THE COLLEGE'S TAX-EXEMPT DEBT POST-ISSUANCE COMPLIANCE POLICIES AND PROCEDURES IDENTIFY AND ADDRESS ANY VIOLATIONS OF FEDERAL TAX REQUIREMENTS PURSUANT TO A VOLUNTARY CLOSING AGREEMENT PROGRAM WHERE SELF-REMEDIATION MAY BE UNAVAILABLE.

**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 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

SAINT MICHAEL'S COLLEGE

Employer identification number

03-0179403

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				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	16	501,439.	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 (<u>SWIM & DIVE REC</u>)	X	1	30,500.	FMV
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** **1**

	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):

THE COLLEGE IS REPORTING THE NUMBER OF CONTRIBUTIONS RELATED TO EACH TYPE OF PROPERTY THAT WAS RECEIVED DURING FY25.

SCHEDULE M, PART I, LINE 32B:

THE COLLEGE USES A CUSTODIAN TO HOLD AND PROCESS ALL INVESTMENT TRANSACTIONS INCLUDING ASSET SAFEKEEPING AND COLLECTION OF DIVIDENDS AND INTEREST. ALL SECURITY CONTRIBUTIONS ARE DELIVERED TO THE CUSTODIAN WITH THE INSTRUCTION FOR IMMEDIATE SALE.

**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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

SAINT MICHAEL'S COLLEGE

Employer identification number

03-0179403

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION

IT IS THE MISSION OF SAINT MICHAEL'S COLLEGE TO CONTRIBUTE THROUGH HIGHER EDUCATION TO THE ENHANCEMENT OF THE HUMAN PERSON AND TO THE ADVANCEMENT OF HUMAN CULTURE IN THE LIGHT OF THE CATHOLIC FAITH.

FORM 990, PART III, LINE 1 & PART III, LINE 1

SAINT MICHAEL'S COLLEGE IS CATHOLIC LIBERAL ARTS RESIDENTIAL COLLEGE COMMITTED TO THE PURSUIT OF ACADEMIC EXCELLENCE, WITH AN UNDERGRADUATE ENROLLMENT OF APPROXIMATELY 1,120 STUDENTS AND 203 GRADUATE AND INTERNATIONAL STUDENTS. WE CREATE AND SUSTAIN AN OPTIMAL LIVING AND LEARNING ENVIRONMENT THAT PROMOTES A VIBRANT INTELLECTUAL LIFE AND CHALLENGES STUDENTS TO ENGAGE IN ACTIVITIES TO EXTEND THEIR MINDS AND EXPERIENCE WITHIN AND BEYOND OUR VERMONT LOCATION.

FORM 990, PART III, LINE 4A

ACADEMIC PROGRAMS AND FINANCIAL SUPPORT

THE ACADEMIC PROGRAM IS AT THE HEART OF THE COLLEGE'S MISSION. THE COLLEGE PROVIDES EDUCATION WITH A SOCIAL CONSCIENCE, PRODUCING GRADUATES WITH INTELLECTUAL TOOLS TO LEAD SUCCESSFUL, PURPOSEFUL LIVES THAT WILL CONTRIBUTE TO PEACE AND JUSTICE IN OUR WORLD. SAINT MICHAEL'S COLLEGE STUDENTS PERSONALIZE THEIR EDUCATION THROUGH RESEARCH, INTERNSHIPS, AND SMALL CLASSES, PREPARING THEM FOR A LIFETIME, NOT JUST FOR THEIR FIRST JOB OUT OF COLLEGE. THE ACADEMIC PROGRAM IS RIGOROUS AND CALIBRATED TO THE APPROPRIATE DEVELOPMENTAL LEVELS OF STUDENTS (FIRST-YEAR STUDENTS THROUGH GRADUATE LEVEL). THE UNDERGRADUATE ACADEMIC PROGRAM OFFERS DEGREES IN 23 DIFFERENT MAJORS FOR THE BACHELOR OF ARTS DEGREE AND 20 MAJORS FOR THE BACHELOR OF SCIENCE DEGREE. STUDENTS MAY ALSO CHOOSE FROM 40 MINOR PROGRAMS. THE ACADEMIC PROGRAM FOR GRADUATE STUDENTS INCLUDES 3 PROGRAMS LEADING TO MASTER'S DEGREES IN CLINICAL PSYCHOLOGY, EDUCATION, AND TEACHING ENGLISH TO SPEAKERS OF OTHER LANGUAGES. SAINT MICHAEL'S COLLEGE HAS THE FOLLOWING 5 CENTERS SUPPORTING THE ACADEMIC PROGRAMS, CENTER FOR GLOBAL ENGAGEMENT, CENTER FOR EQUITY AND JUSTICE, CENTER FOR THE ENVIRONMENT, CENTER FOR FAITH AND CULTURE, PEACE AND JUSTICE CENTER. THE COLLEGE HAS A ROBUST HONORS PROGRAM WHICH BEGAN IN THE LATE 1980'S, AND RECOGNIZES HIGH ACHIEVEMENT AMONG OUR STUDENTS.

