

Forms 990 / 990-EZ Return Summary

For calendar year 2024, or tax year beginning 07/01/24 , and ending 06/30/25

-*2625

COLLEGE OF THE ATLANTIC

Net Asset / Fund Balance at Beginning of Year		<u>132,135,671</u>
Revenue		
Contributions	9,924,808	
Program service revenue	19,870,920	
Investment income	1,353,366	
Capital gain / loss	0	
Fundraising / Gaming:		
Gross revenue	_____	
Direct expenses	_____	
Net income	_____	
Other income	790,646	
Total revenue		<u>31,939,740</u>
Expenses		
Program services	28,596,689	
Management and general	4,678,850	
Fundraising	1,396,440	
Total expenses		<u>34,671,979</u>
Excess / (deficit)		<u>-2,732,239</u>
Changes		<u>6,910,121</u>
Net Asset / Fund Balance at End of Year		<u>136,313,553</u>

Reconciliation of Revenue

Total revenue per financial statements	<u>27,143,231</u>
Less:	
Unrealized gains	6,910,121
Donated services	_____
Recoveries	_____
Other	597,968
Plus:	
Investment expenses	758,148
Other	11,546,450
Total revenue per return	<u>31,939,740</u>

Reconciliation of Expenses

Total expenses per financial statements	<u>22,965,349</u>
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	597,968
Plus:	
Investment expenses	758,148
Other	11,546,450
Total expenses per return	<u>34,671,979</u>

		Balance Sheet		
		Beginning	Ending	Differences
Assets	<u>150,222,816</u>	<u>155,722,122</u>		
Liabilities	<u>18,087,145</u>	<u>19,408,569</u>		
Net assets	<u>132,135,671</u>	<u>136,313,553</u>		<u>4,177,882</u>

Miscellaneous Information

Amended return _____

Return / extended due date 05/15/26

Failure to file penalty _____

Form 990-T Return Summary

For calendar year 2024, or tax year beginning 07/01/24 , and ending 06/30/25

-*2625

COLLEGE OF THE ATLANTIC

Income & Losses (Form 990-T, Sch A)	# of Schedules <u>1</u>	
Income from all activities	58,181	
Losses from all activities	_____	
Unrelated business taxable income from all trades		<u>58,181</u>
Income Adjustments (Form 990-T, Part I)		
Disallowed fringe benefits	_____	
Charitable contributions	_____	
Net operating loss (prior to 2018)	_____	
Specific deduction	1,000	
Section 199A Deduction (Trusts Only)	_____	
Total adjustments		<u>(1,000)</u>
Unrelated business taxable income		<u>57,181</u>
Taxes & Credits (Form 990-T, Part II and III)		
Regular tax	12,008	
Other tax: <u> </u> Proxy <u> </u> AMT <u> </u> Facilities	_____	
Tax Due		<u>12,008</u>
Foreign tax credit and other credits	_____	
General business credits	_____	
Prior year minimum tax credit	_____	
Total nonrefundable credits		_____
Other taxes	_____	
Total tax		<u>12,008</u>
Payments & Penalties		
Estimated tax payments and Tax withheld	_____	
Paid with extension	_____	
Refundable credits and other payments	_____	
Payments		_____
Net tax due		<u>12,008</u>
Estimated tax penalty	87	
Interest on late payments	_____	
Failure to file penalty	_____	
Failure to pay penalty	_____	
Penalties		<u>87</u>
Balance due		<u>12,095</u>
Total overpayment	_____	
Overpayment applied to next year's tax	_____	
Refund		<u>_____</u>

Next Year's Estimates	
1st quarter	_____
2nd quarter	<u>6,004</u>
3rd quarter	<u>3,002</u>
4th quarter	<u>3,002</u>
Total	<u>12,008</u>

Miscellaneous Information	
Amended return	_____
Return / extended due date	<u>05/15/26</u>

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 07/01/24, and ending 06/30/25

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: COLLEGE OF THE ATLANTIC
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address): 105 EDEN STREET
 Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: BAR HARBOR ME 04609

D Employer identification number: ***-***2625
E Telephone number: 207-288-5015
G Gross receipts: 37,810,113

F Name and address of principal officer: SYLVIA TORTI, 105 EDEN STREET, BAR HARBOR ME 04609
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.

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

J Website: WWW.COA.EDU **H(c)** Group exemption number

K Form of organization: Corporation Trust Association Other
L Year of formation: 1969 **M** State of legal domicile: ME

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 OPERATION OF A FOUR YEAR ACCREDITED DEGREE COLLEGE, OPERATION OF A SMALL GRADUATE PROGRAM AND OTHER SUMMER EDUCATION PROGRAMS.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	23
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	596
6 Total number of volunteers (estimate if necessary)	6	22
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	65,746
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	57,181

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	9,248,446	9,924,808
9 Program service revenue (Part VIII, line 2g)	18,396,166	19,870,920
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,351,586	1,353,366
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	627,794	790,646
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,623,992	31,939,740
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,511,314	11,546,450
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,204,569	12,323,053
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25)	1,396,440	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,328,238	10,802,476
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	32,044,121	34,671,979
19 Revenue less expenses. Subtract line 18 from line 12	-2,420,129	-2,732,239

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	150,222,816	155,722,122
21 Total liabilities (Part X, line 26)	18,087,145	19,408,569
22 Net assets or fund balances. Subtract line 21 from line 20	132,135,671	136,313,553

Part II Signature Block

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

Sign Here
 Signature of officer: SYLVIA TORTI, PRESIDENT
 Date: _____
 Type or print name and title

Paid Preparer Use Only
 Preparer's name: ERIK NADEAU, CPA
 Preparer's signature: _____
 Date: 03/05/26
 Check if self-employed
 PTIN: *****
 Firm's name: NICHOLSON, MICHAUD & NADEAU, CPAS
 Firm's EIN: ***-***1973
 Firm's address: 76 SILVER ST, WATERVILLE, ME 04901-6528
 Phone no.: 207-872-7077

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
OPERATION OF A FOUR YEAR ACCREDITED DEGREE COLLEGE, OPERATION OF A SMALL GRADUATE PROGRAM AND OTHER SUMMER EDUCATION PROGRAMS.

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 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 services? Yes No
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 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 \$ 28,596,689 including grants of \$ 11,546,450) (Revenue \$ 20,595,820)
TUITION, FEES AND ROOM AND BOARD. COLLEGE OF THE ATLANTIC OFFERS UNDERGRADUATE CLASSES TO APPROXIMATELY 350 STUDENTS. A DEGREE IN HUMAN ECOLOGY CAN BE EARNED FOR UNDERGRADUATES AND A MASTERS OF PHILOSOPHY DEGREE IN HUMAN ECOLOGY CAN BE EARNED FOR GRADUATE STUDENTS. THE COLLEGE PROVIDES ON CAMPUS HOUSING TO APPROXIMATELY 160 STUDENTS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

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

4e Total program service expenses 28,596,689

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	X	
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
28b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
28c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance
 Check if Schedule O contains a response or note to any line in this Part V

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

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
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	596		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		X	
4a	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 account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	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 as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	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			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			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			X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANN ELIZABETH GARDINER CHAIR	4.00 0.00	X		X				0	0	0
(2) MARTHANN SAMEK VICE CO-CHAIR	4.00 0.00	X		X				0	0	0
(3) HENRY L.P. SCHMELZER VICE CO-CHAIR	4.00 0.00	X		X				0	0	0
(4) RONALD E. BEARD SECRETARY	4.00 0.00	X		X			4,200	0	0	0
(5) BARCLAY CORBUS TREASURER	8.00 0.00	X		X				0	0	0
(6) CYNTHIA BAKER TRUSTEE	2.00 0.00	X						0	0	0
(7) TIMOTHY BASS TRUSTEE	2.00 0.00	X						0	0	0
(8) MICHAEL BOLAND TRUSTEE	2.00 0.00	X						0	0	0
(9) JOYCE CACHO TRUSTEE	2.00 0.00	X						0	0	0
(10) ALYNE CISTONE TRUSTEE	2.00 0.00	X						0	0	0
(11) HEATHER RICHARDS EVANS TRUSTEE	2.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) ALLISON FUNDIS TRUSTEE	2.00 0.00	X						0	0	0
(13) MARIE GRIFFITH TRUSTEE	2.00 0.00	X						0	0	0
(14) NINA HORNER TRUSTEE	2.00 0.00	X						0	0	0
(15) NICHOLAS LAPHAM TRUSTEE	2.00 0.00	X						0	0	0
(16) HOWARD LAPSLEY TRUSTEE	2.00 0.00	X						0	0	0
(17) CASEY MALLINCKRODT TRUSTEE	2.00 0.00	X						0	0	0
(18) CHANDREYEE MITRA TRUSTEE	2.00 0.00	X						0	0	0
(19) ROLAND REYNOLDS TRUSTEE	2.00 0.00	X						0	0	0
1b Subtotal								4,200		
c Total from continuation sheets to Part VII, Section A								1,167,800		205,152
d Total (add lines 1b and 1c)								1,172,000		205,152

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALLIED COOK CONSTRUCTION SCARBOROUGH ME 04070	PO BOX 1568 CONSTRUCTION	1,859,443
RESTORATIONS UNLIMITED OF MAINE WINTERPORT ME 04496	300 LEBANON RD CONSTRUCTION	688,705
WINSLOW TECHNOLOGY GROUP WALTHAM MA 02451	303 WYMAN STREET SUITE 21 IT SOLUTIONS	181,362
CAMBRIDGE ASSOCIATES, LLC BOSTON MA 02214	PO BOX 412015 INVESTMENT MGR	161,658
REVISION ENERGY LIBERTY ME 04949	PO BOX 6 SOLAR INSTALL	157,252

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 6

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	78,069				
	1b Membership dues					
	1c Fundraising events					
	1d Related organizations					
	1e Government grants (contributions)	421,352				
	1f All other contributions, gifts, grants, and similar amounts not included above	9,425,387				
	1g Noncash contributions included in lines 1a-1f	\$ 547,934				
	1h Total. Add lines 1a-1f	9,924,808				
Program Service Revenue	2a TUITION & FEES	611310 17,426,749	17,426,749			
	2b HOUSING & MEALS	721310 1,950,417	1,950,417			
	2c SUMMER SCHOOL PROGRAMS	611310 493,754	493,754			
	2d					
	2e					
	2f All other program service revenue					
	2g Total. Add lines 2a-2f	19,870,920				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	1,353,366			1,353,366	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real	119,248			
		(ii) Personal				
		6b Less: rental expenses	53,502			
	6c Rental inc. or (loss)	65,746				
	6d Net rental income or (loss)	65,746		65,746		
	7a Gross amount from sales of assets other than inventory	(i) Securities	5,272,405			
		(ii) Other				
		7b Less: cost or other basis and sales exps.	5,272,405			
	7c Gain or (loss)					
	7d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
8b Less: direct expenses						
8c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19						
	9b Less: direct expenses					
	9c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances		1,139,279				
	10b Less: cost of goods sold	544,466				
	10c Net income or (loss) from sales of inventory	594,813	594,813			
Miscellaneous Revenue	11a MUSEUM INCOME	712110 130,087	130,087			
	11b					
	11c					
	11d All other revenue					
	11e Total. Add lines 11a-11d	130,087				
12 Total revenue. See instructions	31,939,740	20,595,820	65,746	1,353,366		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	11,546,450	11,546,450		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	812,959		812,959	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,913,306	7,626,923	783,937	502,446
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	536,050	421,268	84,325	30,457
9 Other employee benefits	1,402,912	1,102,511	220,690	79,711
10 Payroll taxes	657,826	516,968	103,481	37,377
11 Fees for services (nonemployees):				
a Management	134,113	134,113		
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees	758,148		758,148	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	148,751		134,238	14,513
12 Advertising and promotion	59,468	52,743		6,725
13 Office expenses	200,011	111,385	26,511	62,115
14 Information technology	84,394	38,222	22,925	23,247
15 Royalties				
16 Occupancy	106,153	96,796	9,357	
17 Travel	158,528	92,913	60,968	4,647
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	305,322	16,724	13,449	275,149
20 Interest	432,849	432,849		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,214,968	1,882,723	221,497	110,748
23 Insurance	521,039		521,039	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a BUILDING & GROUNDS	1,568,381	1,333,124	156,838	78,419
b SUPPLIES	799,876	778,011	19,676	2,189
c FOOD SERVICES	419,119	419,119		
d UTILITIES	388,091	388,091		
e All other expenses	2,503,265	1,605,756	728,812	168,697
25 Total functional expenses. Add lines 1 through 24e	34,671,979	28,596,689	4,678,850	1,396,440
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	431,836	1	66,801
	2 Savings and temporary cash investments	8,191,764	2	7,794,616
	3 Pledges and grants receivable, net	1,753,167	3	2,141,901
	4 Accounts receivable, net	259,727	4	119,914
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	113,781	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	67,259	7	56,217
	8 Inventories for sale or use	20,724	8	24,987
	9 Prepaid expenses and deferred charges	274,572	9	321,453
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 89,795,249		
	b Less: accumulated depreciation	10b 32,574,210	55,926,235	10c 57,221,039
	11 Investments—publicly traded securities	83,065,669	11	87,860,593
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	118,082	15	114,601
16 Total assets. Add lines 1 through 15 (must equal line 33)	150,222,816	16	155,722,122	
Liabilities	17 Accounts payable and accrued expenses	1,635,296	17	1,168,030
	18 Grants payable		18	
	19 Deferred revenue	599,487	19	468,589
	20 Tax-exempt bond liabilities	12,145,000	20	14,760,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	2,496,000	23	1,792,000
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,211,362	25	1,219,950
	26 Total liabilities. Add lines 17 through 25	18,087,145	26	19,408,569
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	54,769,773	27	52,479,351
	28 Net assets with donor restrictions	77,365,898	28	83,834,202
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	132,135,671	32	136,313,553
33 Total liabilities and net assets/fund balances	150,222,816	33	155,722,122	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,939,740
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,671,979
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,732,239
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	132,135,671
5	Net unrealized gains (losses) on investments	5	6,910,121
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	136,313,553

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) LAURA MCGIFFERT SLOVER	2.00									
TRUSTEE	0.00	X					0	0	0	
(21) LAURA STONE	2.00									
TRUSTEE	0.00	X					0	0	0	
(22) STEPHEN W. SULLENS	2.00									
TRUSTEE	0.00	X					0	0	0	
(23) CLAUDIA TURNBULL	2.00									
TRUSTEE	0.00	X					0	0	0	
(24) DARRON COLLINS	35.00									
PRESIDENT	0.00	X		X			356,407	0	22,214	
(25) SYLVIA TORTI	35.00									
PRESIDENT	0.00	X		X			219,591	0	27,372	
(26) CARLYLE PAUL	35.00									
ADMIN DEAN	0.00				X		142,884	0	36,234	
(27) KENNETH HILL	35.00									
ACADEMIC DEAN	0.00				X		117,219	0	35,553	
1b Subtotal							836,101		121,373	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(28) TODD LITTLE-SIEBOLD (12) FACULTY	35.00 0.00					X		114,111	0	35,420
(29) HEATHER ALBERT-KNOPP (13) DEAN OF ADMISSIONS	35.00 0.00					X		109,393	0	28,144
(30) JOHN ANDERSON (14) FACULTY	35.00 0.00					X		108,195	0	20,215
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								331,699		83,779
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

