000 7	l <b>-</b>	-1 O		Tare Dates	_			ОМВ	No. 1545-0687	
Form <b>990-T</b>	Exempt Organization Business Income Tax Return(and proxy tax under section 6033(e))									
Department of the Treasury	For calendar year 2010 or other tax year beginning									
Internal Revenue Service Check box if	ending 06/30, 20 11 . ► See separate instructions. Open to Public Inspection for 501(c)(3) Organizations Only  Name of organization ( Check box if name changed and see instructions.) D Employer identification number									
address changed								oyees' trust, see i	nstructions for Block D on	
B Exempt under section	KENYON COLLEGE							9.)		
X 501(C)(3)	Print	Number, street, and room or suite no. If	f a P.O. t	oox, see page 8 of inst	ructions.	*, ***	31-	4379507	!	
408(e) 220(e)	or								ess activity codes	
408A 530(a)	Type	EATON CENTER					(See	instructions for	r Block E on page 9.)	
529(a)	City or town, state, and ZIP code									
C Book value of all assets	<b>- </b>								525990	
at end of year										
639,158,214.		eck organization type 🕨 X 501			1	) trust	401(a	) trust	Other trust	
		mary unrelated business activity.				ENT 1		^		
		orporation a subsidiary in an affiliate						>	Yes X No	
• .		lentifying number of the parent corpo		<b>•</b>	•	•				
		SHIRLEY O'BRIEN		Te	elephon	e number >	740-42	40-427-5181		
		or Business Income		(A) Income		(B) Expe		1	(C) Net	
1a Gross receipts or						US OF STREET				
		c Balance ▶	1c	421,2	226.					
		ule A, line 7)		338,3	361.		His period	sar waan can		
•	•	from line 1c	3	82,865.				82		
•		tach Schedule D)	4a				0.000 0.000			
		rt II, line 17) (attach Form 4797)	4b							
			4c	the second secon						
				-837,1	.98.	ATCH	2	(A)(A)	-837,198.	
, , ,			5				<del></del>			
		come (Schedule E)	7						<del></del>	
		ties, and rents from controlled								
			8							
		section 501(c)(7), (9), or (17)								
			9							
		come (Schedule I)	10							
		of the instructions; attach schedule.)	12			1900 100 000 000 000 000 000 000 000 000	ang dingt-one	init		
<b>\</b>		ugh 12		<b>-754,</b> 3	333.				-754,333.	
Part II Deduction	ns Not	Taken Elsewhere (See pag	je 11 d	of the instructio	ns for	limitations of	n deduc	ctions.) (I	Except for	
contributi	ons, de	eductions must be directly co	nnect	ed with the unr	elated	business inc	come.)			
14 Compensation of	officers, d	lirectors, and trustees (Schedule K)					14			
							. 15	;	13,362.	
								;	5,718.	
							- 1	,		
								1	-	
							1	)	· · · · · · · · · · · · · · · · · · ·	
20 Charitable contribe	utions (Se	ee page 13 of the instructions for lim	itation r	ules.)			20			
21 Depreciation (atta	ch Form 4	4562)		21		87 <b>,</b> 29				
22 Less depreciation	claimed o	on Schedule A and elsewhere on ret	turn .	22a		74,76	7. 221	b	12,525.	
							- 1			
24 Contributions to de	eferred co	ompensation plans				<i>.</i>	24	<u> </u>		
		8 , , ,						<u> </u>	29,709.	
		Schedule I)						<u> </u>		
27 Excess readership	costs (S	chedule J)					27			
28 Other deductions	(attach sc	chedule)		ATTA	ACHM	ENT 3	28		3 <b>,</b> 758.	
29 Total deductions.	Add line	s 14 through 28					- 1		65,072.	
30 Unrelated busines	s taxable	income before net operating loss de	eduction	n. Subtract line 29 fi	rom line	13			-819,405.	
31 Net operating loss	deductio	on (limited to the amount on line 30)					. 31			
		income before specific deduction. S					1	:	-819,405.	
33 Specific deduction	(Genera	Ily \$1,000, but see line 33 instruction	ns for ex	xceptions.)			33		1,000.	
34 Unrelated busines	ss taxabl	e income. Subtract line 33 from line	32. If I	ine 33 is greater tha	an line 3	32,				
enter the smaller of	of zero or	line 32					34	.	-819,405.	

