## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

06/30, **20** 12

Inspection

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

07/01, 2011, and ending

Open to Public

_			C Name of organization					D Employer ide	entifica	ition numb	er	
B Cr	eck if ap	oplicable:	THE KENYON REVIEW									
	Addre		Doing Business As					31-1443	3804			
	1 .	change	Number and street (or P.O. box if mail is	not delivered to street address)	)	Room/suit	е	E Telephone n	umber			
	†	return	EATON CENTER KENYON C	OLLEGE				(740) 42	7 – 51	L81		
	Termi		City or town, state or country, and ZIP + 4					( : = = , ==				
	Amen		GAMBIER, OH 43022					<b>G</b> Gross receip	ts \$	1	748	474.
	return Applio	n cation	F Name and address of principal offi	icer DAIII. HEALV				H(a) Is this a grou			Yes	X No
	pendi	ing	KENYON COLLEGE EATON		ОП 130	22		affiliates?		$\vdash$	Yes	No
_	Toy ov	omnt at					507	H(b) Are all affilia				NO
		empt st		) <b>(</b> insert no.)	4947(a)(1)	or	527				0115)	
			WWW.KENYONREVIEW.ORG			1.,,		H(c) Group exem				
			ization: X Corporation Trust	Association Other		L Yea	ar of format	tion: 1995 <b>M</b>	State o	if legal don	nicile:	ОН
Pa			mmary									
	1		describe the organization's mission o									
පු			KEEP THE FLAME OF LITERA						Y 			
Governance			RNAL, PROVIDING SEMINARS			LN DEVE	TOPIN	G NEW 				
/er			ERARY MEDIA TO ENGAGE A									
စ်			this box 🕨 🔛 if the organization d	•					3.			
⋖ర	3	Numb	er of voting members of the governing	body (Part VI, line 1a)					3			28.
ties	4	Numb	er of independent voting members of t	the governing body (Part VI	I, line 1b)				4			27.
Activities	5	Total	number of individuals employed in cale	endar year 2011 (Part V, line	e 2a)				5			0
Act	6	Total	number of volunteers (estimate if neces	sary)					6			60.
	7 a	Total	gross unrelated business revenue from	Part VIII, column (C), line 1	2				7a			0
	b	Net ur	nrelated business taxable income from	Form 990-T, line 34					7b			0
								Prior Year		Curre	ent Ye	ar
ø	8	Contri	butions and grants (Part VIII, line 1h)				$\neg$	1,715,04	:7.		944	,591.
nu	9	Progra	am service revenue (Part VIII, line 2g)		COPY	FOR		645,96	7.		539	,611.
Revenue	10	Invest	ment income (Part VIII, column (A), line	es 3, 4, and 7d)	PUBLIC IN	SPECTION	<b>1</b>	233,87	6.		203	722.
Œ			revenue (Part VIII, column (A), lines 5,					-124,35	0.		-77,	314.
			revenue - add lines 8 through 11 (must					2,470,54	0.	1,	610,	610.
			s and similar amounts paid (Part IX, colu					148,70	9.		159	,065.
	14	Benef	its paid to or for members (Part IX, colu	ımn (A), line 4)			•		0			0
ý	15	Salari	es, other compensation, employee bene	efits (Part IX, column (A), lir	nes 5-10)		•	389,88	8.		457	,235.
Expenses			ssional fundraising fees (Part IX, column						0			
be			fundraising expenses (Part IX, column (	D), line 25) ▶	34,453	3.	•					
ũ			expenses (Part IX, column (A), lines 11					601,79	8.		482	,128.
	18	Total	expenses. Add lines 13-17 (must equal	Part IX. column (A), line 25	5)		•	1,140,39	5.			428.
			nue less expenses. Subtract line 18 fron		- /		•	1,330,14				182.
es es			·				Begin	ning of Current \			of Yea	
ets	20	Total a	assets (Part X, line 16)					4,791,19	9.	5,	303.	381.
Ass I Ba			liabilities (Part X, line 26)				•		0			
Net Assets or Fund Balances			ssets or fund balances. Subtract line 21	I from line 20				4,791,19	9.	5,	303,	381.
	rt II	Sic	nature Block				-			· ·		
Und	ler per	nalties o	f perjury, I declare that I have examined this i						nowled	lge and be	ief, it is	s true,
corr	ect, ar	nd comp	plete. Declaration of preparer (other than offic	cer) is based on all information	of which pr	reparer has	any knowle	edge.				
Si	ign											
	ere		Signature of officer					Date				
			Type or print name and title									
_			Type preparer's name	Preparer's signature		Date		Check if		PTIN		
Paid				. 5				self- employed		   <sub>P002</sub>	2651	5.9
Prep	arer	<u></u>	sname MALONEY + NOVO	OTNV IIC					24 0	67700		
Use	Only		·							363-0		
Mari	the !!		cuss this return with the preparer show	E, SUITE 700 CLEVELAND,					<u>0</u>			<b>—</b>
			Reduction Act Notice see the senarat							X Ye		(2010)

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Form 990 (2011) Page 2 **Statement of Program Service Accomplishments** Part III 1 Briefly describe the organization's mission: ATTACHMENT 1 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 If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code: ) (Expenses \$ \_\_\_\_\_,042,226. including grants of \$ \_\_\_\_\_\_\_, (Revenue \$ \_\_\_\_\_) THE KENYON REVIEW, A JOURNAL OF LITERATURE, CULTURE, AND THE ARTS, WAS PUBLISHED FOUR TIMES DURING THE FISCAL YEAR IN PROMOTING THE EDUCATIONAL AND CULTURAL OBJECTIVES OF KENYON COLLEGE. 4b (Code: ) (Expenses \$ including grants of \$ 4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ 4e Total program service expenses ► 1,042,226.

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

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Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
u	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
C	to defease any tax-exempt bonds?	24c		
٨	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24u		
23 a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
<b>L</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	23a		- 21
b				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		Х
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	20		Х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2011)

Form 990 (2011)
Part V Statements Regarding Other IRS Filings and Tay Compliance

Par				
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1 c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			3.7
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		- 1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	υα		
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10a  10b			
11 a	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h	If "Ves " has it filed a Form 720 to report these navments? If "No " provide an explanation in Schedule O	11h		l

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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 in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are 1a 28			
	material differences in voting rights among members of the governing body, or if the governing body			
	delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
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?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	,	X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	,	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
_	If "Yes" to line 15a or 15b, describe the process in 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?	16a		Х
b	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?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_OH.			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01(c)(	3)s o	nly)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who pe	ne		
104	organization: ▶ <sub>SHIRLEY</sub> OBRIEN EATON CENTER KENYON COLLEGE GAMBIER, OH 43022 740-427-5181			

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

#### 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

<b>(A)</b> Name and Title	(B) Average hours per week (describe hours for	box,	unles	Pos heck ss pe	erson	e than o	an	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
ATTACHMENT 2	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-WISC)	organization and related organizations
(1) MARCI BARR ABBOTT										
TRUSTEE	1.00	Х						C	0	(
(2) JOHN ADAMS										
TRUSTEE	1.00	Х							0	0
(3) BETSY ASHTON										
TRUSTEE	1.00	Х							0	C
(4) JAMES H. BRANDI										
TREASURER	1.00	Х		Х					0	0
(5) MARY ELIZABETH BUNZEL										
CO-CHAIR	1.00	Х		Х					0	(
(6) ROXANNE COADY										
TRUSTEE	1.00	Х							0	(
(7) RANDY FERTEL										
TRUSTEE	1.00	Х							0	C
(8) JAMES P. FINN										
CO-CHAIR	1.00	Х		Х					0	C
(9) PETER FLAHERTY										
TRUSTEE	1.00	Х							0	C
(10) ERICK GORDON										
TRUSTEE	1.00	Х							0	C
(11) ALVA G. GREENBERG										
TRUSTEE	1.00	Х							0	C
(12) KIMIKO HAHN										
TRUSTEE	1.00	Х							0	C
(13) ROBERT HALLINAN										
TRUSTEE	1.00	Х							0	C
(14) PAUL HEALY										
TRUSTEE	1.00	Х							0	C