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

Section B. Independent Contractors

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

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

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

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

COLLEGE OF THE ATLANTIC

Employer identification number

-*2625

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

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

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

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

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 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 VI.); 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Amount, Percentage. Row 14: Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 %
Row 15: Public support percentage from 2023 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test — 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test — 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test — 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

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

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18 %

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)				
Section D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes			1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			3
4	Amounts paid to acquire exempt-use assets			4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)			5
6	Other distributions (describe in Part VI). See instructions.			6
7	Total annual distributions. Add lines 1 through 6.			7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			8
9	Distributable amount for 2024 from Section C, line 6			9
10	Line 8 amount divided by line 9 amount			10
Section E – Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2025. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

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

COPY

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

Schedule of Contributors
Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization COLLEGE OF THE ATLANTIC	Employer identification number **-***2625
--	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Name of organization

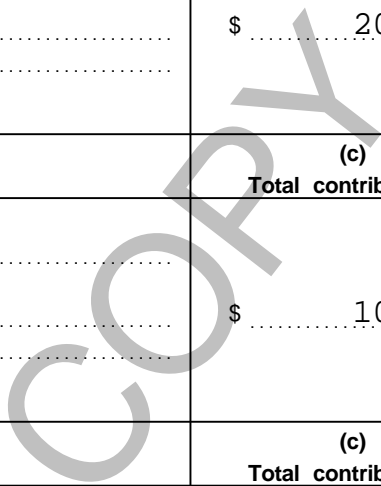
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	\$ 250,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	\$ 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	\$ 100,050	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	\$ 13,328	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	\$ 240,830	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	\$ 51,039	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

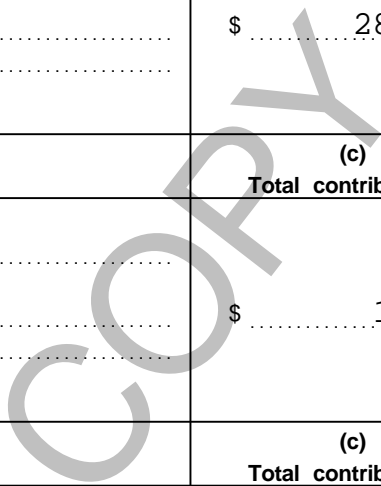
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 78,069	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 282,607	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 306,623	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 31,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 8,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

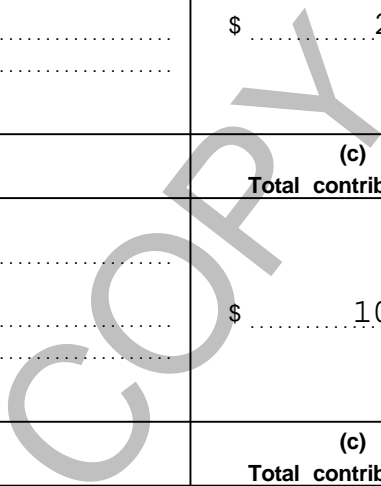
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14		\$ 24,698	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
15		\$ 103,879	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
16		\$ 112,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17		\$ 43,845	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18		\$ 11,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

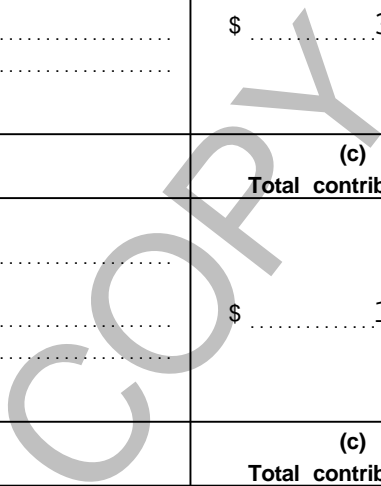
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	\$ 13,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	\$ 17,016	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	\$ 13,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

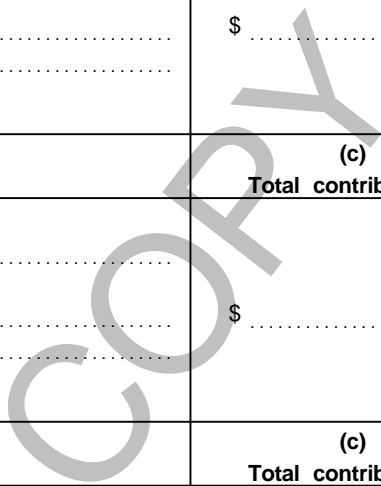
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	\$ 7,261	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
27	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	\$ 20,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	\$ 96,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	\$ 6,400	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

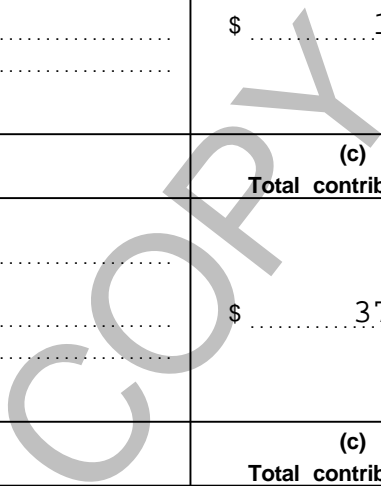
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	\$ 378,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	\$ 55,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

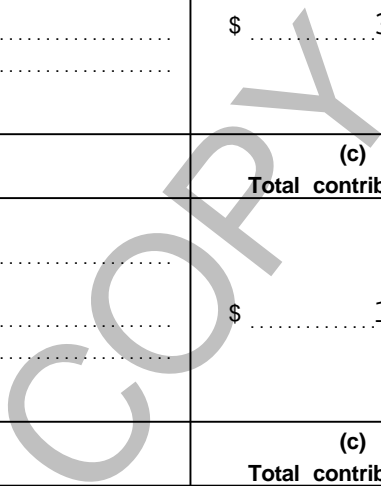
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	\$ 36,932.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	\$ 11,313.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
40	\$ 31,430.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

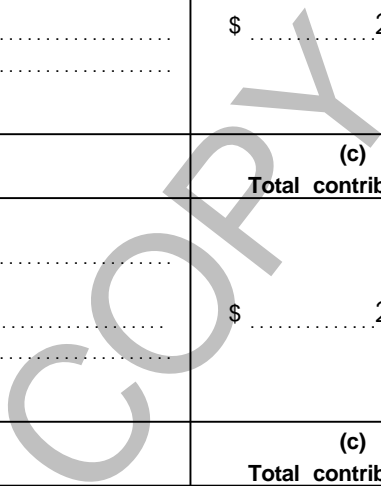
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	\$ 5,192.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	\$ 95,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	\$ 12,539.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

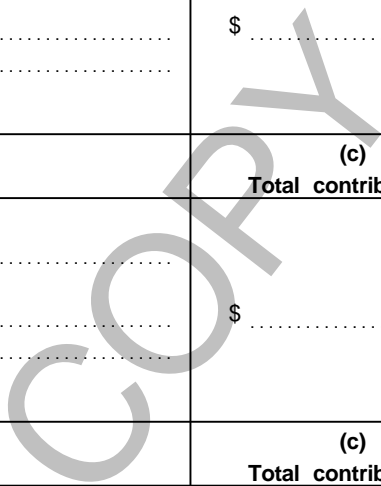
Employer identification number

COLLEGE OF THE ATLANTIC

** - *** 2625

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

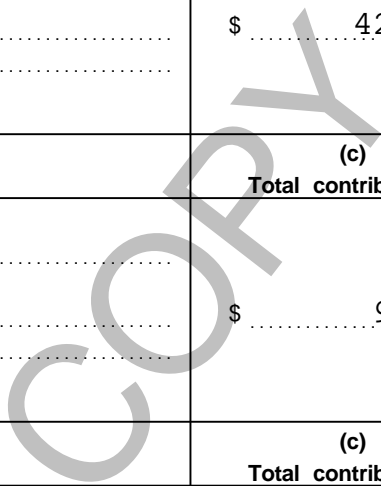
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49		\$ 105,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52		\$ 10,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54		\$ 6,299	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ***2625**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	\$ 8,109	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	\$ 420,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	\$ 92,464	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	\$ 5,091	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

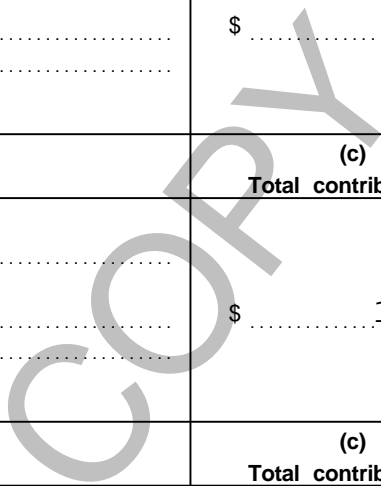


Schedule B (Form 990) (Rev. 12-2024)

Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

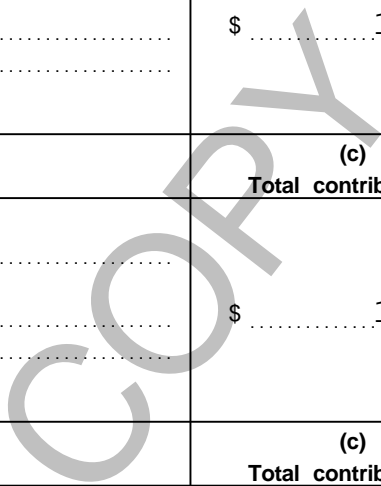
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	\$ 10,100	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	\$ 219,980	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	\$ 10,225	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
66	\$ 7,065	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - *** 2625**

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

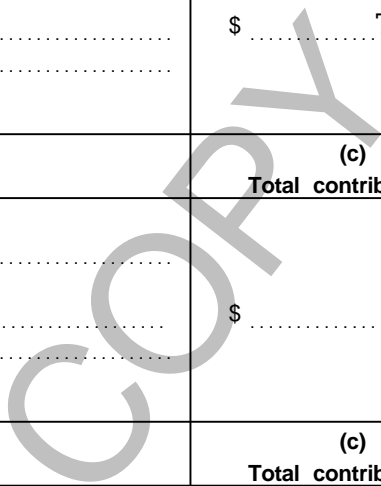
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	\$ 9,104	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	\$ 10,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	\$ 45,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	\$ 30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

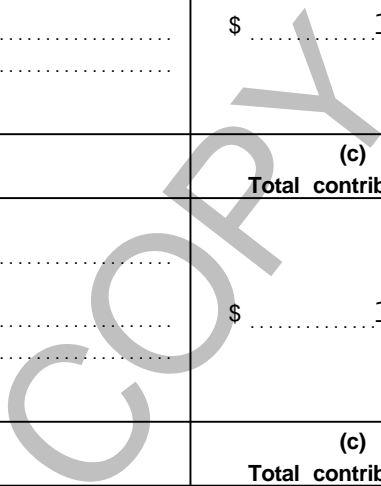
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73		\$ 28,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74		\$ 75,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75		\$ 5,104	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76		\$ 5,592	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77		\$ 5,664	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
78		\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79		\$ 8,600	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80		\$ 10,025	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81		\$ 11,113	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83		\$ 102,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84		\$ 160,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

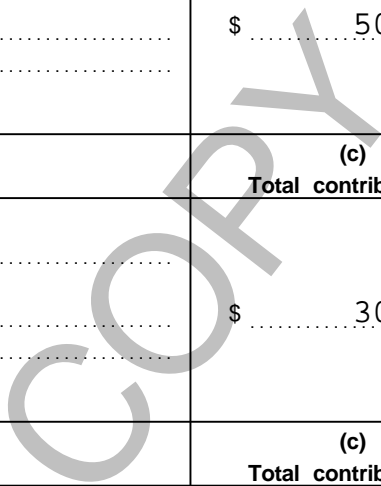


Schedule B (Form 990) (Rev. 12-2024)

Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

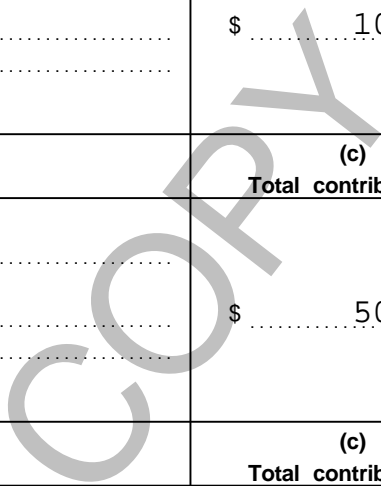
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85	\$ 384,335	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
86	\$ 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	\$ 300,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	\$ 26,875	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
89	\$ 9,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
90	\$ 5,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	\$ 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	\$ 240,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	\$ 2,385,499	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	\$ 6,682	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

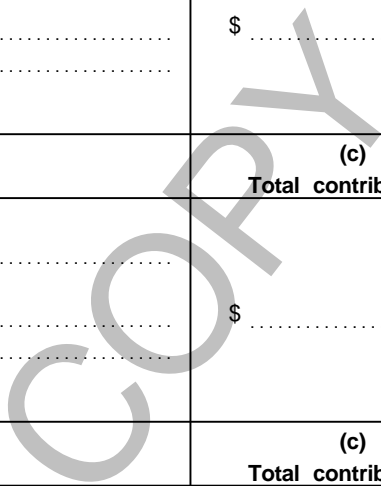


Schedule B (Form 990) (Rev. 12-2024)

Name of organization **COLLEGE OF THE ATLANTIC** Employer identification number **** - ** * 2625**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97	\$ 92,596	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	192 QQQ @ \$522.27	\$ 100,050	12/11/24
14	114 AAPL @ \$218.99	\$ 24,598	05/07/25
15	1240 MRK @ \$84.81	\$ 103,879	05/02/25
26	14 CHTR @ 365.50	\$ 4,843	12/19/24
26	HOUSING EXPENSES	\$ 898	
39	20 QQQ @ 502.26	\$ 9,925	12/04/24

Name of organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
54	22 AAPL STOCK	\$ 6,299	07/15/24
65	25 JPM @ 207.32	\$ 5,033	10/08/24
77	12 VTSAX @ 135.84	\$ 1,630	07/16/24
77	36 HSIC @ 70.48	\$ 2,534	05/14/25
85	56 AAPL @ \$227.93	\$ 12,764	11/21/24
85	200 AMAT @ \$174.06	\$ 34,812	11/21/24

Name of organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
85	12 CVX @ \$161.97	\$ 1,944	11/21/24
85	58 KO @ \$63.38	\$ 3,676	11/21/24
85	69 DIS @ \$115.04	\$ 7,938	11/21/24
85	14 XOM @ \$121.41	\$ 1,700	11/21/24
85	6 IJR @ \$122.33	\$ 734	11/21/24
85	20 IJH @65.33	\$ 1,306	11/21/24

Name of organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
85	10 USMV @ \$92.42	\$ 924	11/21/24
85	12 ISTB @ 47.86	\$ 574	11/21/24
85	26 IBM @ \$218.95	\$ 5,693	11/21/24
85	170 LLY @ \$744	\$ 124,372	11/21/24
85	51 MRK @ \$98.71	\$ 5,034	11/21/24
85	69 NSC @ \$261.44	\$ 18,039	11/21/24

Name of organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
85	120 PEP @ \$161.72	\$ 19,406	11/21/24
85	3 VUG @ \$402.79	\$ 1,208	11/21/24
85	7 VOO @ \$543.55	\$ 3,805	11/21/24
88	2006 FORD E350 ECONOLINE VAN	\$ 26,875	
89	1981 S2 9.2 AFT COCKPIT SLOOP	\$ 9,000	
90	23' BOAT AND TRAILER	\$ 5,000	

SCHEDULE D (Form 990)

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

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

COLLEGE OF THE ATLANTIC

-*2625

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 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?