PAGE 67

Form	990-T (20		31-4379507	Page 2				
Par		Tax Computation						
35	Organi	zations Taxable as Corporations. See instructions for tax computation on page 1	15.					
	Contro	lled group members (sections 1561 and 1563) check here						
а		your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):						
	(1) \$	(2)[\$ (3)[\$						
b	Enter o	organization's share of: (1) Additional 5% tax (not more than \$11,750)						
		litional 3% tax (not more than \$100,000)						
C		tax on the amount on line 34	. ▶ 35c					
36	Trusts	Taxable at Trust Rates. See instructions for tax computation on page 16. Income tax	1 1					
		ount on line 34 from: Tax rate schedule or Schedule D (Form 1041)	-	· · · · · · · · · · · · · · · · · · ·				
37		tax. See page 16 of the instructions	. ▶ 37					
38		tive minimum tax						
39		Add lines 37 and 38 to line 35c or 36, whichever applies	39	<del></del>				
		Tax and Payments		·				
40 a	-	n tax credit (corporations attach Form 1118; trusts attach Form 1116)						
þ		redits (see page 16 of the instructions)						
C		al business credit. Attach Form 3800						
d		for prior year minimum tax (attach Form 8801 or 8827)						
e 44		redits. Add lines 40a through 40d	40e	<del></del>				
41 42	Otherte	ct line 40e from line 39  xes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedul	41					
			′ ·	<del></del>				
43			· ·   43					
44 a			<del>-</del> 1					
b <sub>.</sub>								
d		posited with Form 8868	7 1					
		withholding (see instructions)						
f		or small employer health insurance premiums (Attach Form 8941)						
g		redits and payments: Form 2439						
9		orm 4136 Other Total ▶ 44g						
45		ayments. Add lines 44a through 44g	45	103,576.				
46		ed tax penalty (see page 4 of the instructions). Check if Form 2220 is attached	46	,				
47		e. If line 45 is less than the total of lines 43 and 46, enter amount owed	▶ 47	0.				
48		yment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	▶ 48	103,576.				
49		ne amount of line 48 you want: Credited to 2011 estimated tax   103, 576. Refunded						
Pari	V	Statements Regarding Certain Activities and Other Information (see instruct	ions on page 17)					
1								
	account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign							
	Bank and Financial Accounts. If YES,enter the name of the foreign country here ▶ ENGLAND, ITALY X							
2	2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? X							
	If YES, see page 5 of the instructions for other forms the organization may have to file.							
3								
Sch		A - Cost of Goods Sold. Enter method of inventory valuation	<del></del>					
1		ry at beginning of year . 1 6 Inventory at end of year						
2		ses	#0.000 CO					
3		labor	1 1	၁၁၈ ခင်း				
4 a		nal section 263A costs Part I, line 2	· , <u> </u>	338,361.				
		schedule)	(with respect t	SAMASONE SERVICES				
5			for resale) appl	·				
		add lines 1 through 4b .   5   338,361.   to the organization?	est of my knowledge a	nd belief, it is true.				
Sigr	romar	that declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						
Here	1 1880.	Sndph 14/23/6/2 Controller	May the IRS discu					
	1	ature of officer Date Title	with the preparer (see instructions)? X					
	13.	Print/Type preparer's name Preparer's signature Date	PTIN					
Paid		What A 6 1 - 4/22/12	neck L III	0226559				
Prep		CHRISTON NACY CHARLES CONTRACT		677006				
Use	Only	1111 OUDDD TOD AVENUE GUTED TOO		363-0100				
	*	ATCH 4 CLEVELAND, OH 44114		m <b>990-T</b> (2010)				