THE COLLEGE HAS MADE STRIDES IN EDUCATING STUDENTS BEYOND THE CLASSROOM IN PREPARATION FOR THEIR CAREERS AFTER GRADUATION. THE COLLEGE HAS DEVELOPED A LIFE AFTER COLLEGE PROGRAM AS PART OF OUR CURRENT STRATEGIC PLAN, WHICH INCLUDES DEVELOPMENT OF A COHESIVE STUDENT EMPLOYMENT PROGRAM AND A MORE EXTENSIVE FOCUS ON INTERNSHIPS AND RESEARCH. SAINT MICHAEL'S COLLEGE EMPHASIZES THE IMPORTANCE OF EXPERIENTIAL LEARNING AS A KEY DRIVER OF STUDENTS' LIFETIME WELL-BEING AND ENGAGEMENT.

THE ACADEMIC PROGRAM IS SUPPORTED BY MANY PROFESSIONAL AND ADMINISTRATIVE STAFF INCLUDING INFORMATION TECHNOLOGY (IT), ACADEMIC ENRICHMENT PROGRAMS, LIBRARY AND INFORMATION SERVICES (LIS), REGISTRAR'S OFFICE, THE VICE PRESIDENT OF ACADEMIC AFFAIRS AND THE DEAN. THE IT DEPARTMENT IS COMMITTED TO CREATING A ROBUST TECHNOLOGY ENVIRONMENT FOR THE COLLEGE'S STUDENTS, FACULTY AND STAFF. THEY SUPPORT ADMINISTRATIVE APPLICATIONS, INSTRUCTIONAL TECHNOLOGY SERVICES, ALL OF

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 SAINT MICHAEL'S COLLEGE	Employer identification number 03-0179403
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WHICH SUPPORT THE MISSION AND GOALS OF THE COLLEGE BY PROVIDING ITS CONSTITUENTS WITH A RELIABLE, SECURE, AND FAST CAMPUS NETWORK; SUPPORT FOR THE APPROPRIATE INTEGRATION OF TECHNOLOGY INTO TEACHING AND RESEARCH; AND TECHNOLOGY SUPPORT FOR ADMINISTRATIVE OPERATIONS. SAINT MICHAEL'S COLLEGE IS COMMITTED TO STUDENTS' ACADEMIC SUCCESS THEREFORE, IN ADDITION TO ACADEMIC ENRICHMENT PROGRAMS DESIGNED TO ENHANCE THE LEARNING EXPERIENCE, A VARIETY OF SERVICES ARE OFFERED TO ENSURE THAT OUR STUDENTS GET THE MOST OUT OF THEIR EDUCATION INCLUDING INDEPENDENT STUDIES, CENTER FOR STUDENT DIVERSITY, EMPOWERMENT, AND COMMUNITY, WOMEN AND GENDER CENTER, SERVICE LEARNING, STUDENT/FACULTY RESEARCH AND INTERNSHIPS TO NAME A FEW. THESE SERVICES AND ACTIVITIES ARE DESIGNED TO ASSIST OUR STUDENTS IN ENHANCING THEIR LEARNING OPPORTUNITIES IN ORDER TO ACHIEVE THEIR FULLEST INTELLECTUAL DEVELOPMENT. ACADEMIC ENRICHMENT ALSO SUPPORTS FACULTY IN OFFERING EXTRA-CURRICULAR ACTIVITIES THAT ENHANCE THEIR CLASSROOM TEACHING AND IN DESIGNING INNOVATIVE COMPONENTS TO THEIR COURSES THAT FOSTER EXPERIENTIAL LEARNING. LIS PROVIDES STUDENTS, FACULTY, AND STAFF WITH THE INFORMATION RESOURCES AND SERVICES THEY NEED FOR STUDY, TEACHING AND RESEARCH. THE LIBRARY STRIVES TO DETERMINE COMMUNITY NEEDS AND RESPOND TO THEM BY SHAPING ITS RESOURCES AND SERVICES TO PROVIDE THE BEST POSSIBLE SUPPORT FOR THE ACADEMIC PROGRAM.