Part II Conservation Easements

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

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

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

Part IV Escrow and Custodial Arrangements

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

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

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	84,444,621	77,106,414	67,786,884	81,831,154	61,575,783
b Contributions	1,164,873	3,106,362	2,550,443	3,455,308	4,985,393
c Net investment earnings, gains, and losses	7,484,515	8,493,303	10,512,374	-14,256,449	18,229,186
d Grants or scholarships					
e Other expenditures for facilities and programs	4,355,000	4,261,458	3,743,287	3,243,129	2,959,208
f Administrative expenses					
g End of year balance	88,739,009	84,444,621	77,106,414	67,786,884	81,831,154

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 12.88 %
 - b Permanent endowment 57.27 %
 - c Term endowment 29.85 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations? | | X |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,359,452		9,359,452
b Buildings		65,324,272	21,021,132	44,303,140
c Leasehold improvements				
d Equipment		7,144,230	6,178,826	965,404
e Other		7,967,295	5,374,252	2,593,043
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				57,221,039

Part VII Investments – Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments – Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNAMORTIZED BOND PREM, NET INSURANCE	1,170,816
(3) FEDERAL STUDENT LOAN PAYABLE	49,134
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,219,950

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	27,143,231
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	6,910,121	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	597,968	
e	Add lines 2a through 2d	2e		7,508,089
3	Subtract line 2e from line 1	3		19,635,142
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	758,148	
b	Other (Describe in Part XIII.)	4b	11,546,450	
c	Add lines 4a and 4b	4c		12,304,598
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		31,939,740

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

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

1	Total expenses and losses per audited financial statements		1	22,965,349
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	597,968	
e	Add lines 2a through 2d	2e		597,968
3	Subtract line 2e from line 1	3		22,367,381
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	758,148	
b	Other (Describe in Part XIII.)	4b	11,546,450	
c	Add lines 4a and 4b	4c		12,304,598
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		34,671,979

Part XIII Supplemental Information

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

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS
 ENDOWMENT FUNDS ARE TO BE USED FOR THE SUPPORT OF PROGRAMS, SCHOLARSHIPS, FACULTY CHAIRS AND GENERAL OPERATIONS AND OTHER PURPOSES IN COMPLIANCE WITH THE DONORS INTENT.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER
 COST OF SALES - FARM \$ 544,466
 BIKE SHOP RENTAL EXPENSES \$ 53,502

PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER
 GRANTS TO STUDENTS \$ 11,546,450

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER
 COST OF SALES - FARM \$ 544,466
 BIKE SHOP RENTAL EXPENSES \$ 53,502

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER
 GRANTS TO STUDENTS \$ 11,546,450

Part XIII Supplemental Information *(continued)*

COPY

SCHEDULE E
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schools
Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or
Form 990-EZ, Part VI, line 48.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

COLLEGE OF THE ATLANTIC

Employer identification number

-*2625

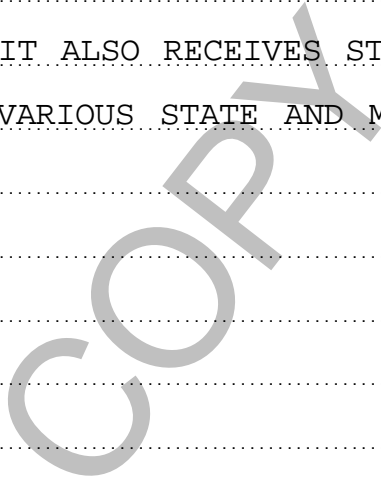
Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II COA POSTS ITS DISCRIMINATION POLICY ONLINE ON THE COMMUNITY POLICIES PAGE ON THEIR WEBSITE AT HTTPS://WWW.COA.EDU/POLICIES/COMMUNITY-POLICIES/ COA HAS ALSO DONE AN INCREDIBLE AMOUNT OF WORK ON DIVERSITY, EQUITY, AND INCLUSION OVER THE PAST SEVERAL YEARS, WHICH IS	X	
4 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on either line 6a or line 6b, explain in Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II	X	

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

SCH E - PUBLICATION OF NONDISCRIMINATORY POLICY IN MEDIA EXPLANATION
POSTED ONLINE AT [HTTPS://WWW.COA.EDU/ABOUT/DEI/](https://www.coa.edu/about/dei/)

SCH E - FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION
COLLEGE OF THE ATLANTIC HAS RECEIVED FINANCIAL ASSISTANCE FUNDS
THROUGH VARIOUS U.S. DEPARTMENT OF EDUCATION PROGRAMS THAT
INCLUDE 1. FEDERAL PELL GRANT, 2. FEDERAL SUPPLEMENTAL EDUCATION
OPPORTUNITY GRANT, 3. FEDERAL WORK-STUDY, 4. FEDERAL PERKINS
LOAN, 5. FEDERAL DIRECT LOAN. IT ALSO RECEIVES STUDENT GRANT AND
SCHOLARSHIP ASSISTANCE THROUGH VARIOUS STATE AND MUNICIPAL
AGENCIES.



**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

COLLEGE OF THE ATLANTIC

Employer identification number

-*2625

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

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

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 SCHOLARSHIPS	361	11,546,450			
2					
3					
4					
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
 GRANTS ARE PRIMARILY TO STUDENTS FOR SCHOLARSHIPS AND ARE APPLIED DIRECTLY
 AGAINST THE STUDENTS' ACCOUNT RECEIVABLE BALANCE. THE FINANCIAL AID OFFICE
 IS PRIMARILY RESPONSIBLE FOR DETERMINING THE ELIGIBILITY AND AWARDED OF
 THE AID. THIS IS DONE THROUGH SOFTWARE DESIGNED TO ASSIST IN THE PROCESS.

SCHEDULE J
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

-*2625

COLLEGE OF THE ATLANTIC

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
1a		
1b		X
2		X
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 DARRON COLLINS PRESIDENT	(i)	356,407	0	0	7,659	14,555	378,621	0
	(ii)	0	0	0	0	0	0	0
2 SYLVIA TORTI PRESIDENT	(i)	219,591	0	0	13,013	14,359	246,963	0
	(ii)	0	0	0	0	0	0	0
3 CARLYLE PAUL ADMIN DEAN	(i)	142,884	0	0	10,585	25,649	179,118	0
	(ii)	0	0	0	0	0	0	0
4 KENNETH HILL ACADEMIC DEAN	(i)	117,219	0	0	9,904	25,649	152,772	0
	(ii)	0	0	0	0	0	0	0
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1B - WRITTEN REIMBURSEMENT POLICY EXPLANATION
THE PRESIDENT'S HOUSING PROVIDED WAS PART OF THE NEGOTIATED EMPLOYMENT
CONTRACT. NO FURTHER SUBSTANTIATION REQUIRED.

COPY

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

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **COLLEGE OF THE ATLANTIC** Employer identification number ****-***2625**

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A MAINE HEALTH & HIGHER ED - 2017B	** - ***4384	560425V80	11/01/07	6,610,000	SEE PART VI	X		X		X	
B MAINE HEALTH & HIGHER ED - 2021C	** - ***4384		12/02/21	8,515,000	SEE PART VI		X	X		X	
C MAINE HEALTH & HIGHER ED - 2025A	** - ***4384		05/15/25	2,970,000	SEE PART VI		X	X		X	
D											

Part II Proceeds										
	A		B		C		D			
1 Amount of bonds retired										
2 Amount of bonds legally defeased										
3 Total proceeds of issue	6,773,689		9,595,127		3,106,523					
4 Gross proceeds in reserve funds	431,000		474,813		199,843					
5 Capitalized interest from proceeds	345,400									
6 Proceeds in refunding escrows										
7 Issuance costs from proceeds	111,900		187,454		63,572					
8 Credit enhancement from proceeds										
9 Working capital expenditures from proceeds										
10 Capital expenditures from proceeds	5,884,800		8,930,000		2,841,457					
11 Other spent proceeds										
12 Other unspent proceeds										
13 Year of substantial completion										
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		X		X				
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X		X				
16 Has the final allocation of proceeds been made?	X		X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X					

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

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

Part III Private Business Use

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

Part IV Arbitrage

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

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

COPY

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

**Open To Public
Inspection**

COLLEGE OF THE ATLANTIC

Employer identification number
* * - * * * 2625

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	1	26,875	DONOR PRIVATE APPRAISAL
7 Boats and planes	X	2	14,000	DONOR PRIVATE APPRAISALS
8 Intellectual property				
9 Securities — Publicly traded	X	9	502,720	FMV ON DATE OF SALE
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (HOUSING EXP)	X	1	898	FMV PROVIDED BY DONOR
26 Other (FOOD & EVENT)	X	3	3,441	FMV OF SERVICES RECEIVED
27 Other ()				
28 Other ()				

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

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

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

COPY

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization COLLEGE OF THE ATLANTIC	Employer identification number ** - ***2625
--	---

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 MANAGEMENT REVIEWS THE 990 FOR ACCURACY PRIOR TO FILING AND PROVIDES THE INFORMATION WITH THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY THE COLLEGE ANNUALLY DISTRIBUTES TO EACH TRUSTEE A CONFLICT OF INTEREST FORM WHICH IS RETURNED TO THE COLLEGE AND REVIEWED BY THE CFO.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE CFO'S SALARY IS COMPARED TO A MARKET STUDY, WHICH IS UPDATED PERIODICALLY. THE POSITION WAS HIRED WELL WITHIN THE NORMAL RANGE, ALTHOUGH BELOW THE AVERAGE FOR COMPARABLE POSITIONS, AND RAISES HAVE KEPT THESE SALARIES BELOW THE MEDIAN.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS ALL ADMINISTRATIVE AND DEAN SALARIES ARE COMPARED TO A MARKET STUDY, WHICH IS UPDATED PERIODICALLY. ALL SUCH POSITIONS WERE HIRED WELL WITHIN THE NORMAL RANGE, ALTHOUGH BELOW THE AVERAGE FOR COMPARABLE POSITIONS, AND RAISES HAVE KEPT THESE SALARIES BELOW THE MEDIAN.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION	
COST OF SALES - FARM	\$ 544,466
BIKE SHOP RENTAL EXPENSES	\$ 53,502
GRANTS TO STUDENTS	\$ -11,546,450
COST OF SALES - FARM	\$ -544,466
BIKE SHOP RENTAL EXPENSES	\$ -53,502
GRANTS TO STUDENTS	\$ 11,546,450

Filing Instructions

COLLEGE OF THE ATLANTIC

Exempt Organization Business Tax Return

Taxable Year Ended June 30, 2025

Date Due: AS SOON AS POSSIBLE

Remittance: Your Form 990-T for the tax year ended 6/30/25 shows a balance due of \$12,095. No remittance is to be filed with Form 990-T, but a payment in the amount of \$12,095 should be made by a method of Electronic Funds Transfer (EFT) on or before the above date. If using the ACH Debit Remittance Method, contact the EFTPS Financial Agent of the U.S. Treasury and direct the Agent to initiate a withdrawal from your account. If using the ACH Credit Remittance Method, contact your financial institution to initiate this tax payment.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Nicholson, Michaud & Nadeau, CPAs
76 Silver St
Waterville, ME 04901-6528

***Important:* Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.**

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2024

For calendar year 2024 or other tax year beginning 07/01/24, and ending 06/30/25.

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection
for 501(c)(3)
Organizations Only

Department of the Treasury
Internal Revenue Service

A Check box if address changed.

B Exempt under section
 501(c)(3) 220(e)
 408(e) 530(a)
 408A 529A

C Book value of all assets at end of year 155,722,122

D Employer identification number
-*2625

E Group exemption number (see instructions)

F Check box if an amended return.

G Check organization type
 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university
 6417(d)(1)(A) Applicable entity

H Check if filing only to claim Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

J Enter the number of attached Schedules A (Form 990-T) 1

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation

L The books are in care of MELISSA COOK Telephone number 207-288-5015

Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	58,181
2	Reserved	2	
3	Add lines 1 and 2	3	58,181
4	Charitable contributions (see instructions for limitation rules)	4	
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	58,181
6	Deduction for net operating loss. See instructions	6	0
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	58,181
8	Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9	Trusts. Section 199A deduction. See instructions	9	
10	Total deductions. Add lines 8 and 9	10	1,000
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	57,181

Part II Tax Computation

1	Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21)	1	12,008
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	0
3	Proxy tax. See instructions	3	
4a	Amount from Form 4255, Part I, line 3, column (q)	4a	
4b	Other tax amounts. See instructions	4b	
5	Alternative minimum tax	5	
6	Tax on noncompliant facility income. See instructions	6	
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	12,008

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a	
b	Other credits (see instructions)	1b	
c	General business credit. Attach Form 3800 (see instructions)	1c	
d	Credit for prior-year minimum tax (attach Form 8801 or 8827)	1d	
e	Total credits. Add lines 1a through 1d	1e	
2	Subtract line 1e from Part II, line 7	2	12,008
3a	Amount from Form 4255, Part I, line 3, column (r) (see instructions)	3a	
b	Amount due from Form 8611	3b	
c	Amount due from Form 8697	3c	
d	Amount due from Form 8866	3d	
e	Other amounts due (see instructions)	3e	
f	Total amounts due. Add lines 3a through 3e	3f	
4	Total tax. Add lines 2 and 3f (see instructions) <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	12,008

For Paperwork Reduction Act Notice, see instructions.

DAA

Part III Tax and Payments (continued)

Table with 11 rows for tax and payments. Line 5: Current net 965 tax liability paid from Form 965-A, Part II, column (k). Line 6a-j: Various payment categories. Line 7: Total payments. Line 8: Estimated tax penalty. Line 9: Tax due. Line 10: Overpayment. Line 11: Amount of line 10 you want: Credited to 2025 estimated tax / Refunded.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

Table with 5 rows for statements regarding activities. Row 1: At any time during the 2024 calendar year, did the organization have an interest in or a signature or other authority over a financial account... Row 2: During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? Row 3: Enter the amount of tax-exempt interest received or accrued during the tax year. Row 4: Enter available pre-2018 NOL carryovers here. Row 5: Post-2017 NOL carryovers. Includes a table for Business Activity Code and Available post-2017 NOL carryover.

Part V Supplemental Information

Provide any additional information. See instructions.

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

Sign Here

Signature of officer: _____ Date: _____ Title: PRESIDENT

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Table with 4 columns: Print/Type preparer's name, Preparer's signature, Date, Check self-employed if PTIN. Row 1: ERIK NADEAU, CPA, Signature, 03/05/26, self-employed, *****. Row 2: Firm's name: NICHOLSON, MICHAUD & NADEAU, CPAS, Firm's EIN: ***-***-1973. Row 3: Firm's address: 76 SILVER ST, WATERVILLE, ME 04901-6528, Phone no.: 207-872-7077.

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2024

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization COLLEGE OF THE ATLANTIC	B Employer identification number **-***2625
C Unrelated business activity code (see instructions) ... 532000	D Sequence: 1 of 1

E Describe the unrelated trade or business **BIKE SHOP RENTAL**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Part IV)	6 119,248	53,502	65,746
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement)	12		
13 Total. Combine lines 3 through 12	13 119,248	53,502	65,746

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income.