1. Description of property  (1) (2) (3) (4)  (a) From personal property (if the perfor personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of colu	2. Rent received arcentage of rent in 10% but not i	d or accrue (b) Fi percenta 50% or  Total Enter		erty ex	ceeds			ected with the income (attach schedule)	
(2) (3) (4)  (a) From personal property (if the perfor personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of columns	2. Rent received arcentage of rent in 10% but not i	d or accrue (b) Fi percenta 50% or  Total Enter	ed rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
(2) (3) (4)  (a) From personal property (if the per for personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of colu	2. Rent received arcentage of rent in 10% but not i	d or accrue (b) Fi percenta 50% or  Total Enter	ed rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
(3) (4)  (a) From personal property (if the per for personal property is more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of columns	2. Rent received arcentage of rent in 10% but not i	d or accrue (b) Fi percenta 50% or  Total Enter	ed rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
(4)  (a) From personal property (if the per for personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of columns	2. Rent received arcentage of rent in 10% but not i	d or accrue (b) Fr percenta 50% or  Total Enter	ed rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
(a) From personal property (if the per for personal property is more than 50%)  (1)  (2)  (3)  (4)  Total  (c) Total income. Add totals of columns	umns 2(a) and 2(b).	(b) Fr percenta 50% or  Total Enter	rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
for personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of colu	umns 2(a) and 2(b).	(b) Fr percenta 50% or  Total Enter	rom real and personal prop ge of rent for personal prop	erty ex	ceeds				
for personal property is more than more than 50%)  (1) (2) (3) (4)  Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A)	percenta 50% or 50% or Total Enter	ge of rent for personal prop	erty ex	ceeds				
(2) (3) (4) Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶							
(2) (3) (4) Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶							
(3) (4) Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶							
(4) Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶			E .	***************************************			
Total (c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶							
(c) Total income. Add totals of colu	umns 2(a) and 2(b). column (A) ebt-Financed Ind	Enter . ▶							
• •	column (A) ebt-Financed Inc	. ▶				(b) Total deducti	ons.		
	ebt-Financed Inc					Enter here and on	page 1,		
here and on page 1, Part I, line 6, c					i	Part I, line 6, colur	nn (B) 🕨		
Schedule E - Unrelated De		come(se	e instructions on pag	e 19)					
			2. Gross income from o		3. Dedu	ctions directly connec		r allocable to	
1. Description of debt-	-financed property		allocable to debt-finance	(a) Ctroight	debt-financed line depreciation	(b) Other deductions			
			property			schedule)	(attach schedule)		
(1)		A NUMBER OF THE PARTY OF THE PA							
(2)		<del>.</del>							
(3)	***************************************								
(4)				_					
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)			6. Column 4 divided by column 5		ome reportable x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)				%					
				%					
(2)									
***	%								
(4)			<u> </u>	%					
Totals						nd on page 1, , column (A).	Enter h Part I, i	ere and on page 1, ine 7, column (B).	
Schedule F - Interest, Ann								na== 20\	
Schedule F - Interest, Ann	iuities, Royaitie					tions(see instruc	cuons on	page 20)	
			cempt Controlled Org	anızaı	tions	T		1	
Name of controlled organization			3. Net unrelated income (loss) (see instructions)		al of specified ments made	5. Part of column included in the cororganization's gros	ntrolling	6. Deductions directly connected with income in column 5	
(1)									
(2)									
(3)									
(4)			W						
Nonexempt Controlled Organiz	rations					.1		<u></u>	
Tronexempt Controlled Organiza					10 Par	t of column 9 that is	11	I. Deductions directly	
7. Taxable Income	8. Net unrelated in (loss) (see instru		9. Total of specified payments made	i 	include	ed in the controlling ation's gross income		nected with income in column 10	
(1)									
(2)									
(3)									
(4)									
					Enter here	ns 5 and 10. and on page 1, 8, column (A).	Enter	olumns 6 and 11. here and on page 1, line 8, column (B).	