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plc	ye	es,	and F	lig	hest Compensat	ed Employees (d	continue	ed)	
(A) Name and title	(B) Average hours per week (describe	box,	unles er and	Pos heck ss pe	rson lirect	e than o	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	an com	(F) stimated nount of other pensation	f
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org and	om the anizatio d related anization	d
15) PAMELA FEITLER HOEHN-SARIC												
TRUSTEE	1.00	X						0	0			(
16) GRACE KEEFE HUEBSCHER												
TRUSTEE	1.00	X						0	0			(
17) JOAN KREHNBRINK KAYE												
TRUSTEE	1.00	X						0	0			(
18) DANIEL J. KRAMER												
TRUSTEE	1.00	X						0	0			(
19) BONNIE LEVINSON												
TRUSTEE	1.00	X						0	0			(
20) WILLIAM LOWRY												
TRUSTEE	1.00	X						0	0			(
21) BETTY ROBBINS												
TRUSTEE	1.00	X						0	0			(
22) TODD RUPPERT												
TRUSTEE	1.00	Х						0	0			(
23) ALASTAIR SHORT												
TRUSTEE	1.00	X						0	0			(
24) GEORGE D. SMITH TRUSTEE	1.00	Х						C	0			(
25) CHRIS VOROBECK TRUSTEE	1.00	Х						0	0			(
1b Sub-total							$\blacktriangleright$	0	0			(
c Total from continuation sheets to Part VII, S	ection A						$\blacktriangleright$	159,434.	1,117,730.	1	93,6	26.
d Total (add lines 1b and 1c)							<b>&gt;</b>	159,434.	1,117,730.	1	93,6	26.
2 Total number of individuals (including but not reportable compensation from the organization			liste L	d al	bov	e) who	o re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu										3		Х
<b>4</b> For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	50,0	00?	. If	"Yes	3,"	complete Schedu	le J for such	4	X	
5 Did any person listed on line 1a receive or												
for services rendered to the organization? <i>If "Ye</i>										5		Х
Section B. Independent Contractors										_		
Complete this table for your five highest com- compensation from the organization. Report of												

year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

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Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	ye	es,	and F	lig	hest Compensat	ed Emplo	yees (c	ontinue		age <b>8</b>
(A) Name and title	(B) Average hours per week (describe	(do r box, office	not cl unles	Pos heck ss pe	ition more rson lirect	than o is both or/truste	ne an ee)	(D) Reportable compensation from the	Reportable compensation from related organizations	able on from	Es am com	(F) stimated nount of other pensation	•
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099	-MISC)	orga and	om the anization d related anization	t
26) ABBY WENDER SECRETARY	1.00	Х		Х				0		0			0
27) MATTHEW WINKLER TRUSTEE	1.00	X						0		0			0
28) S. GEORGIA NUGENT PRESIDENT	1.00	Х		Х				0	1,117	730	1	74,8	89
29) DAVID LYNN	1.00	21		21					1,117	, 730.		,,,,	<del>07.</del>
EDITOR	40.00	Х		Х				159,434.		0		18,7	37.
1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	ection A						<b>&gt; &gt; &gt;</b>						
Total number of individuals (including but not reportable compensation from the organization)	imited to t	hose					re	eceived more than	\$100,000	of			
												Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3		X
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,0	00?	l If	"Yes	,"				4	Х	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye											5		Х
Section B. Independent Contractors													
<ol> <li>Complete this table for your five highest com compensation from the organization. Report c year.</li> </ol>													
(A) Name and business add	ress							(B) Description of se	rvices	С	(C) ompens	sation	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation

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

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Par	t VII	Statement of Revenue					
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a					
Gra	b	Membership dues 1b					
ts,	С	Fundraising events 1c	201,275.				
Service Revenue and Other Similar Amounts	d	Related organizations 1d					
ons, Sim	е	Government grants (contributions) 1e	47,101.				
utio	f	All other contributions, gifts, grants,					
흕		and similar amounts not included above . 1f	696,215.				
ng u	g	Noncash contributions included in lines 1a-1f: \$ _					
	h	Total. Add lines 1a-1f		944,591.			
ň			Business Code				
Seve	2a	SUBSCRIPTIONS, ROYALTIES, WORKSHOPS	900099	539,611.	539,611.		
ė.	b						
Ξ̈́	С						
Se	d						
Program	е						
rog	f	All other program service revenue					
	g	Total. Add lines 2a-2f		539,611.			
	3	Investment income (including dividends, inte					
		other similar amounts)		203,722.			203,722.
	4	Income from investment of tax-exempt bond		0			
	5	Royalties · · · · · · · · · · · · · · · · · · ·	(ii) Personal	0			
			(ii) i cisonai				
	6a	Gross rents					
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss) (i) Securities	(ii) Other	0			
	7a	Gross amount from sales of	(ii) Guioi				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses					
	c d	Gain or (loss)		0			
a				0			
ž	8 a	Gross income from fundraising events (not including \$201,275.					
Ş							
Re		of contributions reported on line 1c).	60,500.				
e	h	See Part IV, line 18					
Other Revenue	b	Net income or (loss) from fundraising events		-77,314.			-77,314.
O		Gross income from gaming activities.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			77,311.
	Ja	See Part IV, line 19	.				
	b	Less: direct expenses					
	C	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less					
		returns and allowances	a				
	b	Less: cost of goods sold					
		Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	,	0			
	12	Total revenue. See instructions	_	1 610 610	E20 611		126 400

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#### 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) but are not required to complete columns (B), (C), and (D).

req	uired to complete columns (B), (C), and (D).  Check if Schedule O contains a resp	ance to any guestion in	thic Port IV		
			(B)	(C)	(D)
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	159,065.	159,065.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	105 212	170 240		10 070
_	trustees, and key employees	185,312.	172,340.		12,972.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	<b>1</b>	159,030.	147,898.		11,132.
7	Other salaries and wages	109,030.	171,070.		11,134.
8	Pension plan accruals and contributions (include section	27,450.	25,528.		1,922.
9	401(k) and 403(b) employer contributions)	61,767.	57,443.		4,324.
10	Payroll taxes	23,676.	22,019.		1,657.
11	Fees for services (non-employees):	25,070.	22,010.		<u> </u>
	Management	0			
	Legal	3,037.		3,037.	
	Accounting	2,000.		2,000.	
	Lobbying	0		,	
	Professional fundraising services. See Part IV, line 17	0			
	Investment management fees	0			
g	Other	98,141.	98,141.		
12	Advertising and promotion	0			
13	Office expenses	49,749.	49,749.		
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	58,115.	58,115.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,477.		1,477.	
23	Insurance	1,4//.		1,4//.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
9	HONORARIA	166,811.	166,811.		
	POSTAGE	20,953.	20,953.		
	MINOR EQUIPMENT	22,849.	22,849.		
	PRINTING	22,802.	20,356.		2,446.
-	All other expenses	36,194.	20,959.	15,235.	· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses. Add lines 1 through 24e	1,098,428.	1,042,226.	21,749.	34,453.
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   if following SOP 98-2 (ASC 958-720)	0			
ICA		U			