1 Compensation of officers, directors, and trustees (Part X)	1		
2 Salaries and wages	2		5,692
3 Repairs and maintenance	3		
4 Bad debts	4		
5 Interest (attach statement). See instructions	5		
6 Taxes and licenses	6		
7 Depreciation (attach Form 4562). See instructions	7		
8 Less depreciation claimed in Part III and elsewhere on return	8a		8b 0
9 Depletion	9		
10 Contributions to deferred compensation plans	10		
11 Employee benefit programs	11		1,873
12 Excess exempt expenses (Part VIII)	12		
13 Excess readership costs (Part IX)	13		
14 Other deductions (attach statement)	14		
15 Total deductions. Add lines 1 through 14	15		7,565
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		58,181
17 Deduction for net operating loss. See instructions	17		
18 Unrelated business taxable income. Subtract line 17 from line 16	18		58,181

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2024

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A	<input checked="" type="checkbox"/>	105 EDEN STREET	BAR HARBOR	ME	04609
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	119,248			
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D	119,248			
3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)				119,248
4 Deductions directly connected with the income in lines 2a and 2b (attach statement)	53,502			
5 Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)				53,502

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A	<input type="checkbox"/>	
B	<input type="checkbox"/>	
C	<input type="checkbox"/>	
D	<input type="checkbox"/>	

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)				
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)				
11 Total dividends — received deductions included in line 10				

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on Part I, line 8, column (B).

Totals

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

Add amounts in column 2. Enter here and on Part I, line 9, column (A).

Add amounts in column 5. Enter here and on Part I, line 9, column (B).

Totals

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5 Gross income from activity that is not unrelated business income	5
6 Expenses attributable to income entered on line 5	6
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

BIKE SHOP RENTAL

Schedule A (990T), Part IV, Line 4 - Rent Expense Information

Description	Deduction
BIKE SHOP RENTAL	\$
TAXES	14,566
UTILITIES	735
DEPRECIATION - ALLOCATED	38,201
TOTAL	\$ <u>53,502</u>

COPY

Form **2220**

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

Attach to the corporation's tax return.
Go to www.irs.gov/Form2220 for instructions and the latest information.

2024

Name **COLLEGE OF THE ATLANTIC** Employer identification number ****-***2625**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1	Total tax (see instructions)	1	12,008
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	12a	
b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
c	Credit for federal tax paid on fuels (see instructions)	2c	
d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	12,008
4	Enter the tax shown on the corporation's 2023 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	1,584
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	1,584

Part II Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6** The corporation is using the adjusted seasonal installment method.
- 7** The corporation is using the annualized income installment method.
- 8** The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment		(a)	(b)	(c)	(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	10/15/24	12/15/24	03/15/25	06/15/25
10	Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	396	396	396	396
11	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions				
<i>Complete lines 12 through 18 of one column before going to the next column.</i>					
12	Enter amount, if any, from line 18 of the preceding column				
13	Add lines 11 and 12				
14	Add amounts on lines 16 and 17 of the preceding column		396	792	1,188
15	Subtract line 14 from line 13. If zero or less, enter -0-	0	0	0	0
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-		396	792	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	396	396	396	396
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19 SEE WORKSHEET			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2024 and before 7/1/2024	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{366}$ x 8% (0.08)	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2024 and before 10/1/2024	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{366}$ x 8% (0.08)	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2024 and before 1/1/2025	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{366}$ x 8% (0.08)	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2024 and before 4/1/2025	27			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365}$ x 7% (0.07)	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2025 and before 7/1/2025	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365}$ x **%	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2025 and before 10/1/2025	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365}$ x **%	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2025 and before 1/1/2026	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365}$ x **%	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2025 and before 3/16/2026	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365}$ x **%	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns				38 \$ 87

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

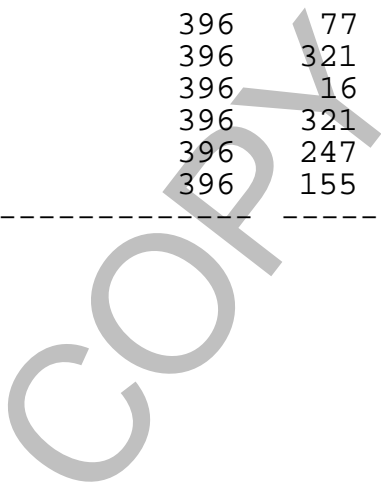
Form 2220	Form 2220 Worksheet	2024
For calendar year 2024, or tax year beginning <u>07/01/24</u> , and ending <u>06/30/25</u>		

Name <u>COLLEGE OF THE ATLANTIC</u>	Employer Identification Number <u>** - *** 2625</u>
--	--

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Due date of estimated payment	<u>10/15/24</u>	<u>12/15/24</u>	<u>03/15/25</u>	<u>06/15/25</u>
Amount of underpayment	<u>396</u>	<u>396</u>	<u>396</u>	<u>396</u>
Prior year overpayment applied	_____			

	1st Payment	2nd Payment	3rd Payment	4th Payment	5th Payment
Date of payment	_____	_____	_____	_____	_____
Amount of payment	_____	_____	_____	_____	_____

QTR	FROM	TO	UNDERPAYMENT	#DAYS	RATE	PENALTY
1	10/15/24	12/31/24	396	77	8.00	7
1	12/31/24	11/17/25	396	321	7.00	24
2	12/15/24	12/31/24	396	16	8.00	1
2	12/31/24	11/17/25	396	321	7.00	24
3	3/15/25	11/17/25	396	247	7.00	19
4	6/15/25	11/17/25	396	155	7.00	12
TOTAL PENALTY						87
						=====



Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)
Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024

Attachment
Sequence No. **179**

Name(s) shown on return **COLLEGE OF THE ATLANTIC** Identifying number ****-***2625**

Business or activity to which this form relates
INVENTORY SALES

Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,214,968

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	2,214,968
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:										
1	CANOE LAUNCH - 504	6/30/13	3,002			3,002	39	MO S/L	539	77
3	B & G IMPROVEMENTS	7/01/91	4,600			4,600	37	MO S/L	4,331	124
4	BUILDING GATES	12/31/92	1,427,186			1,427,186	31	MO S/L	1,425,438	1,748
5	BUILDING IMPROVEMENTS	7/01/91	6,926			6,926	27	MO S/L	6,926	0
6	BUILDING	7/01/91	356,096			356,096	27	MO S/L	356,096	0
7	BUILDING IMPROVEMENTS	12/31/94	15,320			15,320	39	MO S/L	11,412	393
8	BUILDING IMPROVEMENTS	12/31/95	70,803			70,803	39	MO S/L	51,807	1,816
9	COLLINS DORM	7/01/91	149,700			149,700	37	MO S/L	149,700	0
10	DORM ARCH FEES	12/31/92	13,061			13,061	0	-- Memo	0	0
11	DORMITORY	9/01/95	2,271,879			2,271,879	27	MO S/L	2,271,879	0
12	GATES	7/01/91	53,155			53,155	0	-- Memo	0	0
13	GATES	12/31/93	91,906			91,906	39	MO S/L	70,802	2,356
14	GATES AUDITORIUM	7/01/91	80,300			80,300	37	MO S/L	76,727	2,171
15	GATES HOUSING	7/01/91	227,850			227,850	37	MO S/L	217,690	6,158
16	IMPROVEMENTS	12/31/96	281,170			281,170	39	MO S/L	198,556	7,210
17	KALBER IMPROVEMENTS	12/31/93	10,000			10,000	39	MO S/L	7,682	256
18	KALBER/THORNDIKE	7/01/91	3,048,700			3,048,700	37	MO S/L	2,953,828	82,398
19	OTHER BUILDINGS	7/01/91	76,000			76,000	37	MO S/L	76,000	0
20	POTTERY	7/01/91	18,700			18,700	37	MO S/L	18,700	0
21	RYLE IMPROVEMENTS	7/01/91	65,500			65,500	37	MO S/L	65,500	0
22	SCIENCE LAB	7/01/91	989,000			989,000	37	MO S/L	989,000	0
23	SHOP	7/01/91	70,700			70,700	37	MO S/L	70,700	0
24	TURRETS	7/01/91	768,000			768,000	37	MO S/L	768,000	0
25	TURRETS IMPROVEMENTS	12/31/93	16,000			16,000	39	MO S/L	12,301	411
26	LIGHTHOUSES	7/01/97	300,000			300,000	39	MO S/L	207,377	7,692
27	MUSEUM	6/30/98	98,622			98,622	39	MO S/L	65,859	2,529
28	SCIENCE BUILDING	9/30/97	117,762			117,762	39	MO S/L	80,912	3,019
29	SEWER LINE	9/30/97	37,735			37,735	15	MO S/L	37,735	0
30	BEECH HILL FARM PROPERTY	5/06/99	283,333			283,333	39	MO S/L	182,836	7,265
31	GARDNER PROPERTY	11/25/98	705,955			705,955	39	MO S/L	463,086	18,101
32	COTTAGE	12/31/98	26,622			26,622	39	MO S/L	17,414	683
33	CARPET ARTS AND SCIENCE BUILDIN	12/31/98	13,276			13,276	7	MO S/L	13,276	0
34	NATURAL HISTORY MUSEUM	12/31/98	495,201			495,201	39	MO S/L	323,776	12,698
35	LIGHTHOUSE	12/31/98	19,429			19,429	39	MO S/L	12,700	498
36	BOAR RAMPS & DORY	12/31/98	46,669			46,669	20	MO S/L	46,669	0
37	MUSEUM CONSTRUCTION	6/30/00	468,320			468,320	39	MO S/L	288,193	12,008
38	GARDNER IMPROVEMENTS	12/31/99	104,102			104,102	39	MO S/L	65,392	2,670
39	MUSEUM WALKIN	6/30/00	10,133			10,133	25	MO S/L	9,722	405
40	TURRETS IMPROVEMENTS	6/30/00	66,348			66,348	39	MO S/L	40,825	1,701
41	LIGHTHOUSE IMPROVEMENTS	12/31/99	27,429			27,429	39	MO S/L	17,226	703
42	SEA URCHIN IMPROVEMENTS	12/31/99	20,567			20,567	39	MO S/L	12,914	527
43	MUSEUM	12/31/00	35,025			35,025	39	MO S/L	21,103	898
44	LIGHTHOUSE IMPROVEMENTS	12/31/00	59,032			59,032	39	MO S/L	35,577	1,514
45	TURRETS IMPROVEMENTS	12/31/00	111,575			111,575	39	MO S/L	67,233	2,860
46	GARDNER IMPROVEMENTS	12/31/00	4,231			4,231	39	MO S/L	2,540	109
47	ISLANDS RAMP	12/31/01	28,055			28,055	20	MO S/L	28,055	0
48	ISLANDS CLASSROOM	12/31/01	24,123			24,123	39	MO S/L	13,925	618
49	ISLANDS OTHER	12/31/01	7,684			7,684	20	MO S/L	7,684	0
50	COLUMN REPLACEMENT	12/31/01	16,080			16,080	20	MO S/L	16,080	0
51	TURRETS IMPROVEMENTS	12/31/01	65,911			65,911	39	MO S/L	38,025	1,690
52	TURRETS IMPROVEMENTS	12/31/02	173,660			173,660	39	MO S/L	95,738	4,453
53	ZOOLOGY LAB EXTENSION	12/31/02	27,564			27,564	39	MO S/L	15,199	707
54	BUILDING IMPROVEMENT - DOCK	12/31/03	40,167			40,167	10	MO S/L	40,167	0
55	BUILDING IMPROVEMENT - ZOO LAB	12/31/03	6,369			6,369	39	MO S/L	3,344	163
56	BUILDING IMPROVEMENTS - MD ROC	12/31/03	37,199			37,199	10	MO S/L	37,199	0
57	BUILDING IMPROVEMENTS - TURRET	12/31/03	1,580			1,580	39	MO S/L	838	40
58	BUILDING IMPROVEMENTS - MUSEUM	7/01/04	478			478	10	MO S/L	478	0
59	STUDENT HOUSING - NEW	7/01/05	189,756			189,756	39	MO S/L	92,452	4,865
60	STUDENT HOUSING - NEW	7/01/05	231,269			231,269	39	MO S/L	112,670	5,930
61	BUILDING IMPROVEMENTS	7/01/05	78,662			78,662	39	MO S/L	38,323	2,017
62	BUILDINGS WITCHCLIFF	7/22/05	498,003			498,003	27	MO S/L	342,563	18,109
63	BUILDING IMPROVEMENTS - ARTS	12/31/05	88,924			88,924	20	MO S/L	82,252	4,446
64	BUILDING IMPROVEMENTS - DRURY	12/31/05	16,235			16,235	20	MO S/L	15,021	812
65	STUDENT HOUSING - NEW	6/30/06	137,019			137,019	39	MO S/L	63,236	3,513
66	BUILDING IMPROVEMENTS - WITCHC	12/31/05	23,289			23,289	39	MO S/L	11,046	597
67	BUILDING IMPROVEMENTS	12/31/06	108,411			108,411	39	MO S/L	48,649	2,780
68	BUILDING IMPROVEMENTS	12/31/07	460,049			460,049	39	MO S/L	194,635	11,796
69	STUDENT HOUSING - NEW	12/31/08	5,879,216			5,879,216	39	MO S/L	2,336,611	150,749