FORM 990, PART III, LINE 4B
AUXILIARY ENTERPRISES

AS A 100% RESIDENTIAL COLLEGE, WE MAKE LIVING ON CAMPUS JUST AS IMPORTANT A LEARNING EXPERIENCE AS THE CURRICULUM IN THE CLASSROOMS. THEREFORE, IN ADDITION TO EXPENSES ASSOCIATED WITH ON-CAMPUS DINING SERVICES, AUXILIARY SERVICES EXPENSES INCLUDE RESIDENCE HALL BOND INTEREST, DEPRECIATION EXPENSE AND COSTS RELATED TO THE BOOKSTORE, PRINTING AND MAILING SERVICES, SPECIAL EVENTS, SUMMER PLAYHOUSE AND OTHER AUXILIARY PROGRAMS THAT SUPPORT OUR STUDENTS' LIVING AND LEARNING EXPERIENCE. AS PART OF THE RESIDENTIAL EXPERIENCE, THERE ARE UNIQUE HOUSING OPTIONS AVAILABLE ON CAMPUS BASED ON COMMON INTERESTS THAT STUDENTS SHARE SUCH AS GREAT HOUSING (ALCOHOL AND DRUG FREE), HONORS HOUSING, LGBTQIA HOUSING, AND THE GEAR (GLOBAL EXPERIENCE ACADEMIC RESIDENTIAL) PROGRAM HOUSING WHICH PROVIDES AN OPPORTUNITY FOR U.S. STUDENTS TO LIVE WITH INTERNATIONAL STUDENTS. DINING ON CAMPUS PROVIDES THE SOCIAL EXPERIENCE ESSENTIAL TO A WELL-ROUNDED CAMPUS LIFE.

FORM 990, PART III, LINE 4C
STUDENT SERVICES

STUDENTS ARE AT THE CENTER OF THE COLLEGE'S MISSION. WHILE THE ACADEMIC ELEMENTS ARE FOREMOST, SUPPORTING THE STUDENTS' PERSONAL DEVELOPMENT IS VITAL AS WELL. THE OFFICES OF ADMISSIONS, STUDENT LIFE, EDMUNDITE CAMPUS MINISTRY, ADVENTURE SPORTS CENTER, ATHLETICS AND MANY STUDENT CLUBS WORK TO ENHANCE STUDENTS' PERSONAL GROWTH AS WELL AS THEIR ACADEMIC SUCCESS. TO SUPPLEMENT THE ACADEMIC CULTURE ON CAMPUS AND ENRICH OVERALL QUALITY OF THE COLLEGE EXPERIENCE, A VARIETY OF WEEKEND PROGRAMS IS OFFERED TO STUDENTS, ALONG WITH MANY OUTDOOR PROGRAMS SUCH AS THE SKI PASS, A VARIETY OF MINISTRY PROGRAMS, AND COMMUNITY SERVICE OPPORTUNITIES THROUGH MOVE (MOBILIZATION OF VOLUNTEER EFFORTS).

THE OFFICE OF STUDENT ACTIVITIES STRIVES TO PROVIDE STUDENTS OPPORTUNITIES TO DEVELOP AS ETHICAL LEADERS AND ENGAGED CITIZENS, AND OFFERS A WIDE VARIETY OF PROGRAMS AND ACTIVITIES DESIGNED TO MEET THEIR NEEDS. THE COLLEGE HAS EMBRACED THE YOU COUNT PROGRAM (COMMUNITY,

Name of the organization SAINT MICHAEL'S COLLEGE	Employer identification number 03-0179403
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OWNERSHIP, UNITY IN DIVERSITY, NOTICE EACH OTHER AND TAKE CARE OF SELF AND OTHERS) WHICH FOSTERS AN INCLUSIVE AND SEAMLESS LEARNING ENVIRONMENT THAT ENHANCES ENGAGEMENT, AWARENESS AND PERSONAL DEVELOPMENT. EDUCATIONAL PROGRAMS OFFERED IN THE RESIDENCE HALLS HELP TO BRING PEOPLE TOGETHER WHO MIGHT NOT HAVE OTHERWISE MET, HELP PEOPLE TO BETTER KNOW EACH OTHER, AND EXPOSE INDIVIDUALS TO NEW IDEAS AND BELIEFS. FLOOR VISITORS DIALOGUE PROGRAMS PROVIDE AN ENVIRONMENT CONDUCIVE FOR FACULTY, STAFF AND STUDENT DIALOGUE ABOUT ACADEMIC AND COMMUNITY PURSUITS. THESE ARE A SAMPLE OF THE PROGRAMMING OFFERED TO STUDENTS IN THE RESIDENCE HALLS. THE OFFICE OF STUDENT ACTIVITIES ASSISTS THE STUDENT GOVERNMENT ON CAMPUS AS WELL AS STUDENT CLUBS. APPROXIMATELY 95% OF THE STUDENT POPULATION PARTICIPATES IN STUDENT ACTIVITIES PROGRAMS.