JSA 1E1052 1.000

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#### Part X **Balance Sheet** (A) Beginning of year End of year Cash - non-interest-bearing ol 0 1 Savings and temporary cash investments 0 0 2 ol 3 0 3 Pledges and grants receivable, net Accounts receivable, net 0 0 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 0 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary O 6 0 employees' beneficiary organizations (see instructions) Notes and loans receivable, net 0 7 0 Inventories for sale or use ol 0 8 Prepaid expenses and deferred charges 0 0 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0 b Less: accumulated depreciation 10b 0 10c 4,791,199. **11** 5,303,381. 11 0 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 0 13 13 ol 14 0 14 Intangible assets \_\_\_\_\_\_\_ Other assets. See Part IV, line 11 0 15 0 15 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . . . 4,791,199 16 5,303,381 16 Accounts payable and accrued expenses 0 0 17 17 0 18 Grants payable 0 18 19 0 19 0 Deferred revenue Tax-exempt bond liabilities 0 20 0 20 0 21 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 0 22 0 0 23 0 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 0 24 0 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 0 0 25 26 0 26 0 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29, and lines 33 and 34. Balances Unrestricted net assets 27 324,369. 27 433,267. Temporarily restricted net assets 28 126,620. 294,567. 28 Fund Permanently restricted net assets 29 4,340,210. 29 4,575,547. Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. ō Capital stock or trust principal, or current funds Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Set Total net assets or fund balances 33 4,791,199. 5,303,381. 33 5,303,381. 34 Total liabilities and net assets/fund balances.......... 4,791,199. 34

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Form 990 (2011) Page **12 Reconciliation of Net Assets** Part XI Check if Schedule O contains a response to any question in this Part XI.......... 1,610,610. 1 1 1,098,428. 2 2 512,182. 3 3 4,791,199. 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . . . . 5 5 6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 5,303,381. **Financial Statements and Reporting** Part XII No X Accrual Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Χ **b** Were the organization's financial statements audited by an independent accountant? 2b Х 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? 2c Χ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Both consolidated and separate basis X Consolidated basis Separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the 3a Χ

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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#### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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. ► See separate instructions. Name of the organization

Open to Public Inspection Employer identification number

ГНЕ	KE	NYON REVIEW								31-	-1443	804	
Pa	rt I	Reason for Pub	lic Charity Statu	<b>s</b> (All organizations mu	st con	nplete	this pa	art.) Se	e instru	uctions			
Γhe	orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)				
1		A church, convention	on of churches, or	association of churches	describ	ed in <b>s</b>	section	170(b)(	1)(A)(i)				
2		A school described	in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)								
3		•	•	service organization descri									
4		A medical research	h organization op	erated in conjunction wi	th a h	ospita	ıl descr	ibed in	sectio	n 170(b	)(1)(A)	)(iii). En	ter the
		hospital's name, cit											
5				nefit of a college or univ	ersity	owned	d or ope	erated b	by a go	vernme	ntal ur	it descr	ibed in
		section 170(b)(1)(		•		_							
6			•	or governmental unit des									
7	X	<del>-</del>		es a substantial part of it	s supp	ort fro	om a go	vernme	ental un	iit or fro	om the	general	public
_		described in <b>section</b>			-l-4- F	) II \							
8 9	$\vdash$	-		on 170(b)(1)(A)(vi). (Com				0004#!h			arabin i	faaa and	
9		=	=	es: (1) more than 331/3%									_
		•		s exempt functions - subj ome and unrelated busi			-						
				ne 30, 1975. See section							ianj III	oni busi	1100000
0				ted exclusively to test for			-			).			
1	$\square$	•		rated exclusively for the	•	•				•	or to	carry c	ut the
-		=	-	apported organizations de			-					-	
				es the type of supporting								-	
		a Type I	<b>b</b> Type		-		nally inte			d	7	III - Othe	er
е		By checking this	box, I certify that	the organization is not	contr	olled	directly	or ind	irectly I	by one	or mo	ore disq	ualified
		persons other than	n foundation mana	gers and other than one	or mo	re pub	olicly su	pported	d organ	izations	desci	ribed in s	section
		509(a)(1) or sectio	n 509(a)(2).										
f		If the organization	received a writte	n determination from the	e IRS	that it	is a Ty	уре І, Т	ype II,	or Type	e III su	pporting	·
		organization, check											
g		=	2006, has the orga	nization accepted any gift	or co	ntribut	ion from	any of	the				
		following persons?										<u> </u>	
			=	ectly controls, either alor		-	er with	person	s desc	ribed in	(II) [		es No
				dy of the supported organ	ization	·						11g(i)	X
				scribed in (i) above?	 hovo?							11g(ii)	X
<b>h</b>				son described in (i) or (ii) a							l	11g(iii)	X
h			(ii) EIN	out the supported organization	T		(A) Did v	ou potifu	643.1	o tho	(vi	i) Amount	of
		ame of supported organization	(11) = 114	(described on lines 1-9	organia	ls the zation in		ou notify anization		s the zation in	(VII	<ul><li>i) Amount support</li></ul>	OI
				above or IRC section (see instructions))	your go	listed in overning	in col your su	. <b>(i)</b> of		rganized U.S.?			
				(coo monuciono))	Yes	No	Yes	No	Yes	No			
A)													
В)													
رد.													
C)													
D)													
E)													
-,													
Γota	al												
	41												

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

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Page 2

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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (f) Total (e) 2011 Calendar year (or fiscal year beginning in) grants, contributions, membership fees received. (Do not 163,357 611,610 1,715,047 include any "unusual grants.") 164,626 944,591 3,599,231. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 164,626. 163,357 611,610. 1,715,047. 944,591 3,599,231. Total. Add lines 1 through 3 The portion of total contributions by person each (other than governmental unit publicly supported organization) included on line 1 that exceeds 2% of the amount 783,314. shown on line 11, column (f) Public support. Subtract line 5 from line 4. 2,815,917 Section B. Total Support (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 Calendar year (or fiscal year beginning in) (f) Total Amounts from line 4 164,626 163,357 611,610 1,715,047 944,591 3,599,231.

8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	124 045	146.070	171 054	222 076	202 722	001 276
	sources	134,845.	146,979.	171,854.	233,876.	203,722.	891,276.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1			146,905.	64,260.	60,500.	271,665.
11	Total support. Add lines 7 through 10						4,762,172.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	2,917,049.
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizat	tion's first, secor	nd, third, fourth,	or fifth tax ye	ar as a section	
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2011 (li	ne 6, column (f	) divided by line	11, column (f))		14	59.13%
15	Public support percentage from 2010						%
	331/3% support test - 2011. If the of this box and stop here. The organization	rganization did	not check the	box on line 13,	, and line 14 is	331/3% or mo	
b	331/3% support test - 2010. If the o	organization did	I not check a b	ox on line 13 d	or 16a, and line	e 15 is 331/3%	or more,

17a 10%-facts-and-circumstances test - 2011. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2010. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Page **3** 

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

(Complete only if you checked the box on line 9 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.)

	·			, ,	•	,	
	tion A. Public Support	(-) 0007	4-> 0000	(-) 0000	(4) 0040	(-) 0044	(0 T-4-I
	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
, u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
<u> </u>	line 6.)						
	tion B. Total Support		#10000	4 ) 0000	( ) 0 0 1 0	( ) 0044	(D. T. )
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
. •	and 12.)						
14	First five years. If the Form 990 is for	the organization	un's first second	third fourth or	fifth tax year	os a saction 501	(0)(3)
	organization, check this box and <b>stop here</b> .	-			•		
500	tion C. Computation of Public Sup						
15	Public support percentage for 2011 (line 8,			mn (f))		4.5	0/
						15	%
16	Public support percentage from 2010 Sche					16	%
	tion D. Computation of Investmer			10 1 20		11	
17	Investment income percentage for 2011 (lin					17	%
18	Investment income percentage from 2010					18	%
19a	331/3% support tests - 2011. If the org	ganization did n	ot check the box	x on line 14, and	d line 15 is mo	re than 331/3%, a	and line
	17 is not more than 331/3 %, check this	is box and <b>sto</b>	<b>p here</b> . The org	anization qualifie	s as a publicly	supported organi	zation 🕨 🔃
b	331/3% support tests - 2010. If the orga	inization did not	check a box on	line 14 or line 19	9a, and line 16 i	s more than 331/3	3 %, and
	line 18 is not more than 331/3%, check	this box and s	top here. The or	ganization qualifi	es as a publicly	supported organi	zation 🕨
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	o, check this b	ox and see instr	uctions >

JSA 1E1221 1.000 THE KENYON REVIEW 31-1443804

Schedule A (Form 990 or 990-EZ) 2011

Part IV Supplemental

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

CHANGE IN PUBLIC CHARITY STATUS,

PARTS I AND II:

THE KENYON REVIEW HAD BEEN PREVIOUSLY CONSIDERED AS A "SUPPORTING ORGANIZATION" UNDER SECTION 509(A)(3) BECAUSE OF ITS CLOSE RELATIONSHIP WITH KENYON COLLEGE, A RELATED SECTION 501(C)(3) EDUCATIONAL INSTITUTION. THE KENYON REVIEW RECENTLY APPLIED TO THE IRS TO CHANGE ITS PUBLIC CHARITY STATUS TO THAT OF A SECTION 509(A)(1) ORGANIZATION. AS SUCH, WE HAVE MARKED BOX 7 IN PART I AND HAVE COMPLETED THE PUBLIC SUPPORT TEST IN PART II TO DEMONSTRATE THE KENYON REVIEW'S COMPLIANCE WITH SECTION 509(A)(1).