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
70	DEERING COMMON	12/31/08	1,699,627				1,699,627	39	MO S/L	675,491	43,580
71	BUILDING IMPROVEMENTS - GDI	12/31/08	137,900				137,900	39	MO S/L	54,808	3,535
72	TURRETS IMPROVEMENTS	12/31/08	76,822				76,822	39	MO S/L	30,534	1,970
73	BUILDING IMPROVEMENTS - MDR	12/31/08	53,102				53,102	39	MO S/L	21,109	1,362
74	B/T IMPROVEMENTS	12/31/08	6,127				6,127	39	MO S/L	2,435	157
75	JOHNSON IMPROVEMENTS	12/31/08	138,029				138,029	39	MO S/L	54,856	3,539
76	FARMHOUSE IMPROVEMENTS	12/31/08	22,130				22,130	39	MO S/L	8,791	568
77	GREENHOUSE	12/31/08	18,001				18,001	20	MO S/L	13,950	900
78	BUILDING IMPROVEMENTS	12/31/08	28,182				28,182	39	MO S/L	11,204	723
79	CAPITALIZED INTEREST - STUDENT F	6/30/09	99,116				99,116	39	MO S/L	38,117	2,542
80	BI - MDR HURRICANCE	12/31/09	25,328				25,328	20	MO S/L	18,359	1,266
81	BI - GDI HOUSE IMPROVEMENTS	12/31/09	10,000				10,000	27	MO S/L	5,276	364
82	BI - GDI ELECTRICAL IMPROVEMENT	12/31/09	7,800				7,800	27	MO S/L	4,116	284
83	BI - BHF PAINTING	12/31/09	1,545				1,545	10	MO S/L	1,545	0
84	BI - BHF GH ELECTRICAL	12/31/09	1,125				1,125	10	MO S/L	1,125	0
85	BI - MDR HOUSE	12/31/09	5,586				5,586	27	MO S/L	2,945	203
86	BI - MDR HOUSE	12/31/09	3,850				3,850	27	MO S/L	2,030	140
87	BI - MDR PROPANE TOILET	12/31/09	7,982				7,982	10	MO S/L	7,982	0
88	BI - MDR HOUSE	12/31/09	1,665				1,665	27	MO S/L	882	60
89	BI - MDR HOUSE	12/31/09	1,039				1,039	27	MO S/L	550	38
90	ROCKERFELLER FARMF-CARNE	12/31/09	200,000				200,000	27	MO S/L	105,457	7,272
91	FARM - 504/571	12/31/10	8,603				8,603	10	MO S/L	8,603	0
92	BHF SOLAR PANELS - 571	12/31/10	18,206				18,206	10	MO S/L	18,206	0
93	BHF GREENHOUSE - 231	12/31/10	6,508				6,508	10	MO S/L	6,508	0
94	BOILER BUILDING 3 PHASE POWER	12/31/10	8,969				8,969	10	MO S/L	8,969	0
95	DORM TIE IN (G&G)	12/31/10	1,283				1,283	10	MO S/L	1,283	0
96	SIMPLEX - 231	12/31/10	5,046				5,046	10	MO S/L	5,046	0
97	BOILERMATE SEAFOX - 231	12/31/10	4,810				4,810	10	MO S/L	4,810	0
98	FIRE PANEL REPLACEMENT - 231	12/31/10	8,637				8,637	10	MO S/L	8,637	0
99	GREENHOUSE - 641	12/31/11	18,183				18,183	39	MO S/L	5,826	466
100	GREENHOUSE IMPROVEMENT - 641	12/31/11	4,912				4,912	39	MO S/L	1,575	126
101	PELLET BURNER - 571	12/31/11	3,925				3,925	39	MO S/L	1,260	101
102	METER PANEL ROCK FARM - 571	12/31/11	3,948				3,948	39	MO S/L	1,264	101
103	COND UNIT BHF 571	12/31/11	4,268				4,268	39	MO S/L	1,365	110
104	BHF BLD WORK 270/271	12/31/11	9,699				9,699	39	MO S/L	3,110	249
105	HEAT PUMP 571	12/31/11	3,350				3,350	39	MO S/L	1,075	85
106	ISLAND SOLAR 504	12/31/11	16,469				16,469	39	MO S/L	5,276	423
107	CHEM ELECTRICAL WORK 504	12/31/11	3,667				3,667	39	MO S/L	1,175	94
108	GDI SHED 504	12/31/11	6,000				6,000	39	MO S/L	1,924	154
109	PUMP 360	12/31/11	2,036				2,036	39	MO S/L	651	52
110	LIBRARY WINDOW 231	12/31/11	2,657				2,657	39	MO S/L	851	68
111	F&F - GENERAL	12/31/93	169,005				169,005	10	MO S/L	169,005	0
112	F&F - GENERAL	12/31/94	170,954				170,954	10	MO S/L	170,954	0
113	F&F - ACADEMIC	7/01/91	61,775				61,775	10	MO S/L	61,775	0
114	F&F - ACADEMIC 85-86	7/01/91	44,300				44,300	10	MO S/L	44,300	0
115	F&F - ACADEMIC 86-87	7/01/91	71,000				71,000	10	MO S/L	71,000	0
116	F&F ACADEMIC - 87-88	7/01/91	5,550				5,550	10	MO S/L	5,550	0
117	F&F ACADEMIC - 88-89	7/01/91	81,700				81,700	10	MO S/L	81,700	0
118	F&F ACADEMIC - 89-90	7/01/91	12,200				12,200	10	MO S/L	12,200	0
119	F&F ACADEMIC - 89-90	7/01/91	12,700				12,700	10	MO S/L	12,700	0
120	F&F ACADEMIC - 89-90	7/01/91	15,450				15,450	10	MO S/L	15,450	0
121	F&F ACADEMIC - 91-92	7/01/91	53,145				53,145	10	MO S/L	53,145	0
122	F&F COMPUTER (TRADE)	7/01/91	28,000				28,000	10	MO S/L	28,000	0
123	F&F COMPUTERS	12/31/95	53,603				53,603	5	MO S/L	53,603	0
124	F&F COMPUTERS	12/31/96	143,081				143,081	5	MO S/L	143,081	0
125	F&F GENERAL	7/01/91	67,750				67,750	10	MO S/L	67,750	0
126	F&F GENERAL	7/01/92	33,186				33,186	8	MO S/L	33,186	0
127	F&F GENERAL	12/31/95	37,368				37,368	7	MO S/L	37,368	0
128	F&F GENERAL 85-86	7/01/91	17,500				17,500	10	MO S/L	17,500	0
129	F&F GENERAL 86-87	7/01/91	23,700				23,700	10	MO S/L	23,700	0
130	F&F GENERAL 87-88	7/01/91	13,100				13,100	10	MO S/L	13,100	0
131	F&F GENERAL 88-89	7/01/91	8,900				8,900	10	MO S/L	8,900	0
132	F&F GENERAL 89-90	7/01/91	38,050				38,050	10	MO S/L	38,050	0
133	F&F GENERAL 90-91	7/01/91	24,294				24,294	10	MO S/L	24,294	0
134	F&F GENERAL 91-92	7/01/91	5,023				5,023	10	MO S/L	5,023	0
135	F&F GENERAL 91-92	7/01/91	21,642				21,642	10	MO S/L	21,642	0
136	F&F NEW DORM	12/31/95	121,861				121,861	7	MO S/L	121,861	0
137	PHONE	7/01/91	63,200				63,200	10	MO S/L	63,200	0
138	PRINTS	7/01/91	12,900				12,900	10	MO S/L	12,900	0
139	GENERAL	7/01/97	7,386				7,386	5	MO S/L	7,386	0
140	TITLE III	9/30/97	94,917				94,917	5	MO S/L	94,917	0

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
141	WATERCOLORS	7/01/97	109,000				109,000	10	MO S/L	109,000	0
142	J 24 HIGH ROLLER TRAILOR	9/28/98	17,500				17,500	5	MO S/L	17,500	0
143	1994 JOHN DEERE F911 MOWER	11/02/98	8,300				8,300	5	MO S/L	8,300	0
144	F&F 98-99	12/31/98	113,846				113,846	10	MO S/L	113,846	0
145	GARDNER FURNISHINGS	12/31/99	25,767				25,767	7	MO S/L	25,767	0
146	LIGHTHOUSE EQUIPMENT	12/31/99	5,475				5,475	10	MO S/L	5,475	0
147	COMPUTER EQUIPMENT	12/31/99	74,010				74,010	5	MO S/L	74,010	0
148	PRINTER	12/31/99	14,475				14,475	5	MO S/L	14,475	0
149	COMPUTER AND AUDIOVISUAL EQUI	12/31/00	88,876				88,876	5	MO S/L	88,876	0
150	FURNISHINGS	12/31/00	7,645				7,645	5	MO S/L	7,645	0
151	LIGHTHOUSE EQUIPMENT	12/31/00	5,475				5,475	5	MO S/L	5,475	0
152	FURNISHINGS - DAVIS GRANT	12/31/02	33,506				33,506	7	MO S/L	33,506	0
153	CAMCORDER	12/31/02	3,380				3,380	5	MO S/L	3,380	0
154	DIGITAL PIANO	12/31/02	2,238				2,238	5	MO S/L	2,238	0
155	VIDEO EQUIPMENT	12/31/02	4,928				4,928	5	MO S/L	4,928	0
156	COMPUTER EQUIPMENT - CALFIRST	12/31/02	64,391				64,391	5	MO S/L	64,391	0
157	ACADEMIC - DAVIS	12/31/03	16,494				16,494	5	MO S/L	16,494	0
158	ACADEMIC - CHRISTENSEN	12/31/03	52,005				52,005	5	MO S/L	52,005	0
159	ACADEMIC	12/31/03	2,686				2,686	5	MO S/L	2,686	0
160	COMPUTER EQUIPMENT	12/31/03	52,427				52,427	5	MO S/L	52,427	0
161	FURNISHINGS AND EQUIPMENT	12/31/04	20,317				20,317	5	MO S/L	20,317	0
162	FURNISHINGS - TURRETS II	12/31/05	51,870				51,870	7	MO S/L	51,870	0
163	FURN & EQUIP - PER LIST	12/31/05	57,106				57,106	7	MO S/L	57,106	0
164	F&E	12/31/06	31,094				31,094	7	MO S/L	31,094	0
165	F&E	12/31/06	94,935				94,935	5	MO S/L	94,935	0
166	F&E PER LIST	12/31/07	324,853				324,853	7	MO S/L	324,853	0
167	DEERING COMMON	12/31/08	110,880				110,880	7	MO S/L	110,880	0
168	STUDENT HOUSING	12/31/08	172,240				172,240	7	MO S/L	172,240	0
169	COMPUTERS - 231 AND 222	12/31/08	67,241				67,241	5	MO S/L	67,241	0
170	IT LAN UPGRADE	12/31/08	55,798				55,798	5	MO S/L	55,798	0
171	F&E PER LIST	12/31/08	95,834				95,834	7	MO S/L	95,834	0
172	B/T F&E	12/31/08	48,268				48,268	7	MO S/L	48,268	0
173	COMPUTERS - 231	12/31/09	12,632				12,632	5	MO S/L	12,632	0
174	PHOTOCOPIER - BUSINESS OFFICE	12/31/09	3,699				3,699	5	MO S/L	3,699	0
175	COMPUTERS	12/31/09	54,831				54,831	5	MO S/L	54,831	0
176	GAS HEATERS - 231	12/31/09	5,483				5,483	5	MO S/L	5,483	0
177	SHREDDER - 231	12/31/09	1,043				1,043	5	MO S/L	1,043	0
178	B/T BOILERMATE - 362	12/31/09	2,093				2,093	5	MO S/L	2,093	0
179	TELEPHONE UPGRADE	12/31/09	91,242				91,242	5	MO S/L	91,242	0
180	PELLET STOVE - SEAFOX 834	12/31/09	6,209				6,209	7	MO S/L	6,209	0
181	DEERING AV EQUIPMENT - 834	12/31/09	17,291				17,291	5	MO S/L	17,291	0
182	COMPUTER SOFTWARE - 504	12/31/09	2,100				2,100	5	MO S/L	2,100	0
183	DESK AND CHAIR HATCHERY 557	12/31/09	3,289				3,289	7	MO S/L	3,289	0
184	ENTOMOLOGY COLLECTION - 528	12/31/09	1,099				1,099	5	MO S/L	1,099	0
185	CORNELL RAVCEN EXCHANGE - 600	12/31/09	2,100				2,100	5	MO S/L	2,100	0
186	GENERATORS FOR ISLAND - 634	12/31/09	5,500				5,500	5	MO S/L	5,500	0
187	GENERATOR - 606	12/31/09	1,055				1,055	5	MO S/L	1,055	0
188	COMPUTER - 636	12/31/09	1,681				1,681	5	MO S/L	1,681	0
189	3 COMPUTERS - 691	12/31/09	2,740				2,740	5	MO S/L	2,740	0
190	3 MICROSCOPES - 691	12/31/09	7,173				7,173	5	MO S/L	7,173	0
191	TROP COOLER - 691	12/31/09	1,778				1,778	5	MO S/L	1,778	0
192	MICROTUX TOXCITY - 691/116	12/31/09	3,550				3,550	5	MO S/L	3,550	0
193	LCD PROJECTOR - 691	12/31/09	1,189				1,189	5	MO S/L	1,189	0
194	REFUGUAA - 370	12/31/09	2,910				2,910	5	MO S/L	2,910	0
195	DVD REPRODUCTION - 824	12/31/09	2,610				2,610	5	MO S/L	2,610	0
196	FRIDGE AND FREEZER - 608	12/31/09	3,418				3,418	5	MO S/L	3,418	0
197	DOME CAMERA - 585	12/31/09	5,569				5,569	5	MO S/L	5,569	0
198	CENTREFUGE - 691	12/31/09	2,178				2,178	5	MO S/L	2,178	0
199	VERTEBRATE CABINETS - 528	12/31/10	5,449				5,449	5	MO S/L	5,449	0
200	MACBOOK 15 - 557	12/31/10	1,849				1,849	5	MO S/L	1,849	0
201	COMPUTER EQUIPMENT - 547	12/31/10	6,150				6,150	5	MO S/L	6,150	0
202	NETWORKING EQUIPMENT - 585	12/31/10	2,400				2,400	5	MO S/L	2,400	0
203	FLUOROMETER - 691	12/31/10	3,603				3,603	5	MO S/L	3,603	0
204	MICROSCOPE - 100	12/31/10	2,553				2,553	5	MO S/L	2,553	0
205	COMPUTER - 100	12/31/10	1,161				1,161	5	MO S/L	1,161	0
206	STEEL WORKABLES - 231	12/31/10	3,253				3,253	5	MO S/L	3,253	0
207	CAMERA - 735	12/31/10	1,349				1,349	5	MO S/L	1,349	0
208	FREEZER - 735	12/31/10	6,164				6,164	5	MO S/L	6,164	0
209	COMPUTERS - 231	12/31/10	56,113				56,113	5	MO S/L	56,113	0
210	CLASSROOM FURNITURE - 231	12/31/10	12,557				12,557	5	MO S/L	12,557	0
211	CLASSROOM FURNITURE - 231	12/31/10	8,372				8,372	5	MO S/L	8,372	0