(1) (2) (3) (4) (5) (6) (7) (7) (8) (8) (9) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	1. Description of income 2. Amount of income			Deductions     directly connected			4. Set-asides (attach schedule)			5. Total deductions and set-asides (col. 3	
Comparison of exploited activity   Income   Cote   Than Advertising   Income   (see instructions on page 21)					(attach schedule)		(41140114			plus col. 4)	
(3) (4) Enter here and on page 1, Part I, line (9) (3) (4) Enter here and on page 1, Part I, line (9) (3) (4) 1. Description of exploited Exempt Activity income, Other Than Advertising Income (see instructions on page 21) (4) 1. Description of exploited activity unclasses records or production of production o					***				+		
Enter here and on page 1, Part I, line 9, column (A).  Schedule I - Exploited Exempt Activity income, Other Than Advertising Income (see instructions on page 21)  1. Description of exploited activity unclease of contractivity incomes of contracti											
Part											
Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions on page 21)  1. Description of exploited activity										Enter here and on page 1, Part I, line 9, column (B).	
Schedule J - Exploited Exempt Activity Income, Other Than Advertising a devertising costs in the computer of the color of page 1, Part II income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)  1. Name of periodical  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  2. Gross aboversing income (see instructions on page 2)  3. Direct (servy to Part II, line (s))	Totals			100000							
1. Description of exploited activity business income companies of the property			ome. Othe	r Th	an Advertising Ir	ncome	(see instruc	tion	s on page 2	21)	
1. Description of exploited activity business income from trade or page 1, Part 1, line 10, col. (8).  1. Name of periodical 2. Advertising gain or (bes) (or a gain, compute costs (column 4).  1. Name of periodical 2. Corriso and trade or business income from trade or page 1, part 1, line 2.  1. Name of periodical 2. Corriso and trade or business income from trade or page 1, part 1, line 2.  1. Name of periodical 2. Corriso and trade or business income from trade or page 1, part 1, line 2.  1. Name of periodical 2. Corriso and trade or business income from trade or page 1, part 1, line 2.  1. Name of periodical 2. Corriso and trade or business income from trade or page 1, part 1, line 3, business income from trade or page 1, part 1, line 3, business income from trade or page 1, part 1, line 3, business income from trade or page 1, part 1, line 3, business income from trade or page 1, part 1, line 4, advertising gain or (bes) (or a gain, compute costs (column 4).  1. Name from Periodical 2. Corriso and trade or page 1, part 1, line 1, col. (A).  1. Name from Periodical 2. Corriso and trade or page 1, part 1, line 1, col. (A).  2. Title 3. Advertising from trade or page 1, part 1, line 1, col. (A).  3. Decarding trade or page 1, part 1, line 1, col. (B).  4. Advertising and (Basic Corriso) and (Ba					4. Net income		(222		1 0		
Compared	1. Description of exploited activity	unrelated business income from trade or	directly connected w production unrelated	rith of	unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5	ted trade or ses (column us column is not unre business in the cols. 5		attributable to		expenses (column 6 minus column 5, but not more than	
(4)    First here and compage 1, Part   Ine 10, cot (4).   Ine 10, cot (4).   Ine 10, cot (4).   Ine 10, cot (6).   Ine 10, cot	(1)										
Enter here and on page 1, Part 1, line 10, cot (A).   Page 1, Part 1, line 10, cot (B).   Page 1, Part 1, line 20, cot (B).   Page 1, Part 1, line 20, cot (B).   Part 1, line 21, cot (B).   Part 1, line 21, cot (B).   Part 1, line 20, cot (B).   Part 2, line 20, cot (B).   Part 3, li											
Enter here and on page 1, Part 1, line 10, cot. (a). Enter here and on page 1, Part 1, line 10, cot. (b). Schedule J - Advertising Income (see instructions on page 21)  Part I Income From Periodical Reported on a Consolidated Basis  1. Name of periodical Reported on a Consolidated Basis  2. Gross advertising income  2. Gross advertising costs of through 7. Totals (carry to Part II, line (b))	(3)										
page 1, Part 1,   line 10, col. (A).   line 10, col. (B).   line 11, c	(4)										
Schedule J - Advertising Income (see instructions on page 21)		page 1, Part I, line 10, col. (A).	page 1, Par	t I,						on page 1,	
Income From Periodicals Reported on a Consolidated Basis			otiono on no	~~ ?·	1			(Capacitati			
1. Name of periodical 2. Gross advertising lincome 2. Direct advertising costs [2 minus cot 3.] If a gain, compute costs (column 6, but not more than column 4).  (1) [2] [3] [4] [4] [4] [5] [7] [7] [7] [7] [7] [7] [7] [7] [7] [7											
1. Name of periodical advertising advertising costs advertising and costs advertising and costs advertising and costs advertising costs advertising advertising costs advertis	income From Pe	riodicais Repor	teu on a Co	JIISU	iluaten pasis						
(2) (3) (4) Totals (carry to Part II, line (5))	1. Name of periodical	advertising			gain or (loss) (col. 2 minus col. 3). If a gain, compute					minus column 5, but not more than	