				Δ	TTACHMENT 1				
SCHEDULE A, PART II - OTHER INCOME									
DESCRIPTION	2007	2008	2009	2010	2011	TOTAL			
SPECIAL EVENTS			146,905.	64,260.	60,500.	271,665.			
TOTALS			146,905.	64,260.	60,500.	271,665.			

Page 4

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Employer identification number

THE KENYON REVIEW		31-1443804					
Organization type (check one):		31 1443004					
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3 ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ndation					
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion					
	501(c)(3) taxable private foundation						
<b>Note.</b> Only a section 501(c)(7), instructions.	vered by the <b>General Rule</b> or a <b>Special Rule.</b> (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See					
General Rule							
_	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or econtributor. Complete Parts I and II.	or more (in money or					
Special Rules							
under sections 509(a)	3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 100 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form I.	e year, a contribution of					
during the year, total	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
during the year, contri not total to more than year for an <i>exclusively</i> applies to this organiz	7), (8), or (10) organization filing Form 990 or 990-EZ that received from a butions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unless ation because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did be received during the ses the <b>General Rule</b> butions of \$5,000 or					
990-EZ, or 990-PF), but it <b>must</b>	not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2, of its Form 990; or check the box on line F F, to certify that it does not meet the filing requirements of Schedule B (For	l of its Form 990-EZ or on					

JSA

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Part I	Contributors (see instructions). Use duplicate copies of Pa	rt I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$458,500.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _		\$15,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 _		\$65,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$32,101.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5 _		\$24,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$22,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
7		\$19,300.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8 _		\$16,843.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
9_		\$16,500.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 10 _		\$15,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 11 _		\$ <u>15,000</u> .	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 12 _		\$ <u>11,500</u> .	Person  Payroll  Noncash  (Complete Part II if there is

a noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 13 _		\$11,500.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 14 _		\$10,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 15 _		\$10,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 16 _		\$10,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 17		\$10,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 18 _		\$10,000.	Person Payroll Noncash (Complete Part II if there is

a noncash contribution.)

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution \_ 19 Χ Person **Payroll** 9,300. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution \_20 Χ Person **Payroll** 9,250. Noncash (Complete Part II if there is a noncash contribution.) (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 21 Χ Person **Payroll** 7,950. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 22 Χ Person **Payroll** 7,800. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution \_23 Χ Person **Payroll** 6,750. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 24 Χ Person **Payroll** 6,300. Noncash (Complete Part II if there is

a noncash contribution.)

31-1443804 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution \_ \_25 Χ Person **Payroll** 5,750. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution \_26 Χ Person **Payroll** 5,950. Noncash (Complete Part II if there is a noncash contribution.) (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 27 Χ Person **Payroll** 5,325. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 28 Χ Person **Payroll** 5,325. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 29 Χ Person **Payroll** 5,200. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

(Complete Part II if there is a noncash contribution.)

Person Payroll

Noncash

5,200.

Χ

\_30

Part I	Contributors (see instructions). Ose duplicate copies of Par	t i ii additional space is need	iea.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 31 _		\$5,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 32 _		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Name of organization THE KENYON REVIEW

Employer identification number

31-1443804

Part II N	oncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	

Name of organization THE KENYON REVIEW

Employer identification number

31-1443804

Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	individual contribuear. Complete colur	ntions to section 5 nns (a) through (e	01(c)(7), (8), or (10) organizations ) and the following line entry.				
	For organizations completing Part III, e contributions of \$1,000 or less for the	year. (Enter this inf	ormation once. Se	haritable, etc., e instructions.)   \$\bigsim \\$				
	Use duplicate copies of Part III if addition	onal space is neede	d.					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
		(e) Transf	er of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee				
(a) No.	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held				
Part I			- <b>y</b>	(2, 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2				
	(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
		(e) Transf	er of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					

## SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

2011

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

TER EXTNON REVIEW  Part I Organization Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV. line 6.  1 Total number at end of year	Name	of the organization			Empl	loyer identification number
organization answered "Yes" to Form 990, Part IV, line 6.  (a) Donor advised funds (b) Funds and other accounts  1 Total number at end of year	THE	KENYON REVIEW			3	31-1443804
1 Total number at end of year 2 2 Aggregate contributions to (during year) 3 Aggregate 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? 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?  Partill Conservation Easements. Complete if the organization (above all that apply).  Proservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (above all that apply).  Preservation of one pasce  Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement in the last day of the fax year.  1 Total number of conservation easements  1 Total number of conservation easements in a certified historic structure included in (a) 2e  1 Total number of conservation easements in a certified historic structure included in (a) 2e  1 Total number of conservation easements in a certified historic structure included in (a) 2e  1 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P  Number of otonservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P  Number of conservation easements in the organization easements during the year Ps  5 Does the organization have a written policy regarding the periodic monitoring, inspecting, and enforcing conse	Par			Similar Funds of	or Acco	unts. Complete if the
2 Aggregate contributions to (during year) 4 Aggregate value at end of year. 5 Did the organization informal all donors and donor advisors in writing that the assets held in donor advised funds are the organization informal all donors and donor advisors in writing that the assets held in donor advised funds are the organization informal 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?  Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or education) Preservation of an historically important land area Preservation of open space 2 Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements and excitified historic structure included in (a).  2 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P.  Number of states where property subject to conservation easement is located P.  Number of states where property subject to conservation easement is located P.  Number of expanization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements holds?  No es each conservation easement from the proper scale of the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements is holds?  In Part XIV, describe how the organization reports conservation easements of section 170(h)(4)(B)(ii)?  In Part XIV, describe how the			(a) Donor advi	sed funds	(b	) Funds and other accounts
2 Aggregate contributions to (during year) 4 Aggregate value at end of year. 5 Did the organization informal all donors and donor advisors in writing that the assets held in donor advised funds are the organization informal all donors and donor advisors in writing that the assets held in donor advised funds are the organization informal 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?  Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or education) Preservation of an historically important land area Preservation of open space 2 Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements and excitified historic structure included in (a).  2 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P.  Number of states where property subject to conservation easement is located P.  Number of states where property subject to conservation easement is located P.  Number of expanization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements holds?  No es each conservation easement from the proper scale of the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements is holds?  In Part XIV, describe how the organization reports conservation easements of section 170(h)(4)(B)(ii)?  In Part XIV, describe how the	1	Total number at end of year				
Aggregate grants from (during year).  Aggregate value at end of year.  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?  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?  Part I Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Part I Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Propose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat  Preservation of part of part of the arganization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  Total number of conservation easements  Total arceage restricted by conservation easements  Number of conservation easements on a certified historic structure included in (a) 2.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Pelestrical to the part of the						
A Aggregate value at end of year						
tunds are the organization's property, subject to the organization's exclusive legal control?						
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?  Purpose(s) of conservation Easements. Complete lif the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization check all that apply.)  Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat  Preservation of open space  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.  a Total number of conservation easements	5	Did the organization inform all donors and donor	advisors in writing that	the assets held i	in donor	advised
Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of and for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of natural habitat Preservation of the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  ##eld at the End of the Tax Year a Total number of conservation easements  **Number of conservation easements on a certified historic structure included in (a)		funds are the organization's property, subject to the	e organization's exclusi	ve legal control?		Yes No
conferring impermissible private benefit?  Purpose(s) of conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area Preservation of open space  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.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)	6	Did the organization inform all grantees, donors, ar	nd donor advisors in wr	iting that grant fu	nds can	be used
Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education)  Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area Preservation of an historic structure  Preservation of open space  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.  ##eld at the End of the Tax Year  a Total number of conservation easements  Total acreage restricted by conservation easements  Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easements in located  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements tholds?  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  Same Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)  (i) and section 170(h)(4)(B)(iii)?  Organization's accounting for conservation easements.  Part III Organization Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IVI, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibitio		· · ·				
Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of natural habitat Preservation of natural habitat Preservation of open space  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.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements is located   Number of states where property subject to conservation easements in holds?  Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year   >		conferring impermissible private benefit?				Yes No
Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Protection of natural habitat Preservation of on popen space  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  Total number of conservation easements  Number of conservation easements on a certified historic structure included in (a)  Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located P  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  \$\B\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)  (i) and section 170(h)(4)(B)(iii)?  In Part XIV, 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" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 the following amounts relating to these items:  If the o	Par				Form 99	90, Part IV, line 7.
Protection of natural habitat	1	Purpose(s) of conservation easements held by the	organization (check all	that apply).		
Preservation of open space  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.  a Total number of conservation easements		Preservation of land for public use (e.g., recre	eation or education)	Preservation	of an his	storically important land area
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				Preservation	of a cer	tified historic structure
a Total number of conservation easements		· · · · · · · · · · · · · · · · · · ·				
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 in (a)	2		eld a qualified conserva	ation contribution	in the for	rm of a conservation
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a)		easement on the last day of the tax year.				Hold at the End of the Tay Year
b Total acreage restricted by conservation easements . 2b   2c    Number of conservation easements on a certified historic structure included in (a)		Total condition of a construction			0-	Tield at the Lift of the Tax Teal
c Number of conservation easements on a certified historic structure included in (a)						
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register		- · · · · · · · · · · · · · · · · · · ·				
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶				* *	. 20	
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	u		•		2d	
A Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  Shall and section 170(h)(4)(B)(iii)?  In Part XIV, 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" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  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 SFAS 116 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1	3					the organization during the
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?			,			and a generalization and general
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year			rvation easement is loca	ated ▶		
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  Soes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)  (i) and section 170(h)(4)(B)(ii)?  In Part XIV, 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 encounted "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  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 SFAS 116 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part VIII, line 1  (iii) Assets included in Form 990, Part VIII, line 1	5					
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year    S		violations, and enforcement of the conservation ea	sements it holds?			Yes No
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year    S	6	Staff and volunteer hours devoted to monitoring, in	specting, and enforcin	g conservation ea	asements	s during the year
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)  (i) and section 170(h)(4)(B)(ii)?  9 In Part XIV, 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" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1						
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)  (i) and section 170(h)(4)(B)(ii)?  In Part XIV, 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" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1	7	- · · · · · · · · · · · · · · · · · · ·	ting, and enforcing cor	nservation easem	ents duri	ing the year
(i) and section 170(h)(4)(B)(ii)?  In Part XIV, 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" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part VIII, line 1  (iii) Assets included in Form 990, Part VIII, line 1  (iv) Assets included in Form 990, Part VIII, line 1  (iv) Revenues included in Form 990, Part VIII, line 1			o O(d) above actiofy the	a raguiram anta af	aaatian 1	70/h)/4)/D)
In Part XIV, 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" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  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 SFAS 116 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1  Sequences included in Form 990, Part VIII, line 1  Sequences included in Form 990, Part VIII, line 1  Sequences included in Form 990, Part VIII, line 1	0					
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" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1	۵	In Part XIV describe how the organization reports	conservation easemer	nte in ite revenue a	nd evnen	se statement and
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" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  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 SFAS 116 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1  P\$	9				•	•
Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1				gamzanomomia	ioiai otati	
If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  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 SFAS 116 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1  **Section**  **Sec	Par	Organizations Maintaining Collections	of Art, Historical Tr	easures, or Oth	er Simil	lar Assets.
<ul> <li>b If the organization elected, as permitted under SFAS 116 (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: <ol> <li>(i) Revenues included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 SFAS 116 (ASC 958) relating to these items:</li> </ol> </li> <li>a Revenues included in Form 990, Part VIII, line 1</li> </ul>		Complete if the organization answered	"Yes" to Form 990, F	Part IV, line 8.		
<ul> <li>b If the organization elected, as permitted under SFAS 116 (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: <ol> <li>(i) Revenues included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 SFAS 116 (ASC 958) relating to these items:</li> </ol> </li> <li>a Revenues included in Form 990, Part VIII, line 1</li> </ul>	1a	If the organization elected, as permitted under SF	AS 116 (ASC 958), n	ot to report in its	revenu	e statement and balance sheet
b If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1		works of art, historical treasures, or other similar public service, provide, in Part XIV, the text of the formal public service.	ar assets held for pub potnote to its financial:	olic exhibition, ed statements that de	lucation, escribes	or research in furtherance of these items.
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) Revenues included in Form 990, Part VIII, line 1	b	•				
<ul> <li>(i) Revenues included in Form 990, Part VIII, line 1</li></ul>		works of art, historical treasures, or other similar	ar assets held for pub			
<ul> <li>(ii) Assets included in Form 990, Part X</li> <li>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 SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenues included in Form 990, Part VIII, line 1</li> </ul>						
<ul> <li>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 SFAS 116 (ASC 958) relating to these items:</li> <li>Revenues included in Form 990, Part VIII, line 1</li></ul>						
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1						
a Revenues included in Form 990, Part VIII, line 1		<u> </u>				tor tinancial gain, provide the
						<b>►</b> ◆

Schedule D (Form 990) 2011 Page **2** 

Par	t III Organizations Maintainii	ng Collections of	Art, Histo	rical Tre	asure	s, or	Other	Similar A	ssets (d	continue	d)	
3	Using the organization's acquisition collection items (check all that apply		ther recor	ds, check	c any c	of the	follow	ing that a	re a sigr	nificant u	se o	of its
а	Public exhibition		d	Loa	n or ex	chan	ge prog	ırams				
b	Scholarly research		e	Oth								
С	Preservation for future ger	nerations		_								
4	Provide a description of the organ		and expla	ain how t	hev fu	rther	the or	anization's	s exemp	t purpose	e in	Part
	XIV.				- ,			<b>J</b>				
5	During the year, did the organizatio	n solicit or receive d	onations o	f art. histo	orical tr	easur	es, or o	other simil	ar			
	assets to be sold to raise funds rath								_	Yes		No
Par	Escrow and Custodial Ar line 9, or reported an am	rangements. Con	nplete if t	he orgar						_	V,	
1a	Is the organization an agent, trustee included on Form 990, Part X?									Yes		No
b	If "Yes," explain the arrangement in											]
Б	ii res, explain the arrangement in	Tall Alv and compi	ete the foli	owing tak	JiG.			Δ	mount			
•	Beginning balance					4.0		^	inount			
C	Additions during the year					1c						
u	Distributions during the year					1d						
e						1e						
2-	Ending balance									Vaa		I NI a
			an A, iiie	21!					L	Yes		No
	If "Yes," explain the arrangement in		:ti		\/  4	. Г.		) Dort IV	line 10			
Par	t V Endowment Funds. Com									(a) Faur		
10	Paginning of year balance	(a) Current year	(b) Prio		(C) IW	o years	в раск	(d) Three y	ears back	(e) Four	/ears	раск
1a	Beginning of year balance Contributions	4,791,199.		1,054.								
b	_	944,591.	1,/1	5,047.								
С	Net investment earnings, gains,	000 500	0.0	2 056								
	and losses	203,722.		3,876.								
	Grants or scholarships	636,131.	14	8,709.								
е	Other expenditures for facilities .											
	and programs		4.7	0,069.								
t	Administrative expenses											
g	End of year balance	5,303,381.		1,199.								
2	Provide the estimated percentage of			e (line 1g,	columr	າ (a)) I	held as	:				
а	Board designated or quasi-endowm		_%									
b	Permanent endowment ►86.2											
С	Temporarily restricted endowment											
	The percentages in lines 2a, 2b, and	d 2c should equal 10	00%.									
3a	Are there endowment funds not in t	the possession of th	ie organiza	tion that	are hel	d and	l admir	nistered for	the	_		
	organization by:										'es	No
	(i) unrelated organizations									3a(i)		X
	(ii) related organizations									3a(ii)	X	
b	If "Yes" to 3a(ii), are the related orga	anizations listed as i	required on	Schedule	R? .					3b	X	
4	Describe in Part XIV the intended us	ses of the organizati	on's endov	wment fur	nds.							
Par	t VI Land, Buildings, and Equ	ipment. See Forn	n 990, Pa	rt X, line	10.							
	Description of property	(a) Cost or (invest		<b>(b)</b> Cost o	or other ba ther)	asis		cumulated eciation	(0	<b>d)</b> Book valu	ie	
1a	Land											
b	Buildings											
С	Leasehold improvements											
d	Equipment											
e	Other											
Tota	I. Add lines 1a through 1e. (Column		1990. Part	X column	(B) lir	ne 10/	(c).)	<b>•</b>				—