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INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
212	WASHER	12/31/10	1,100			1,100	5 MO S/L	1,100	0
213	GAS CHROMTAGRAPH	12/31/10	1,855			1,855	5 MO S/L	1,855	0
214	LIGHTING KIT (CAMERA) - 155	12/31/10	2,113			2,113	5 MO S/L	2,113	0
215	COMPUTERS - 231	12/31/11	69,361			69,361	5 MO S/L	69,361	0
216	GAS FRIDGE - 606	12/31/11	1,200			1,200	5 MO S/L	1,200	0
218	MAC COMPUTER - 155	12/31/11	1,282			1,282	5 MO S/L	1,282	0
219	RADIO COLLAR - 155	12/31/11	2,512			2,512	5 MO S/L	2,512	0
220	PIANO - 155	12/31/11	4,500			4,500	5 MO S/L	4,500	0
221	COMPUTER - 155	12/31/11	2,346			2,346	5 MO S/L	2,346	0
222	DEAD AIR BOX - 691	12/31/11	1,959			1,959	5 MO S/L	1,959	0
223	SCANNER - 155	12/31/11	1,999			1,999	5 MO S/L	1,999	0
224	CAMERA - 155	12/31/11	1,146			1,146	5 MO S/L	1,146	0
225	COMPUTER - 155	12/31/11	2,374			2,374	5 MO S/L	2,374	0
226	CAMERA - 155	12/31/11	1,747			1,747	5 MO S/L	1,747	0
227	DUST BURNISHER - 425	12/31/11	1,100			1,100	5 MO S/L	1,100	0
228	THERMAL IMAGING CAMERA - 116	12/31/11	1,595			1,595	5 MO S/L	1,595	0
229	TV/PROJECTOR & MOUNT	12/31/11	5,822			5,822	5 MO S/L	5,822	0
230	COMPUTER - 557	12/31/11	4,148			4,148	5 MO S/L	4,148	0
231	COMPUTER - 222	12/31/11	1,527			1,527	5 MO S/L	1,527	0
232	COMPUTER MEMORY - 222	12/31/11	1,148			1,148	5 MO S/L	1,148	0
233	KITCHEN STEAMER - 231	12/31/11	6,595			6,595	5 MO S/L	6,595	0
234	SOFTWARE DEV - 234/340	12/31/11	7,600			7,600	5 MO S/L	7,600	0
235	CAMERA/SCANNER/LIGHT - 177	12/31/11	4,897			4,897	5 MO S/L	4,897	0
236	SHELVING - 878	12/31/11	19,143			19,143	5 MO S/L	19,143	0
237	COMPUTER - 878	12/31/11	3,435			3,435	5 MO S/L	3,435	0
238	RADIO SYSTEM - 231	12/31/11	3,295			3,295	5 MO S/L	3,295	0
239	ICE RINK - 242	12/31/11	4,820			4,820	5 MO S/L	4,820	0
240	FLAIL MOWER R/C - 644	12/31/11	4,600			4,600	5 MO S/L	4,600	0
241	LAND - COLLINS	7/01/91	20,000			20,000	0 -- Land	0	0
242	LAND - EDEN STREET	7/01/91	137,356			137,356	0 -- Land	0	0
243	LAND - LIGHTHOUSES	7/01/97	200,000			200,000	0 -- Land	0	0
244	LAND - BEECH HILL FARM	5/06/99	141,667			141,667	0 -- Land	0	0
245	LAND - HALL QUARRY	6/17/99	50,000			50,000	0 -- Land	0	0
246	LAND - GARDNER PROPERTY	11/25/98	321,275			321,275	0 -- Land	0	0
247	LAND - SEA URCHIN	9/25/75	75,000			75,000	0 -- Land	0	0
248	LAND - WITCHCLIFF	7/22/05	1,237,804			1,237,804	0 -- Land	0	0
249	LAND - ROCKEFELLER FARM - CARNE	12/31/09	1,300,000			1,300,000	0 -- Land	0	0
250	CIRCULATION	7/01/91	266,200			266,200	27 MO S/L	266,200	0
251	NEWLIN GARDENS	12/31/93	38,800			38,800	10 MO S/L	38,800	0
252	PIER	7/01/91	47,250			47,250	27 MO S/L	47,250	0
253	CAMPUS PLAN	6/30/00	35,591			35,591	39 MO S/L	21,910	913
254	CAMPUS PLAN	12/31/00	119,848			119,848	15 MO S/L	119,848	0
255	WELL	12/31/01	12,425			12,425	10 MO S/L	12,425	0
256	IMPROVEMENTS	7/01/05	405			405	20 MO S/L	381	21
257	WITCHCLIFF SEWER	12/31/05	109,211			109,211	20 MO S/L	101,026	5,460
258	BHF DEER FENCE	12/31/05	34,337			34,337	10 MO S/L	34,337	0
259	RAMP	12/31/05	21,263			21,263	10 MO S/L	21,263	0
260	CAMPUS GROUNDS	12/31/05	143,082			143,082	20 MO S/L	132,350	7,154
261	LAND IMPROVEMENTS	12/31/06	240,329			240,329	10 MO S/L	240,329	0
262	LAND IMPROVEMENTS	12/31/07	394,931			394,931	10 MO S/L	394,931	0
263	WIND TURBINE	3/31/09	15,466			15,466	10 MO S/L	15,466	0
264	WELL, ETC. 641	12/31/08	32,691			32,691	20 MO S/L	25,340	1,634
265	LOT	12/31/08	36,645			36,645	20 MO S/L	28,397	1,833
266	LI - 856	12/31/08	3,480			3,480	10 MO S/L	3,480	0
267	DAVIS STORM DRAINS	12/31/08	10,880			10,880	20 MO S/L	8,432	544
268	LI - BLUM	12/31/08	49,245			49,245	20 MO S/L	38,162	2,463
269	LI - DEERING COMMON	12/31/08	71,829			71,829	20 MO S/L	55,663	3,592
270	LI - STUDENT HOUSING	12/31/08	67,449			67,449	20 MO S/L	52,268	3,373
271	TILES - TURRETS	12/31/09	2,590			2,590	10 MO S/L	2,590	0
272	SW PASTURE EXCAVATION	12/31/09	5,075			5,075	10 MO S/L	5,075	0
273	BHF FENCING SW PASTURE - 641	12/31/10	9,948			9,948	10 MO S/L	9,948	0
274	BHF IRRIGATION - 641	12/31/10	3,310			3,310	10 MO S/L	3,310	0
275	BHF WELL PIPING - 641	12/31/10	5,075			5,075	10 MO S/L	5,075	0
276	FLOATS - 504	12/31/11	37,460			37,460	10 MO S/L	37,460	0
277	WELL - 641	12/31/11	5,240			5,240	10 MO S/L	5,240	0
278	IRRIGATION BHF - 641	12/31/11	3,293			3,293	10 MO S/L	3,293	0
279	FENCE	12/31/11	11,220			11,220	10 MO S/L	11,220	0
280	SEPTIC SYSTEM - 231	12/31/11	13,707			13,707	10 MO S/L	13,707	0
281	POWER TO PIER - 361-231	12/31/11	9,201			9,201	10 MO S/L	9,201	0
282	LIBRARY 92-93	7/01/92	24,063			24,063	8 MO S/L	24,063	0
283	LIBRARY - 93-94	12/31/93	30,381			30,381	7 MO S/L	30,381	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
284	LIBRARY - 94-95	12/31/94	22,817			22,817	7 MO S/L	22,817	0
285	LIBRARY - 063088	7/01/91	218,500			218,500	8 MO S/L	218,500	0
286	LIBRARY - 88-89	7/01/91	29,500			29,500	8 MO S/L	29,500	0
287	LIBRARY - 89-90	7/01/91	11,050			11,050	8 MO S/L	11,050	0
288	LIBRARY - 89-90	7/01/91	45,850			45,850	8 MO S/L	45,850	0
289	LIBRARY - 90-91	7/01/91	23,181			23,181	8 MO S/L	23,181	0
290	LIBRARY - 91-92	7/01/91	27,337			27,337	8 MO S/L	27,337	0
291	LIBRARY - 95-96	12/31/95	20,138			20,138	7 MO S/L	20,138	0
292	COLLECTION	12/31/96	38,386			38,386	7 MO S/L	38,386	0
293	COLLECTION	12/31/97	26,587			26,587	7 MO S/L	26,587	0
294	LIBRARY - 98-99	12/31/98	23,070			23,070	7 MO S/L	23,070	0
295	LIBRARY - 99-00	12/31/99	31,188			31,188	7 MO S/L	31,188	0
296	LIBRARY	12/31/00	29,646			29,646	5 MO S/L	29,646	0
297	LIBRARY COLLECTION	12/31/01	26,925			26,925	5 MO S/L	26,925	0
298	LIBRARY COLLECTION	12/31/02	31,021			31,021	5 MO S/L	31,021	0
299	LIBRARY COLLECTION	12/31/03	24,288			24,288	5 MO S/L	24,288	0
300	LIBRARY COLLECTION	12/31/04	32,036			32,036	5 MO S/L	32,036	0
301	LIBRARY COLLECTION	12/31/05	23,216			23,216	5 MO S/L	23,216	0
302	LIBRARY COLLECTION	12/31/06	21,084			21,084	7 MO S/L	21,084	0
303	LIBRARY COLLECTION	12/31/07	21,448			21,448	7 MO S/L	21,448	0
304	LIBRARY COLLECTION	12/31/08	25,652			25,652	7 MO S/L	25,652	0
305	LIBRARY COLLECTION	12/31/09	20,146			20,146	7 MO S/L	20,146	0
306	LIBRARY BOOKS RATS - 175	12/31/10	11,267			11,267	7 MO S/L	11,267	0
307	LIBRARY BOOKS HALL - 175	12/31/10	6,913			6,913	7 MO S/L	6,913	0
308	LIBRARY BOOKS DRURY - 837	12/31/10	2,591			2,591	7 MO S/L	2,591	0
309	RAT 175	12/31/11	12,219			12,219	7 MO S/L	12,219	0
310	HALL FUND - 175	12/31/11	5,039			5,039	7 MO S/L	5,039	0
312	BOAT	9/27/95	8,000			8,000	5 MO S/L	8,000	0
313	2 VANS	7/01/97	34,123			34,123	5 MO S/L	34,123	0
314	19' IMPERIAL BOAT	9/14/98	25,000			25,000	10 MO S/L	25,000	0
315	KAYAKS	12/31/99	5,519			5,519	7 MO S/L	5,519	0
316	STRANDINGS BOAT	12/31/99	11,536			11,536	5 MO S/L	11,536	0
317	TRUCK	12/31/00	27,088			27,088	5 MO S/L	27,088	0
318	BOAT IMPROVEMENTS	12/31/01	49,077			49,077	10 MO S/L	49,077	0
319	VAN - CHRISTENSEN GRANT	12/31/02	30,032			30,032	5 MO S/L	30,032	0
320	VAN RECONDITIONING - 97	12/31/02	3,216			3,216	3 MO S/L	3,216	0
321	NEW STRANDING TRUCK	12/31/02	21,329			21,329	5 MO S/L	21,329	0
322	85 KABOTA TRACTOR	12/31/02	2,500			2,500	3 MO S/L	2,500	0
323	AVON & MOTOR	12/31/02	4,500			4,500	5 MO S/L	4,500	0
324	VAN IMPROVEMENTS	12/31/03	1,841			1,841	5 MO S/L	1,841	0
325	LAND PURCHASE - CARTER	12/21/12	126,720			126,720	0 -- Land	0	0
326	STRANDINGS BOAT	12/31/04	28,984			28,984	10 MO S/L	28,984	0
327	STRANDINGS BOAT	12/31/04	80,304			80,304	10 MO S/L	80,304	0
328	TRAILER	12/31/04	1,476			1,476	5 MO S/L	1,476	0
329	OUTBOARD MOTOR	12/31/04	2,830			2,830	5 MO S/L	2,830	0
330	TRACTOR	12/31/05	42,100			42,100	5 MO S/L	42,100	0
331	BOAT IMPROVEMENTS	12/31/05	33,721			33,721	5 MO S/L	33,721	0
332	TRAILER	12/31/05	6,200			6,200	5 MO S/L	6,200	0
333	INFLATABLE	12/31/05	4,600			4,600	5 MO S/L	4,600	0
334	VEHICLES - PER LIST	12/31/07	135,559			135,559	7 MO S/L	135,559	0
335	BOAT IMPROVEMENTS - 504	12/31/08	55,844			55,844	5 MO S/L	55,844	0
336	13' ALUM BOAT	12/31/08	10,700			10,700	5 MO S/L	10,700	0
337	BOREALIS IMPROVEMENTS	12/31/08	6,906			6,906	5 MO S/L	6,906	0
338	TRUCK REPAIRS	12/31/08	2,245			2,245	3 MO S/L	2,245	0
339	2005 VAN	12/31/08	18,532			18,532	5 MO S/L	18,532	0
340	LIFE RAFT	12/31/08	5,970			5,970	5 MO S/L	5,970	0
341	VAN - 231	12/31/09	22,884			22,884	5 MO S/L	22,884	0
342	INDIGO MOTOR - 504	12/31/09	1,455			1,455	5 MO S/L	1,455	0
343	NEW FUEL SYSTEM - 510	12/31/09	1,423			1,423	5 MO S/L	1,423	0
344	BOREALIS ENGINE REP - 607	12/31/09	6,938			6,938	5 MO S/L	6,938	0
345	TOP BRACE - 608	12/31/09	2,247			2,247	5 MO S/L	2,247	0
346	RADAR	12/31/09	2,057			2,057	5 MO S/L	2,057	0
347	AW BOAT - 608	12/31/09	5,411			5,411	5 MO S/L	5,411	0
348	INFLATABLE BOAT - 608	12/31/09	14,000			14,000	5 MO S/L	14,000	0
349	BOAT TRAILER	12/31/09	1,780			1,780	5 MO S/L	1,780	0
350	BOAT REPAIRS	12/31/09	7,032			7,032	5 MO S/L	7,032	0
351	THEODOLOITE DUAL DISPLAY - 608	12/31/10	3,254			3,254	5 MO S/L	3,254	0
352	TRACTOR/SNOWBLOWER - 640	12/31/10	3,700			3,700	5 MO S/L	3,700	0
353	ELECTRIC CARS - 100	12/31/10	3,250			3,250	5 MO S/L	3,250	0
355	BOAT EQUIPMENT - 877	12/31/10	30,664			30,664	5 MO S/L	30,664	0
356	NEW TRUCK - 231	12/31/10	33,209			33,209	5 MO S/L	33,209	0