THE COLLEGE EMBRACES AND SUPPORTS STUDENTS' COMMITMENT TO COMMUNITY SERVICES REFLECTED BY THE FACT THAT ABOUT 50% OF OUR STUDENTS PARTICIPATE IN A SERVICE ACTIVITY THROUGH OUR MOVE PROGRAM PART OF EDMUNDITE CAMPUS MINISTRY. THE FUNDAMENTAL OBJECTIVE OF EDMUNDITE CAMPUS MINISTRY IS TO HELP STUDENTS, FACULTY AND STAFF REFLECT ON AND CELEBRATE THE SPIRITUAL AND RELIGIOUS DIMENSIONS OF THEIR LIVES WHILE AT SAINT MICHAEL'S COLLEGE. PROGRAMS SUCH AS RETREATS, LITURGIES, SPIRITUAL DIRECTION, AND PRAYERFUL REFLECTION MEALS ARE DESIGNED TO ENCOURAGE EVERYONE TO STEP BACK AND EXPERIENCE LIFE AT ITS DEEPEST, MOST MEANINGFUL LEVEL. ABOUT 5% OF OUR STUDENT POPULATION IS INVOLVED IN WEEKLY OR DAILY WORSHIP AS WELL AS ATTENDANCE IN THESE PROGRAMS.

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

FORM 990 SCHEDULES ARE PREPARED BY COLLEGE PERSONNEL WITH GUIDANCE AND REVIEW FROM EXTERNAL TAX PREPARERS WHO SIGN AND FILE THE FORM. PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE EACH MEMBER OF THE BOARD OF TRUSTEES WAS PROVIDED FORM 990 AND ALL SCHEDULES, EXCEPT SCHEDULE B, CONTRIBUTION DETAIL, IN ORDER TO RESPECT OUR DONORS' CONFIDENTIALITY.

FORM 990, PART VI, SECTION B, LINE 12C:
CONFLICT OF INTEREST POLICY

THE SECRETARY OF THE COLLEGE DISTRIBUTES THE CONFLICT OF INTEREST POLICY, QUESTIONNAIRE AND CERTIFICATION ANNUALLY TO TRUSTEES, OFFICERS AND KEY EMPLOYEES. THE SECRETARY REVIEWS THE RESPONSES AND POTENTIAL CONFLICTS ARE BROUGHT TO THE TRUSTEESHIP AND MISSION COMMITTEE FOR REVIEW AND RESOLUTION. A LIST OF INTERLOCKING BOARDS IS MAINTAINED TO ASSIST IN DETERMINING IF POTENTIAL CONFLICTS ARISE DURING THE YEAR. THE TRUSTEESHIP AND MISSION COMMITTEE SUBMITS NAMES FOR BOARD RECRUITMENT AND VETS ANY CONFLICT ISSUES. THIS COMMITTEE PROVIDES INFORMATION TO THE EXECUTIVE COMMITTEE FOR CONSIDERATION AND NOMINATION.

FORM 990, PART VI, SECTION B, LINE 14

DOCUMENT RETENTION AND DESTRUCTION POLICY

THE COLLEGE HAS A HIGH-LEVEL DOCUMENT RETENTION AND DESTRUCTION POLICY AND FOLLOWS SPECIFIC GUIDELINES PROVIDED BY THE INTERNAL REVENUE SERVICE AND RELEVANT REGULATIONS WITH RESPECT TO RECORDS RETENTION AND DESTRUCTION INCLUDING THE PROVISIONS OF VERMONT LAW (9 VSA PART 3 CHAPTER 62 SUBCHAPTER 4 DOCUMENT SAFE DESTRUCTION ACT) WITH RESPECT TO DISPOSAL OF DOCUMENTS CONTAINING CONFIDENTIAL INFORMATION. ANOTHER RESOURCE UTILIZED BY THE COLLEGE IS "RECORD RETENTION AND DISPOSAL: A MANUAL FOR COLLEGE DECISION MAKERS", WHICH PROVIDES THE COLLEGE WITH A GUIDE TO THE APPLICABLE LAWS,