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 Page 3

Part VII	Investments - Other Securities. See Fo	orm 990, Part X, Iin	e 12.	5
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	ation: ket value
(1) Financi	al derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
<u>(l)</u>	(1) 15 000 B 17 1 (D) (1			
Part VIII	In (b) must equal Form 990, Part X, col. (B) line 12.)  Investments - Program Related. See F	orm 000 Part V lin	20.12	
rait VIII	(a) Description of investment type	(b) Book value	(c) Method of valua	ation:
(4)	(a) Description of investment type	(b) Book value	Cost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, li	ne 15.		
		Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X 1.	Other Liabilities. See Form 990, Part X  (a) Description of liability	(b) Book valu	10	
-	ral income taxes	(b) Dook vaid	AC	
(2)	Tal Income taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Colur	mn (b) must equal Form 990, Part X, col. (B) line 25.)	<b>&gt;</b>		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

JSA 1E1270 1.000

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Scheau	e D (Form 990) 2011		Page 4
Part		nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	1	
5	Donated services and use of facilities 5	5	
6	Investment expenses 6	6	
7	Prior period adjustments 7	7	
8	Other (Describe in Part XIV.)	3	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10	0	
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	'n	
1	Total revenue, gains, and other support per audited financial statements	1_	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	urn	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	XIV Supplemental Information		
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I		
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete Iditional information.	e this	part to provide
SEE	PAGE 5		

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Part XIV Supplemental Information (continued)

FIN 48 (ASC 740) FOOTNOTE,

PART X, LINE 2:

THE FOLLOWING FOOTNOTE APPEARS IN THE CONSOLIDATED FINANCIAL STATEMENTS
OF KENYON COLLEGE, THE KENYON REVIEW, AND OTHER RELATED ENTITIES. THE
FOOTNOTE USES THE TERM "COLLEGE" TO REFER TO ALL ENTITIES INCLUDED IN THE
FINANCIAL STATEMENTS: FEDERAL INCOME TAXES - THE INTERNAL REVENUE SERVICE
HAS DETERMINED THAT THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER
SECTION 501(A) OF THE INTERNAL REVENUE CODE AS A PUBLIC CHARITY DESCRIBED
IN SECTION 501(C)(3); ACCORDINGLY, NO PROVISION FOR FEDERAL INCOME TAXES
HAS BEEN MADE IN THE CONSOLIDATED FINANCIAL STATEMENTS. THERE WERE NO
UNRECOGNIZED TAX BENEFITS AS OF JUNE 30, 2012. AS OF JUNE 30, 2012, THE
COLLEGE'S INCOME TAX RETURNS FROM 2008 AND THEREAFTER REMAIN SUBJECT TO
EXAMINATION BY THE INTERNAL REVENUE SERVICE, AS WELL AS VARIOUS STATE AND
LOCAL TAXING AUTHORITIES.

INTENDED USE OF ENDOWMENT FUNDS,

PART V, LINE 4:

THE KENYON REVIEW USES ITS ENDOWMENT FUNDS TO PRODUCE A JOURNAL OF LITERATURE, CULTURE, AND THE ARTS AND TO PROVIDE WRITING WORKSHOPS FOR STUDENTS.

#### **SCHEDULE G** (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Inspection

Name	of the organization					Employer identification	on number
THE	KENYON REVIEW					31-1443804	
Par	Fundraising Activities. Com Form 990-EZ filers are not				"Yes" to Form 9	90, Part IV, line	17.
1	Indicate whether the organization rais	<u> </u>			activities. Check a	all that apply.	
a	Mail solicitations	e		•	non-government g		
b	Internet and email solicitations	f			government grant		
C	Phone solicitations	g			ising events	S	
d	In-person solicitations	ຮ	, оро	olai Tariara	ionig evente		
2a	Did the organization have a written o or key employees listed in Form 990						Yes No
b	If "Yes," list the ten highest paid indicompensated at least \$5,000 by the		(fundraise	ers) pursua	ant to agreements	under which the	fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No		· ·	
1							
2							
3							
4							
7							
5							
6							
7							
8							
9							
10							
Total 3	List all states in which the organizar registration or licensing.				contributions or	has been notified	it is exempt from
					<b></b>		
				<b></b>	<b></b>		
				<b></b>	<b></b>	<b></b>	

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Schedule G (Form 990 or 990-EZ) 2011 Page 2

	,				
Part II	Fundraising Events. Complete	if the organization answ	vered "Yes" to Form 99	00, Part IV, line 18, or r	reported more
	than \$15,000 of fundraising ever	nt contributions and gros	s income on Form 990	-EZ, lines 1 and 6b. L	ist events with
	gross receipts greater than \$5,0	00.			
		(a) Eyent #1	(h) Event #2	(a) Other Events	

		gross receipts greater than \$5,0	00.			
			(a) Event #1 ANNUAL DINNER	<b>(b)</b> Event #2	(c) Other Events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
eve		Gross receipts	261,825.			261,825
2	2	Less: Charitable	201,275.			201,275
	3	contributions Gross income (line 1 minus	201,273.			201,273
	3	line 2)	60,550.			60,550
	4	Cash prizes	20,000.			20,000
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	14,534.			14,534
xpe	_		05.066			05.066
Щ Ж	7	Food and beverages	85,266.			85,266
ire	8	Entertainment				
	ŭ	Zinortaiiinorit				
	9	Other direct expenses	18,064.			18,064
	10	Direct expense summary. Add lines 4	4 through 9 in column (d)			( 137,864.)
		Net income summary. Combine line :				-77,314
Pa	rt I	Gaming. Complete if the orgathan \$15,000 on Form 990-E		es" to Form 990, Par	t IV, line 19, or repo	rted more
-		11011 \$10,000 011 1 01111 000 E		(b) Bull tobe/instant		(d) Total gaming (add
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
<u> </u>	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Ë	Ū	Nonedon phizos I I I I I I I I I I I I I I I I I I I				
rect	4	Rent/facility costs				
Ö						
	5	Other direct expenses			r 1	
	_		Yes%		Yes%	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)			( )
	8	Net gaming income summary. Comb	oine line 1, column d, and	d line 7		
	_					
9		nter the state(s) in which the organizat				
		the organization licensed to operate of "No," explain:				Yes No
	, 11					
	-					
10 a	W	ere any of the organization's gaming l	licenses revoked, suspe	ended or terminated durin	ng the tax year?	Yes No
k	) If	"Yes," explain:				
	_					