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INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
357	2010 JETTA - GIFT	12/31/10	4,000				4,000	5	MO S/L	4,000	0
358	BOAT - 877	12/31/11	665,506				665,506	15	MO S/L	554,588	44,367
359	DODGE CARAVAN - 231	12/31/11	24,634				24,634	5	MO S/L	24,634	0
360	SKIFF - 510	12/31/11	1,800				1,800	5	MO S/L	1,800	0
361	ELECTRIC VAN 504	12/31/11	27,000				27,000	5	MO S/L	27,000	0
362	TRUCK CAP 737	12/31/11	1,555				1,555	5	MO S/L	1,555	0
363	EQUIP FOR BOAT 877	12/31/11	11,023				11,023	5	MO S/L	11,023	0
364	WELL PRF - 652	12/31/12	9,046				9,046	20	MO S/L	5,200	452
365	GRANITE WALL - 695	12/31/12	4,922				4,922	20	MO S/L	2,830	246
366	FOUNDATION AND SOLAR	12/31/12	6,256				6,256	20	MO S/L	3,599	313
367	TREE WORK	12/31/12	2,783				2,783	10	MO S/L	2,783	0
368	WELL PRF - 652/504	12/31/12	26,957				26,957	20	MO S/L	15,501	1,348
369	DAVIS STAIRS - 231	12/31/12	11,512				11,512	39	MO S/L	3,394	295
370	SOLAR - 504	12/31/12	3,492				3,492	39	MO S/L	1,033	89
371	BATHROOM/BHF CABINS - 504	12/31/12	8,053				8,053	39	MO S/L	2,371	207
372	CANOE LAUNCH/LANDWORK - 504	6/30/13	3,600				3,600	39	MO S/L	646	92
373	BHF Farmhouse Repair	12/31/14	18,950				18,950	39	MO S/L	4,617	485
374	COMPUTERS - 231	12/31/12	48,585				48,585	5	MO S/L	48,585	0
375	DRYER/OVEN/STOVE - 360	12/31/12	4,497				4,497	7	MO S/L	4,497	0
376	CONVERSION - ILS	12/31/12	3,500				3,500	5	MO S/L	3,500	0
377	MICROSCOPE - 697	12/31/12	6,391				6,391	5	MO S/L	6,391	0
378	TABLE AND CHAIRS - 110	12/31/12	8,005				8,005	7	MO S/L	8,005	0
379	COMPUTER SWITCH - 222	12/31/12	3,355				3,355	5	MO S/L	3,355	0
380	DATA SENSORS - 653	12/31/12	3,878				3,878	5	MO S/L	3,878	0
381	DOBBS PROD. PICTURES - 231	12/31/12	3,000				3,000	5	MO S/L	3,000	0
382	ICE FLAKER - 504	12/31/12	3,035				3,035	5	MO S/L	3,035	0
383	GOWER BENCH - 504	12/31/12	3,000				3,000	5	MO S/L	3,000	0
384	COMPUTER SERVER - 875	12/31/12	122,592				122,592	5	MO S/L	122,592	0
385	AUDIO VISUAL EQUIP - 885/875	12/31/12	53,530				53,530	5	MO S/L	53,530	0
386	POULTRY PICKER	12/31/12	5,509				5,509	5	MO S/L	5,509	0
387	RAT - 175	12/31/12	10,229				10,229	7	MO S/L	10,229	0
388	HALL FUND - 175	12/31/12	5,568				5,568	7	MO S/L	5,568	0
389	DIESEL TRUCK - 652	12/31/12	4,000				4,000	5	MO S/L	4,000	0
390	LAND - GIFT	6/30/11	1,000,000				1,000,000	0	-- Land	0	0
392	HALL FUND - 175	12/31/13	7,656				7,656	7	MO S/L	7,656	0
393	COMPUTERS - 231	12/31/13	33,053				33,053	5	MO S/L	33,053	0
394	R.A.T - 175	12/31/13	11,698				11,698	7	MO S/L	11,698	0
396	OVEN - 231	12/31/13	8,258				8,258	5	MO S/L	8,258	0
397	GATES DRAPES - 231	12/31/13	9,866				9,866	5	MO S/L	9,866	0
398	BLAKBAUD COMPUTER SYSTEM - 875	12/31/13	32,856				32,856	5	MO S/L	32,856	0
399	COMPUTERS - 875	12/31/13	22,507				22,507	5	MO S/L	22,507	0
400	TURRETS RENOVATIONS	12/31/13	2,724,409				2,724,409	39	MO S/L	733,497	69,857
401	3 GPS UNITS AND SOFTWARE - 653	12/31/13	6,536				6,536	5	MO S/L	6,536	0
402	CAMERA - 653	12/31/13	3,064				3,064	5	MO S/L	3,064	0
403	MICROSCOPE - 653	12/31/13	4,446				4,446	5	MO S/L	4,446	0
404	TRACTOR - 663	12/31/13	34,193				34,193	5	MO S/L	34,193	0
405	ETCHING PRESS - 155	12/31/13	7,659				7,659	5	MO S/L	7,659	0
406	IRRIGATION BHF - 646	12/31/13	2,792				2,792	10	MO S/L	2,792	0
407	3C PRINTER	12/31/13	3,421				3,421	5	MO S/L	3,421	0
408	COA VIDEOS - 504	12/31/13	9,700				9,700	5	MO S/L	9,700	0
409	REFRIGERATOR - 640	12/31/13	3,423				3,423	5	MO S/L	3,423	0
410	NE CREEK EQUIPMENT - 653	12/31/13	6,580				6,580	5	MO S/L	6,580	0
411	KAELBER A/C UNIT - 466	12/31/13	6,819				6,819	5	MO S/L	6,819	0
412	CAMERA - 576	12/31/13	3,508				3,508	5	MO S/L	3,508	0
413	BHF BUNKHOUSE	12/31/13	21,510				21,510	39	MO S/L	5,794	551
414	COMPUTERS	12/31/13	8,057				8,057	5	MO S/L	8,057	0
415	PRF Barn Roof	12/31/14	14,184				14,184	39	MO S/L	3,456	364
416	Final Turrets payment	12/31/14	29,473				29,473	39	MO S/L	7,181	755
417	2012 Turrets Roof	12/31/15	8,749				8,749	39	MO S/L	1,906	224
418	Arts & Science Door	12/31/14	2,869				2,869	39	MO S/L	701	73
419	231 CAP Sitework BHF Land	12/31/16	14,900				14,900	10	MO S/L	11,175	1,490
420	MDR Station Repairs	12/31/17	256,986				256,986	39	MO S/L	42,831	6,589
421	Telescopes	12/31/14	2,505				2,505	5	MO S/L	2,505	0
422	Wood Chipper	12/31/14	2,500				2,500	5	MO S/L	2,500	0
423	Microscopes	12/31/14	15,514				15,514	5	MO S/L	15,514	0
424	Washer/Dryer	12/31/14	3,720				3,720	5	MO S/L	3,720	0
425	Compressor #1	12/31/14	5,859				5,859	5	MO S/L	5,859	0
426	Laptop	12/31/14	2,789				2,789	5	MO S/L	2,789	0
427	BHF woodstove	12/31/14	5,685				5,685	5	MO S/L	5,685	0
428	ETC Light Board Gates	12/31/14	8,940				8,940	5	MO S/L	8,940	0
429	LCD Projector	12/31/14	8,260				8,260	5	MO S/L	8,260	0

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
430	Blackbaud Software	12/31/14	3,390				3,390	5	MO S/L	3,390	0
431	Video	12/31/14	2,500				2,500	5	MO S/L	2,500	0
432	Video Production	12/31/14	5,969				5,969	5	MO S/L	5,969	0
433	Computers	12/31/14	57,631				57,631	5	MO S/L	57,631	0
434	Ice Rink	12/31/14	2,569				2,569	5	MO S/L	2,569	0
435	Kayaks and Equipment	12/31/14	9,441				9,441	5	MO S/L	9,441	0
436	Thermal Cyclor	12/31/14	4,696				4,696	5	MO S/L	4,696	0
437	Heating Thermal Mixer II	12/31/14	2,584				2,584	5	MO S/L	2,584	0
438	Kayaks	12/31/14	4,172				4,172	5	MO S/L	4,172	0
439	Hall Fund 175	12/31/14	8,025				8,025	7	MO S/L	8,025	0
440	RAT 175	12/31/14	13,130				13,130	7	MO S/L	13,130	0
441	Books and Docs	12/31/14	7,131				7,131	7	MO S/L	7,131	0
442	2012 Chevy Van & Tires	9/10/14	23,000				23,000	5	MO S/L	23,000	0
443	Mower	12/31/14	2,885				2,885	5	MO S/L	2,885	0
444	Trailer	12/31/14	3,500				3,500	5	MO S/L	3,500	0
445	Haying Equipment	12/31/14	33,850				33,850	5	MO S/L	33,850	0
446	BCS Walk Behind Tractor	12/31/14	3,500				3,500	5	MO S/L	3,500	0
447	Bore & Drill Tap Prop	12/31/14	4,362				4,362	5	MO S/L	4,362	0
448	PRF Fence	12/31/15	24,645				24,645	10	MO S/L	20,951	2,464
449	New Control Pamel Turr	12/31/15	3,444				3,444	10	MO S/L	2,926	344
450	Door Protection System	12/31/15	3,495				3,495	10	MO S/L	2,973	349
451	New Locks Museum	12/31/15	3,177				3,177	10	MO S/L	2,702	317
452	231 CAP Business Office Carpet	12/31/16	3,285				3,285	10	MO S/L	2,466	328
453	PRF Bldg Improv	12/31/15	63,805				63,805	39	MO S/L	13,906	1,636
455	Pier/Dock	12/31/17	47,382				47,382	10	MO S/L	30,798	4,738
457	New Heating Coil Gates	12/31/15	2,840				2,840	5	MO S/L	2,840	0
458	Computers	12/31/15	47,042				47,042	5	MO S/L	47,042	0
459	Website	12/31/15	11,150				11,150	5	MO S/L	11,150	0
460	Website	12/31/15	88,391				88,391	5	MO S/L	88,391	0
461	One Card System & Cmra	12/31/15	32,714				32,714	5	MO S/L	32,714	0
462	Mattresses	12/31/15	18,230				18,230	5	MO S/L	18,230	0
463	Beverage Cooler	12/31/15	3,540				3,540	5	MO S/L	3,540	0
464	Refrigerator	12/31/15	4,089				4,089	5	MO S/L	4,089	0
465	New Water Heater Kitch	12/31/15	4,699				4,699	5	MO S/L	4,699	0
466	WEB	12/31/15	40,000				40,000	5	MO S/L	40,000	0
467	RAT	12/31/15	11,474				11,474	7	MO S/L	11,474	0
468	Hall Fund	12/31/15	6,338				6,338	7	MO S/L	6,338	0
469	Tractor	12/31/15	9,150				9,150	5	MO S/L	9,150	0
470	BHF Truck	12/31/15	11,000				11,000	5	MO S/L	11,000	0
471	Van Ford E350	12/31/15	24,898				24,898	5	MO S/L	24,898	0
472	Dodge Van	12/31/15	23,409				23,409	5	MO S/L	23,409	0
473	Boat Keyshift	12/31/15	2,695				2,695	5	MO S/L	2,695	0
474	504 CPA Cottage House Singles	12/31/16	21,500				21,500	20	MO S/L	8,063	1,075
475	Improvements - Davis Center energy	12/31/16	3,953				3,953	39	MO S/L	760	101
476	Tiny House	12/31/16	4,806				4,806	39	MO S/L	924	123
477	Gates Doors	12/31/16	4,864				4,864	39	MO S/L	937	124
478	Keen Grinder Pump	12/31/16	4,899				4,899	39	MO S/L	943	126
479	FA Panel	12/31/16	5,300				5,300	39	MO S/L	1,020	135
480	Lighting Fixtures	12/31/16	3,441				3,441	39	MO S/L	661	88
481	GDI House Repairs	12/31/16	9,037				9,037	39	MO S/L	1,739	231
482	Peach House Pump Station	12/31/16	9,896				9,896	39	MO S/L	1,904	253
483	BHF Greenhouse	12/31/16	35,555				35,555	39	MO S/L	6,838	912
484	Davis Energy Building	12/31/16	25,772				25,772	39	MO S/L	4,957	661
485	Peach House Energy Renovation	12/31/16	2,870				2,870	39	MO S/L	553	74
486	Building Monitoring & Controls	12/31/16	14,070				14,070	39	MO S/L	2,707	361
487	Tiny House	12/31/16	15,935				15,935	39	MO S/L	3,066	409
488	BHF Greenhouse from CIP	12/31/16	1,640				1,640	39	MO S/L	315	42
491	Microscopes	12/31/17	5,444				5,444	5	MO S/L	5,444	0
493	Computer Server	12/31/17	4,970				4,970	5	MO S/L	4,970	0
494	Computers	12/31/16	47,758				47,758	5	MO S/L	47,758	0
495	Stat Blood Analyzer	12/31/16	6,000				6,000	5	MO S/L	6,000	0
496	Ultra Low Freeze	12/31/16	15,334				15,334	5	MO S/L	15,334	0
497	San Expansion Computer	12/31/16	22,266				22,266	5	MO S/L	22,266	0
498	Speakers Gates	12/31/16	4,238				4,238	5	MO S/L	4,238	0
499	Physiology Equipment	12/31/16	9,200				9,200	5	MO S/L	9,200	0
500	Physiology & Data Logg	12/31/16	4,658				4,658	5	MO S/L	4,658	0
501	Worktables	12/31/16	2,983				2,983	5	MO S/L	2,983	0
502	Struass AV Electrical	12/31/16	6,465				6,465	5	MO S/L	6,465	0
503	Conductivity Meter	12/31/16	2,550				2,550	5	MO S/L	2,550	0
504	RAT	12/31/16	12,723				12,723	7	MO S/L	12,723	0
505	Capitalize Hall Fund	12/31/16	5,131				5,131	7	MO S/L	5,131	0

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
506	GMC van	12/31/16	36,934				36,934	5 MO S/L	36,934	0
507	Zero Turn Mower	12/31/16	3,077				3,077	5 MO S/L	3,077	0
508	PRF Truck	12/31/16	28,679				28,679	5 MO S/L	28,679	0
509	Tractor	12/31/16	9,000				9,000	5 MO S/L	9,000	0
510	Plow Truck	12/31/16	37,920				37,920	5 MO S/L	37,920	0
511	Laughing Gill Engine	12/31/16	4,500				4,500	5 MO S/L	4,500	0
512	Inflatable	12/31/16	3,998				3,998	5 MO S/L	3,998	0
513	Well	12/31/17	5,333				5,333	10 MO S/L	3,467	533
514	MDR Station Repairs	12/31/17	56,668				56,668	39 MO S/L	9,445	1,453
515	AV Electrical Work	12/31/17	17,489				17,489	39 MO S/L	2,914	449
516	BHF Glasshouse	12/31/17	11,094				11,094	39 MO S/L	1,848	285
517	BHF Veg Storage Unit	12/31/17	6,495				6,495	39 MO S/L	1,084	166
518	BHF Boiler	12/31/17	6,052				6,052	39 MO S/L	1,009	155
519	PRF Roof	12/31/17	11,431				11,431	39 MO S/L	1,906	293
520	Chimney Blair/Tyson	12/31/17	5,657				5,657	39 MO S/L	943	145
521	PRF Bathroom Renov	12/31/17	10,354				10,354	39 MO S/L	1,725	266
522	Pottery Studio Energyup	12/31/17	11,279				11,279	39 MO S/L	1,880	289
523	Withcliff Apt Energy	12/31/17	15,880				15,880	39 MO S/L	2,647	407
524	Monitoring Controls	12/31/17	313,931				313,931	39 MO S/L	52,323	8,049
525	Powerfaids	12/31/17	45,607				45,607	5 MO S/L	45,607	0
526	Beds	12/31/17	14,269				14,269	5 MO S/L	14,269	0
527	GPS	12/31/17	5,060				5,060	5 MO S/L	5,060	0
528	C Pods	12/31/17	12,480				12,480	5 MO S/L	12,480	0
529	Computer	12/31/17	55,538				55,538	5 MO S/L	55,538	0
530	R.A.T.	12/31/17	10,872				10,872	7 MO S/L	10,096	776
531	Hall	12/31/17	6,345				6,345	7 MO S/L	5,891	454
532	Engine Laughing GL	12/31/17	8,320				8,320	5 MO S/L	8,320	0
534	Deer Fence	12/31/18	6,718				6,718	10 MO S/L	3,695	672
535	Septic Prf	12/31/18	22,046				22,046	10 MO S/L	12,126	2,205
536	ADA Ramp Davis Center	12/31/18	5,809				5,809	10 MO S/L	3,196	580
537	Seafox Roof and Chimney	12/31/18	47,415				47,415	39 MO S/L	6,687	1,216
538	Seafox Room to Bedroom	12/31/18	20,812				20,812	39 MO S/L	2,935	534
539	BHF Packing Shed	12/31/18	7,538				7,538	39 MO S/L	1,063	194
540	BHF Kitchen	12/31/18	36,652				36,652	39 MO S/L	5,169	940
541	Pottery Studio Energy	12/31/18	18,740				18,740	39 MO S/L	2,644	480
542	Davis Energy Upgrades	12/31/18	37,275				37,275	39 MO S/L	5,257	956
543	BHF Kitchen Complete Building	12/31/18	19,630				19,630	39 MO S/L	2,769	503
544	Davis Energy	12/31/18	24,869				24,869	39 MO S/L	3,507	638
545	BHF Air Infiltration	12/31/18	10,569				10,569	39 MO S/L	1,491	271
546	Birch Lane	4/12/19	1,570,619				1,570,619	39 MO S/L	211,429	40,273
548	John Deere Mower	12/31/18	5,800				5,800	5 MO S/L	5,800	0
549	Computers	12/31/18	90,580				90,580	5 MO S/L	90,580	0
550	Tracker System GPS	12/31/18	5,036				5,036	5 MO S/L	5,036	0
551	Camera & Equipment	12/31/18	6,211				6,211	5 MO S/L	6,211	0
552	Freezer/Mills	12/31/18	10,009				10,009	5 MO S/L	10,009	0
553	Potentiostat	12/31/18	6,571				6,571	5 MO S/L	6,571	0
554	Land-Birch Lane	4/12/19	700,000				700,000	0 -- Memo	0	0
555	RAT	12/31/18	11,309				11,309	7 MO S/L	8,886	1,615
556	AW Truck	12/31/18	17,000				17,000	5 MO S/L	17,000	0
557	Nissan Leaf	12/31/18	7,433				7,433	5 MO S/L	7,433	0
558	BHF Cargo Van	12/31/18	8,500				8,500	5 MO S/L	8,500	0
559	Manure Spreader PRF	12/31/18	6,500				6,500	5 MO S/L	6,500	0
560	Boat	12/31/18	7,373				7,373	5 MO S/L	7,373	0
561	Fence	12/31/19	9,416				9,416	10 MO S/L	4,237	942
562	Water Heater Kaelber H	12/31/19	8,890				8,890	39 MO S/L	1,026	228
563	Bldg Improv	12/31/19	248,399				248,399	39 MO S/L	28,661	6,370
564	Generator/Electrical	12/31/19	11,585				11,585	39 MO S/L	1,337	297
569	RAT	12/31/19	8,942				8,942	7 MO S/L	5,748	1,278
570	Admissions Car	12/31/19	22,000				22,000	5 MO S/L	19,800	2,200
571	Van	12/31/19	23,034				23,034	5 MO S/L	20,731	2,303
572	Inflatable	12/31/19	6,950				6,950	5 MO S/L	6,255	695
573	Tractor Repairs	12/31/19	5,054				5,054	5 MO S/L	4,549	505
574	Tractor	12/31/19	5,104				5,104	5 MO S/L	4,594	510
575	Tractor	12/31/19	13,999				13,999	5 MO S/L	12,599	1,400
576	Computers	12/31/19	35,086				35,086	5 MO S/L	31,577	3,509
577	Beds	12/31/19	31,631				31,631	5 MO S/L	28,468	3,163
578	Mattresses	12/31/19	5,070				5,070	5 MO S/L	4,563	507
579	Computers	12/31/19	5,532				5,532	5 MO S/L	4,979	553
580	Beds	12/31/19	6,745				6,745	5 MO S/L	6,071	674
581	Pier - 888	12/31/20	278,619				278,619	10 MO S/L	97,517	27,862
582	Shrine - 891	12/31/20	15,900				15,900	10 MO S/L	5,565	1,590