(3) (4) Totals (carry to Part II, line (5)) Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)  1. Name of periodical advertising income advertising costs advertising costs advertising costs (advertising costs 5 through 7.  (1) (2) (3) (4) (5) Totals from Part I Enter here and on page 1, Part II, line 11, col. (A). In page 1, Part II, line 11, col. (B).  Totals, Part II (lines 1-5)  1. Name  2. Gross advertising costs advertising costs 2 through 7.  Enter here and on page 1, Part II, line 11, col. (B).  Totals, Part II (lines 1-5)  1. Name  2. Title  3. Parcent of time success of the page 1, Part II, line 12, col. (B).  3. Parcent of time business  4. Advertising costs (advertising costs) 6. Circulation income hand costs (column 6 minor than column 6. Readership costs (column 6 m											
Totals (carry to Part II, line (5))   Part II   Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)    1. Name of periodical   2. Gross advertising income   3. Direct advertising costs   4. Advertising gain or (loss), lot a gain, compute costs. 5 through 7.   5. Circulation income   6. Readership costs (column 6) minus column 5, but not more than column 4).										-	
Totals (carry to Part II, line (5))											
Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)    1. Name of periodical   2. Gross advertising lincome   3. Direct advertising costs   4. Advertising gain or (loss) (col. 3. If a gain, compute cols. 5 through 7.   5. Circulation income   6. Readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 7)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 6 minus column 8)   7. Excess readership costs (column 8)   7.	(4)									Various 100	
1. Name of periodical 2. Gross advertising costs advertising costs advertising costs advertising costs advertising costs advertising costs (2 minus col. 3). If a gain, compute costs. 5 through 7.  (1)  (2)  (3)  (4)  (5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5)   Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 21)  1. Name  2. Title  3. Direct 2 gain or (loss), (Col. 2 minus col. 3). If a gain or (loss), (Col. 2 minus col. 3). If a gain or (loss), (Col. 2 minus col. 3). If a gain or (loss), (Col. 2 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain or (loss), (Col. 3 minus col. 3). If a gain, compute col. 3. If a gain, compute col. 3	Part II Income From Pe			Sepa	rate Basis (For	each p	periodical I	iste	d in Part	II, fill in columns	
(2) (3) (4) (5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5) ▶  Enter here and on page 1, Part I line 11, col. (B).  Schedule K - Compensation of Officers, Directors, and Trustees(see instructions on page 21)  1. Name  2. Title  3. Percent of time devoted to business  4. Compensation attributable to unrelated business  (1) (2) (3) (4) (4) (5) Totals from Part I	1. Name of periodical	odical advertising			gain or (loss) (col. 2 minus col. 3). If a gain, compute	or (loss) (col. us col. 3). If in, compute 5. Circu incon				minus column 5, but not more than	
(2) (3) (4) (5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5) ▶  Enter here and on page 1, Part I line 11, col. (B).  Schedule K - Compensation of Officers, Directors, and Trustees(see instructions on page 21)  1. Name  2. Title  3. Percent of time devoted to business  4. Compensation attributable to unrelated business  (1) (2) (3) (4) (4) (5) Totals from Part I	(1)										
(3) (4) (5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5) >  Enter here and on page 1, Part I, line 11, col. (B).  Schedule K - Compensation of Officers, Directors, and Trustees(see instructions on page 21)  1. Name  2. Title  3. Percent of time devoted to business  4. Compensation attributable to unrelated business  (1) (2) (3) (4)			THE PARTY OF THE P								
(4) (5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5)											
(5) Totals from Part I  Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5)   Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 21)  1. Name  2. Title  3. Percent of time devoted to business  4. Compensation attributable to unrelated business  (1)  (2)  (3)  (4)											
Enter here and on page 1, Part I, line 11, col. (A).  Totals, Part II (lines 1-5)							HESTER THOUSE !				
Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 21)  1. Name  2. Title  3. Percent of time devoted to business  4. Compensation attributable to unrelated business  (1)  (2)  (3)  (4)		page 1, Part I, line 11, col. (A).	page 1, Pa	rt i						on page 1,	
1. Name         2. Title         3. Percent of time devoted to business         4. Compensation attributable to unrelated business           (1)         %           (2)         %           (3)         %           (4)         %							04\				
(1) % (2) % (3) % (4) %	**************************************		pirectors, a				3. Percent of time devoted to				
(2)     %       (3)     %       (4)     %	(1)						pusiness		WIII.		
(3) % (4) %											
(4) %											
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## ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY.

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

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

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

UTILITIES MISCELLANEOUS 3,130. 628.

PART II - LINE 28 - OTHER DEDUCTIONS

3,758.

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

FOOD SERVICES	168,571.
MAINTENANCE/CUSTODIAL	15,040.
LINEN SERVICE	5,214.
KENYON INN - DEPRECIATION	74,767.
KENYON INN EXPENSES	49,248.
MISCELLANEOUS	1,991.
REAL ESTATE TAXES	23,530.
TOTAL OTHER COSTS	338,361.