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<ul> <li>Does the organization operate gaming activities with nonmembers?</li> <li>Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnershi formed to administer charitable gaming?</li> <li>Indicate the percentage of gaming activity operated in:</li> <li>The organization's facility</li> </ul>	or other entity
<ul><li>12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnershi formed to administer charitable gaming?</li><li>13 Indicate the percentage of gaming activity operated in:</li></ul>	or other entity
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	
<b>b</b> An outside facility	
<b>14</b> Enter the name and address of the person who prepares the organization's gaming/speci records:	al events books and
Name ►	
Address ▶	
15a Does the organization have a contract with a third party from whom the organization revenue?	
b If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the
amount of gaming revenue retained by the third party ▶ \$	and the
c If "Yes," enter name and address of the third party:	
c in 163, enter name and address of the till party.	
Name ▶	
Address ▶	
16 Gaming manager information:	
Name ►	
Gaming manager compensation ▶ \$	
Description of services provided ▶	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from th	e gaming proceeds to
retain the state gaming license?	· ·
<b>b</b> Enter the amount of distributions required under state law to be distributed to other	
or spent in the organization's own exempt activities during the tax year > \$	onept organizations
Part IV Supplemental Information. Complete this part to provide the explanation r	equired by Part I, line 2b,
columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, a part to provide any additional information (see instructions).	

Schedule G (Form 990 or 990-EZ) 2011

# SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Name of the organization						Employer identification	on number
THE KENYON REVIEW						31-1443804	
Part I General Information on Grants and	Assistance	!				•	
<ol> <li>Does the organization maintain records to sub the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedu</li> </ol>	or assistance	?			eligibility for the grants		X Yes No
Part II Grants and Other Assistance to Go to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	y recipient	that received	more than \$5,00	00. Check this b		received more th	an \$5,000.
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1)							
_(2)							
_(3)							
_(4)							
_(5)							
_(6)							
_(7)							
_(8)							
_(9)							
(10)							
(11)							
(12)							
<ul> <li>Enter total number of section 501(c)(3) and go</li> <li>Enter total number of other organizations liste</li> <li>For Paperwork Reduction Act Notice, see the Ins</li> </ul>	d in the line	1 table				<u> ▶</u>	ule I (Form 990) (2011)

Schedule I (Form 990) (2011)

Page 2

Part III Grants and Other Assistance to Individuals in the United States. 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 non-cash assistance
SCHOLARSHIPS-WRITING WORKSHOPS	73.	136,405.			
FELLOWSHIPS-WRITING WORKSHOPS	9.	22,660.			
3					
ļ					
·					
•					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

MONITORING USE OF GRANTS,

PART I, LINE 2:

FINANCIAL AID IS GIVEN TO STUDENTS TO PARTICIPATE IN THE WRITING

WORKSHOPS. THE AID IS CREDITED DIRECTLY TO THE STUDENTS' ACCOUNT, THUS

ENSURING THAT THE GRANT IS SPENT FOR ITS INTENDED PURPOSE.

### **SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE KENYON REVIEW

Employer identification number

31-1443804

Part	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 in Form					
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees					
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)					
<b>h</b>	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment					
D	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to					
	explain	1b		X		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,					
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X			
•	To Post on Pale 16 and a fall of a the CP on a constant of the control Politics and a second to a control Politics.					
3	Indicate which, if any, of the following the filing 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. Explain in Part III.					
	Compensation committee Written employment contract					
	Independent compensation consultant  Compensation survey or study					
	Form 990 of other organizations  Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:					
•	organization or a related organization:  Pagging a severance payment or change of central payment?	4a		Х		
a b	Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b	X	Λ		
C	Participate in, or receive payment from, a supplemental nonqualined retirement plan:  Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х		
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		21		
	in resite any or lines 4a e, list the persons and provide the applicable amounts for each item in rait in.					
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.					
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
-	compensation contingent on the revenues of:					
а	The organization?	5a		Х		
b	Any related organization?	5b		Х		
	If "Yes" to line 5a or 5b, describe in Part III.					
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
	compensation contingent on the net earnings of:					
а	The organization?	6a		Х		
b	Any related organization?	6b		Х		
	If "Yes" to line 6a or 6b, describe in Part III.					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed					
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х		
8	Were any amounts reported in 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	8		X		
9	If "Yes" to 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) 2011

Schedule J (Form 990) 2011

## 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 in 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 are not listed on Form 990, Part VII.

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

		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	(i)	0	C	0	0	0	C	0
1 S. GEORGIA NUGENT	(ii)	349,537.	(	768,193.	132,704.	42,185.	1,292,619.	550,000.
	(i)	158,704.	C	730.	15,193.	3,544.	178,171.	0
2 DAVID LYNN	(ii)	0	(	0	q	0	C	0
	(i)							
_ 3	(ii)							
	(i)							
_4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)			ļ				
_12	(ii)							
	(i)							
_13	(ii)							
	(i)		<u> </u>	<del> </del>				
14	(ii)							
	(i)		<u> </u>	<del> </del>				
15	(ii)							
	(i)							
16	(ii)							11.1/5 200) 2014

Schedule J (Form 990) 2011

### Part | Supplemental Information

Complete this part to 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.

BENEFITS PROVIDED TO OFFICERS,

PART I, LINE 1A:

KENYON REVIEW PROVIDED SOCIAL CLUB DUES FOR ITS EDITOR, DAVID LYNN, TO
THE CENTURY ASSOCIATION AND THE YALE CLUB. KENYON REVIEW DID NOT TREAT
THE VALUE OF THESE BENEFITS AS TAXABLE INCOME AS THE CLUBS WERE USED
EXCLUSIVELY FOR BUSINESS PURPOSES.

WRITTEN POLICY FOR REIMBURSEMENT OF EXPENSES,

PART I, LINE 1B:

S. GEORGIA NUGENT, PRESIDENT OF KENYON COLLEGE (A RELATED SECTION 501(C)(3) ORGANIZATION), APPROVES BENEFITS FOR CERTAIN EXECUTIVES ON A CASE-BY-CASE BASIS.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN,

PART I, LINE 4B:

KENYON COLLEGE, A RELATED SECTION 501(C)(3) ORGANIZATION, PROVIDED S.

GEORGIA NUGENT WITH A CONTRIBUTION OF \$100,000 TO A SECTION 457(F) PLAN

AND A CONTRIBUTION OF \$9,688 TO A SECTION 457(B) PLAN.

Schedule J (Form 990) 2011

### Part | Supplemental Information

Complete this part to 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.

ADDITIONAL INFORMATION REGARDING COMPENSATION,

PART II:

KENYON COLLEGE CONTRIBUTED \$100,000 TO A SECTION 457(F) PLAN FOR ITS

PRESIDENT, S. GEORGIA NUGENT, AS PART OF HER RETIREMENT PACKAGE. HER FORM

W-2 FOR CALENDAR YEAR 2011 INCLUDED \$758,739 OF VESTED DEFERRED

COMPENSATION, \$550,000 OF WHICH HAD BEEN REPORTED ON PRIOR YEARS' FORMS

990 WHEN THE COMPENSATION WAS NOT YET VESTED. THESE PAYMENTS WERE

APPROVED BY THE BOARD OF TRUSTEES WHO WERE INDEPENDENT OF DR. NUGENT.

### **SCHEDULE O**

(Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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 990-EZ.

Name of the organization Employer identification number
THE KENYON REVIEW 31-1443804

MEMBERS OF THE ORGANIZATION,

FORM 990, PART VI, LINE 6:

THE KENYON REVIEW'S SOLE MEMBER IS KENYON COLLEGE.

MEMBER'S POWER TO ELECT TRUSTEES,

BOARD MEMBERS OF THE KENYON REVIEW.