Name of the organization SAINT MICHAEL'S COLLEGE	Employer identification number 03-0179403
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REGULATIONS AND OTHER CONSIDERATIONS FOR ALL AREAS OF OUR BUSINESS, INCLUDING EMPLOYMENT AND ADMISSIONS APPLICATIONS, PAYROLL, STUDENT RECORDS, FINANCIAL, TAX AND CONTRIBUTIONS RECORDS AS WELL AS FEDERAL REPORTING SPECIFIC TO THE HIGHER EDUCATION INDUSTRY.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION POLICY

THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, EXCLUDING THE COLLEGE PRESIDENT, IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE EXECUTIVE OFFICERS OF THE COLLEGE. THE EXECUTIVE COMMITTEE MEETS AS NEEDED TO REVIEW THE COMPENSATION PROGRAM AND MAKE RECOMMENDATIONS FOR ANY CHANGES. THE EXECUTIVE COMMITTEE HAS THE RESPONSIBILITY FOR DECISIONS REGARDING COMPENSATION IN ALL ITS CURRENT AND POTENTIAL FORMS FOR THE EXECUTIVE OFFICERS OF THE COLLEGE. THE VICE PRESIDENT OF HUMAN RESOURCES PROVIDES INDEPENDENT COMPENSATION DATA, E.G. NACUBO, CUPA, ETC. AND ANALYSIS TO THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE MEETS ANNUALLY TO REVIEW SURVEY DATA REGARDING COMPENSATION FOR THE PRESIDENT AND OTHER OFFICERS OF THE COLLEGE. THE MEETING WAS ON OCTOBER 9, 2024 FOR THE FISCAL YEAR INCLUDED IN THIS RETURN.

THE COLLEGE COMPLIES WITH THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTION STANDARD, AS OUTLINED IN TREASURY REGULATIONS SECTION 53.4958-6: (1) EXECUTIVE COMPENSATION IS AUTHORIZED BY AN INDEPENDENT COMMITTEE OF THE BOARD OF DIRECTORS, (2) THE COMMITTEE AUTHORIZING EXECUTIVE COMPENSATION OBTAINS AND RELIES ON APPROPRIATE DATA AS TO COMPARABILITY PRIOR TO MAKING DETERMINATIONS, AND (3) THE COMMITTEE ADEQUATELY DOCUMENTS THE BASIS FOR DETERMINATIONS CONCURRENTLY WITH MAKING THE DETERMINATIONS.

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

PUBLIC DISCLOSURE POLICY

THE COLLEGE IS A PRIVATE ORGANIZATION AND THEREFORE BY LAW, IS NOT REQUIRED TO MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. IN THE INTEREST OF TRANSPARENCY, THE COLLEGE COMPLIES WITH REQUESTS FOR THIS INFORMATION FROM FEDERAL AND STATE REGULATORY AGENCIES, OUR ACCREDITATION AGENCY, OTHER ENTITIES OR INDIVIDUALS IN THE ORDINARY COURSE OF BUSINESS. THE COLLEGE POSTS THE MOST RECENT THREE YEARS OF FORM 990 AND 990-T ON OUR WEBSITE.

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

ACCOUNTING ADJUSTMENT	282,495.
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**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **SAINT MICHAEL'S COLLEGE** Employer identification number **03-0179403**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
SAINT MICHAELS COLLEGE FIRE & RESCUE - 20-1120657, ONE WINOOSKI PARK, COLCHESTER, VT 05439	FIRE & RESCUE	VERMONT	501(C)(3)	7	SMC	X	
MERRILL CEMETARY ASSOCIATION, INC. - 01-0868920, ONE WINOOSKI PARK, COLCHESTER, VT 05439	CEMETARY	VERMONT	501(C)(13)		SMC	X	
GREEN MTN HIGHER EDUCATION CONSORTIUM - 90-1113280, 84 SOUTH SERVICE ROAD, RM202B, MIDDLEBURY, VT 05753	CONSORTIUM	VERMONT	501(C)(3)	509(A)(3)I	N/A		X

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

Schedule R (Form 990) (Rev. 1-2025)

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s 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) SAINT MICHAEL'S COLLEGE FIRE & RESCUE	N	80,017.	FMV
(2) SAINT MICHAEL'S COLLEGE FIRE & RESCUE	Q	310,551.	COST
(3)			
(4)			
(5)			
(6)			