FORM 990, PART VI, LINE 7A:

AS THE SOLE MEMBER, KENYON COLLEGE HAS THE POWER TO APPOINT ALL OF THE

APPROVAL OF DECISIONS OF GOVERNING BODY,

FORM 990, PART VI, LINE 7B:

AS THE SOLE MEMBER, KENYON COLLEGE HAS APPROVAL RIGHTS OVER THE DECISIONS OF THE BOARD OF TRUSTEES OF THE KENYON REVIEW.

FORM 990 REVIEW,

FORM 990, PART VI, LINE 11B:

FORM 990 IS REVIEWED BY THE CONTROLLER OF KENYON COLLEGE AND CERTAIN

BOARD MEMBERS OF THE KENYON REVIEW.

MONITORING AND ENFORCEMENT OF CONFLICT POLICY,

FORM 990, PART VI, LINE 12C:

THE ORGANIZATION'S CONFLICT POLICY IS DISTRIBUTED AT THE FALL MEETING OF

THE BOARD OF TRUSTEES. ANNUALLY, OFFICERS AND TRUSTEES ARE ASKED TO

DISCLOSE CONFLICTS, AND THESE DISCLOSURES ARE MONITORED. IF A CONFLICT

Name of the organization

THE KENYON REVIEW

S1-1443804

ARISES, THE PERSON IS NOT PERMITTED TO VOTE OR PARTICIPATE IN THE DISCUSSION OF THE PROPOSED TRANSACTION. PEOPLE WHO ARE INDEPENDENT OF THE INDIVIDUAL MAKE THE DECISION ON THE TRANSACTION.

COMPENSATION REVIEW AND APPROVAL,

FORM 990, PART VI, LINE 15:

THERE IS NO STANDING BOARD COMMITTEE FOR COMPENSATION FOR THE OFFICERS

AND OTHER EMPLOYEES OF KENYON REVIEW. KENYON REVIEW MIRRORS THE STANDARD

PERCENTAGE COST OF LIVING INCREASES FROM KENYON COLLEGE, THE SOLE MEMBER

OF KENYON REVIEW. THE BOARD OF KENYON REVIEW APPROVES ANY ADJUSTMENT TO

BASE SALARIES ABOVE THIS STANDARD PERCENTAGE IN A GIVEN YEAR DURING AN

EXECUTIVE SESSION OF A BOARD MEETING.

AVAILABILITY OF DOCUMENTS,

FORM 990, PART VI, LINE 19:

THE ORGANIZATION DOES NOT MAKE ITS FINANCIAL STATEMENTS, GOVERNING

DOCUMENTS OR CONFLICT POLICY AVAILABLE TO THE PUBLIC.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO KEEP THE FLAME OF LITERATURE ALIVE BY PUBLISHING A PREMIER

LITERARY JOURNAL FEATURING WORK BY EMERGING AUTHORS AS WELL AS

DISTINGUISHED VOICES; BY PROVIDING INTENSIVE SEMINARS TO NURTURE

READERS AND WRITERS OF ALL AGES; AND BY BEING A LEADER IN DEVELOPING

NEW LITERARY MEDIA TO ENGAGE A GLOBAL AUDIENCE.

ATTACHMENT 2

FORM 990, PART VII, COLUMN B - ESTIMATED AVERAGE PER WEEK

Schedule O (Form 990 or 990-EZ) 2011 Page **2** 

Name of the organization
THE KENYON REVIEW

State of the organization number
31-1443804
ATTACHMENT 2 (CONT'D)

NAME AND TITLE

HOURS DEVOTED FOR RELATED ORGANIZATION

S. GEORGIA NUGENT PRESIDENT

40.00

### SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

Open to Public Inspection

Name of the organization

THE KENYON REVIEW

31-1443804

Part I	Identification of Disregarded Entities (Complete if t	the organization and	swered "Yes" to F	orm 990, Part	IV, line 33.)			
	(a) Name, address, and EIN of disregarded entity	I	(b) Primary activity	(c) egal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct cor enti	
_(1)								
_(2)								
<u>(3)</u>								
_(4)								
_(5)								
<u>(6)</u>								
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during t	(Complete if the c	organization answ	vered "Yes" to F	orm 990, Part IV	, line 34 because	e it had	
							T .	
	(a) Name, address, and EIN of related organization	<b>(b)</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	Section 5 conti ent	rolled
/4) KENYON	Name, address, and EIN of related organization	1	Legal domicile (state		Public charity status	Direct controlling	conti	rolled
(1) KENYON EATON	• • • • • • • • • • • • • • • • • • • •	1	Legal domicile (state		Public charity status	Direct controlling	conti	rolled ity?
EATON	Name, address, and EIN of related organization  COLLEGE 31-4379507	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled ity?
	Name, address, and EIN of related organization  COLLEGE 31-4379507  CENTER GAMBIER, OH 43022	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled ity?
(2)	Name, address, and EIN of related organization  COLLEGE 31-4379507  CENTER GAMBIER, OH 43022	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled ity?
(2)	Name, address, and EIN of related organization  COLLEGE 31-4379507 CENTER GAMBIER, OH 43022	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled ity?
(2)	Name, address, and EIN of related organization  COLLEGE 31-4379507 CENTER GAMBIER, OH 43022	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled ity?

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

Schedule R (Form 990) 2011

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Part III	Identification of Relate because it had one or r						answered "Yes"	to F	orm	990, Part	V, Iir	ne 3	84	
	(a) Name, address, and EIN of related organization	<b>(b)</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	Dispro	h) portionate ations?	(i) Code V-UE amount in bo of Schedule K (Form 106	x 20			(k) Percentage ownership
(1)			,,,		,			Yes	No			Yes	No	
7.7.														
_(2)														
<u>(3)</u>														
<u>(4)</u>														
<u>(5)</u>											$\exists$			
<u>(6)</u>														
Part IV	Identification of Relate	ed Organizations	Taxable	as a Corporati	on or Trust (Cor	nplete if the org	anization answer	ed "	Yes"	to Form 9	90, F	Part	IV,	
	(a) Name, address, and EIN of		ica organ	(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) are of t		(g) Share I-of-yea	e of	ets	(h) Percentage ownership
<u>(1)</u>														
(2)														
(3)														
<u>(4)</u>				_										
				1										
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Schedule R (Form 990) 2011

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Pa	Transactions With Related Organizations (Complete if the organization answered "Y	es" to Form 990, Pa	rt IV, line 34, 35, 35a, or 3	36.)					
No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No			
1	During the tax year, did the organization engage in any of the following transactions with one or more r								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	2			
b	Gift, grant, or capital contribution to related organization(s)				1b	2			
С	Gift, grant, or capital contribution from related organization(s)				1c	2			
d	Loans or loan guarantees to or for related organization(s)				1d	Σ			
е	Loans or loan guarantees by related organization(s)				1e	Σ			
f	Sale of assets to related organization(s)				1f	2			
g	Purchase of assets from related organization(s)				1g	2			
h	Exchange of assets with related organization(s)				1h	2			
i	i Lease of facilities, equipment, or other assets to related organization(s)								
	(//////////////////////////////////////								
i	Lease of facilities, equipment, or other assets from related organization(s)				1j	2			
k	Performance of services or membership or fundraising solicitations for related organization(s)				1k	2			
ï	Performance of services or membership or fundraising solicitations by related organization(s)				11 X				
m					1m X				
n	Sharing of paid employees with related organization(s)				1n X	_			
0	Reimbursement paid to related organization(s) for expenses				10	Σ			
р	Reimbursement paid by related organization(s) for expenses				1p	7			
•									
q	Other transfer of cash or property to related organization(s)				1q	2			
r	Other transfer of cash or property from related organization(s)				1r	7			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the				holds.				
	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved		(d) of determin nt involved	-			
<u>(1)</u>									
(2)									
(3)									
(4)									
(5)									
1-1									

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

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

(a) Name, address, and EIN of entity	(b) (c) Legal domicile (state or foreign country) (unrelated, excluded from tax under		partners tion c)(3)	(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		
			section 512-514)	Yes	No			Yes	No	(1.0111.1000)	Yes	No	
(1)													
(2)													
(3)													
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(16)													

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#### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).