Federal Asset Report

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INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
583	Turret's Driveway - 504	12/31/20	8,150				8,150	10	MO S/L	2,853	815
584	Computers - 231	12/31/20	22,631				22,631	5	MO S/L	15,842	4,526
585	CHE F&F - 866	12/31/20	510,806				510,806	5	MO S/L	357,564	102,161
586	Walk-in Cooler -561	12/31/20	17,614				17,614	5	MO S/L	12,330	3,523
587	Dry Storage Sys - 631 & 561	12/31/20	55,216				55,216	5	MO S/L	38,651	11,043
588	Computer Switches - 270	12/31/20	8,626				8,626	5	MO S/L	6,038	1,725
589	Laptop Computers - 270	12/31/20	30,245				30,245	5	MO S/L	21,172	6,049
590	Outboard Motor - 732	12/31/20	5,750				5,750	5	MO S/L	4,025	1,150
591	Cooling System Boat - 510	12/31/20	9,555				9,555	5	MO S/L	6,689	1,911
595	CHE Building - 866	12/31/20	12,685,453				12,685,453	39	MO S/L	1,138,438	325,268
596	Museum Storage - 561/617	12/31/20	28,614				28,614	39	MO S/L	2,568	734
597	Cooling Unit for IT - 270	12/31/20	7,390				7,390	39	MO S/L	663	190
598	Air Ventilation STDs - 270	12/31/20	12,950				12,950	39	MO S/L	1,162	332
599	Seafox Upgrades - 360	12/31/20	57,262				57,262	39	MO S/L	5,139	1,468
600	Blair Tyson Upgrades - 362	12/31/20	43,497				43,497	39	MO S/L	3,904	1,115
601	Kaelber Ventilation - 469	12/31/20	36,205				36,205	39	MO S/L	3,249	928
602	BGF Generator - 646	12/31/20	10,413				10,413	39	MO S/L	935	267
603	Carter House Rep - 655/640	12/31/20	39,236				39,236	39	MO S/L	3,521	1,006
604	PIER LIGHTS	12/31/21	7,777				7,777	10	MO S/L	1,944	778
605	TREES/PROJEC CANOPY	12/31/21	5,368				5,368	10	MO S/L	1,342	537
606	HYDRANT	12/31/21	8,172				8,172	10	MO S/L	2,043	817
607	SUMMERTIME	8/31/21	488,782				488,782	39	MO S/L	35,510	12,533
608	12 NORRIS	9/15/21	262,816				262,816	39	MO S/L	19,093	6,739
609	14 NORRIS	9/15/21	330,389				330,389	39	MO S/L	24,003	8,471
610	16 NORRIS	9/15/21	356,367				356,367	39	MO S/L	25,890	9,138
611	18 NORRIS	9/15/21	396,615				396,615	39	MO S/L	28,814	10,170
612	48 GLEN MARY ROAD	9/15/21	197,313				197,313	39	MO S/L	14,335	5,059
613	2 BREWER	11/18/21	356,829				356,829	39	MO S/L	23,636	9,150
614	15 LOREN STREET	5/31/22	264,424				264,424	39	MO S/L	14,125	6,780
615	NHM ADA Entry	12/31/21	50,686				50,686	39	MO S/L	3,249	1,300
616	HEAT PUMPS/WATER HEATER	12/31/21	438,227				438,227	39	MO S/L	28,091	11,237
617	ADA BATHROOMS	12/31/21	24,125				24,125	39	MO S/L	1,546	619
618	CHE ADDITIONAL	12/31/21	264,489				264,489	39	MO S/L	16,954	6,782
619	COMPOSTING TOILET	12/31/21	16,849				16,849	15	MO S/L	2,808	1,123
620	WATER HEATER AND SURGE PROTEC	12/31/21	5,708				5,708	15	MO S/L	951	381
621	BHF HEAT PUMPS	12/31/21	5,200				5,200	15	MO S/L	867	346
622	DAVIS SPRINKLERS	12/31/21	7,395				7,395	39	MO S/L	474	190
623	NEH	12/31/22	2,967,585				2,967,585	39	MO S/L	114,138	76,092
628	MUSUEM STORAGE	12/31/22	11,223				11,223	5	MO S/L	3,367	2,245
629	CIP - LOGUE DOCUMENTARY	12/31/21	19,750				19,750	0	-- Memo	0	0
630	MAINE NEH FURNITURE	12/13/21	15,349				15,349	5	MO S/L	7,930	3,070
631	COMPUTERS	12/31/21	39,404				39,404	5	MO S/L	19,702	7,881
632	FORTIWALL/COMPUTER	12/31/21	32,586				32,586	5	MO S/L	16,293	6,517
633	CHE ADDITIONAL	12/31/21	8,396				8,396	5	MO S/L	4,198	1,679
634	SQUIDSTAT PLUS	12/31/21	5,135				5,135	5	MO S/L	2,568	1,027
635	BRUSHCUTTER/BUCKET	12/31/21	8,929				8,929	5	MO S/L	4,465	1,785
636	BOREALIS ELECTRONICS	12/31/21	11,715				11,715	5	MO S/L	5,858	2,343
637	BLOWER DOORS/BLASTER	12/31/21	7,753				7,753	5	MO S/L	3,877	1,550
638	CHEVY VAN	12/31/21	38,122				38,122	5	MO S/L	19,061	7,624
639	SUMMERTIME - LAND	8/31/21	1,124,867				1,124,867	0	-- Land	0	0
640	12 NORRIS - LAND	9/15/21	160,352				160,352	0	-- Land	0	0
641	14 NORRIS - LAND	9/15/21	262,167				262,167	0	-- Land	0	0
642	16 NORRIS - LAND	9/15/21	411,551				411,551	0	-- Land	0	0
643	18 NORRIS - LAND	9/15/21	479,490				479,490	0	-- Land	0	0
644	48 GLEN MARY ROAD - LAND	9/15/21	135,048				135,048	0	-- Land	0	0
645	2 BREWER - LAND	11/18/21	221,710				221,710	0	-- Land	0	0
646	15 LOREN STREET - LAND	5/31/22	419,574				419,574	0	-- Land	0	0
647	WILLAMANTIC PROPERTY	11/01/22	99,871				99,871	0	-- Land	0	0
648	WILLAMANTIC PROPERTY	11/01/22	40,000				40,000	39	MO S/L	1,709	1,026
649	SCREENS	12/31/22	6,334				6,334	10	MO S/L	950	633
650	HANDRAILS MUSEUM	12/31/22	5,495				5,495	10	MO S/L	824	550
651	BTL INSULATION	12/31/22	39,600				39,600	39	MO S/L	1,523	1,015
652	HYDRANTS	12/31/22	8,172				8,172	10	MO S/L	1,226	817
653	CHE ADDL CONSTRUCTION	12/31/22	26,758				26,758	39	MO S/L	1,029	686
655	CHE SYSTEM REPAIRS	12/31/22	14,138				14,138	39	MO S/L	544	362
656	INSULATION FOR BUILDINGS	12/31/22	112,147				112,147	39	MO S/L	4,313	2,876
657	HEAT PUMPS	12/31/22	35,269				35,269	15	MO S/L	3,527	2,351
658	PRF ROOF	12/31/22	87,469				87,469	39	MO S/L	3,364	2,243
659	GATES LIGHTING	12/31/22	31,198				31,198	39	MO S/L	1,200	800
660	SCIENCE BUILDING ROOF	12/31/22	13,000				13,000	39	MO S/L	500	333
661	BHF WINDOWS	12/31/22	5,004				5,004	39	MO S/L	192	129

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
662	BHF ROOF	12/31/22	9,131				9,131	39 MO S/L	351	234
663	BTL SIDING/ROOF	12/31/22	23,900				23,900	39 MO S/L	919	613
664	SUMMERTIME SIDING/ROOF	12/31/22	15,111				15,111	39 MO S/L	581	388
665	NORRIS ROOFS	12/31/22	10,410				10,410	39 MO S/L	400	267
670	COMPUTERS	12/31/22	40,366				40,366	5 MO S/L	12,110	8,073
671	NEH FURNITURE & FIXTURES	12/31/22	77,193				77,193	5 MO S/L	23,158	15,439
672	ANTHOLOGY	12/31/22	82,124				82,124	5 MO S/L	24,637	16,425
673	BHF STORAGE	12/31/22	12,000				12,000	5 MO S/L	3,600	2,400
674	INSULATION MACHINE	12/31/22	7,416				7,416	5 MO S/L	2,225	1,483
675	FOOD WARMER	12/31/22	6,439				6,439	5 MO S/L	1,932	1,288
676	WALK IN COOLER	12/31/22	7,451				7,451	5 MO S/L	2,235	1,490
677	COMPUTER SWITCH	12/31/22	5,350				5,350	5 MO S/L	1,605	1,070
678	CHEM BUNDLE STATION	12/31/22	45,153				45,153	5 MO S/L	13,546	9,031
679	STORY FRAMES	12/31/22	10,000				10,000	5 MO S/L	3,000	2,000
680	MDR BATTERY	12/31/22	5,205				5,205	5 MO S/L	1,562	1,041
681	RAT	12/31/22	12,100				12,100	7 MO S/L	2,593	1,728
682	HALL	12/31/22	5,477				5,477	7 MO S/L	1,174	782
683	2023 GMC SIERRA 2500	12/31/22	56,800				56,800	5 MO S/L	17,040	11,360
684	NEW VAN	12/31/22	42,577				42,577	5 MO S/L	12,773	8,516
685	FORD VAN	12/31/22	43,000				43,000	5 MO S/L	12,900	8,600
686	LOADER TRACTOR	12/31/22	52,922				52,922	5 MO S/L	15,877	10,584
687	TRAILER	12/31/22	7,191				7,191	5 MO S/L	2,157	1,439
688	PORTABLE CHICKEN TRACT	12/31/22	9,120				9,120	5 MO S/L	2,736	1,824
689	AW TRAILER BRAKES/AXLE	12/31/22	5,953				5,953	5 MO S/L	1,786	1,191
690	LAND IMPROVEMENTS - ANDY GOLD	12/31/23	1,093,033				1,093,033	10 MO S/L	54,652	109,303
691	FENCELINE	12/31/23	5,092				5,092	10 MO S/L	255	509
692	BHF LANDSCAPING	12/31/23	14,955				14,955	10 MO S/L	748	1,495
693	COA LIGHTED SIGN	12/31/23	14,679				14,679	15 MO S/L	489	979
694	COLLINS LANDSCAPE	12/31/23	5,184				5,184	10 MO S/L	259	519
695	BIKE SHOP	2/29/24	3,127,267				3,127,267	39 MO S/L	26,729	80,186
696	NEW DORM	12/31/23	8,032,129				8,032,129	39 MO S/L	102,976	205,952
697	BUILDING INSULATION	12/31/23	92,666				92,666	39 MO S/L	1,188	2,376
698	BHF FARMSTAND	12/31/23	532,385				532,385	39 MO S/L	6,825	13,651
699	MATH/SCIENCE ELEVATOR	12/31/23	119,325				119,325	39 MO S/L	1,530	3,059
700	SOLAR BATTERIES	12/31/23	6,265				6,265	10 MO S/L	313	627
701	KAELBER AUTO DOOR OPEN	12/31/23	9,642				9,642	39 MO S/L	124	247
702	WELL	12/31/23	9,012				9,012	10 MO S/L	451	901
703	DESIGN GROUP NWW	12/31/23	15,843				15,843	39 MO S/L	203	406
704	ART/SCIENCE PIPES	12/31/23	7,009				7,009	39 MO S/L	90	180
705	ART STUDIO SOLAR	12/31/23	45,864				45,864	20 MO S/L	1,147	2,293
706	BHF FARMHOUSE REPAIRS	12/31/23	34,628				34,628	39 MO S/L	444	888
707	BHF GREENHOUSE	12/31/23	27,606				27,606	39 MO S/L	354	708
708	B/T SIDING/ROOF	12/31/23	55,681				55,681	39 MO S/L	714	1,428
709	DORR SIDING	12/31/23	12,895				12,895	39 MO S/L	165	331
710	GATES ROOFING	12/31/23	24,217				24,217	39 MO S/L	310	621
711	KAELBER ROOF	12/31/23	348,035				348,035	39 MO S/L	4,462	8,924
712	KAELBER /TURR INSULATION	12/31/23	27,892				27,892	39 MO S/L	358	715
713	MUSEUM ROOF	12/31/23	5,100				5,100	39 MO S/L	65	131
714	PRF REPAIRS	12/31/23	51,373				51,373	39 MO S/L	659	1,317
715	ROOFS	12/31/23	983,906				983,906	39 MO S/L	12,614	25,229
716	SUMMER/GLEN ROOFS	12/31/23	25,413				25,413	39 MO S/L	326	651
717	STUDIO 5&6 WINDOWS	12/31/23	8,717				8,717	39 MO S/L	112	223
718	WITCHCLIFF ROOFING	12/31/23	13,153				13,153	39 MO S/L	169	337
719	EARNEST MONEY - HARBORVIEW PR	6/30/24	100,000				100,000	0 -- Memo	0	0
720	141 COTTAGE ST INSPECTION	6/30/24	2,850				2,850	0 -- Memo	0	0
721	5 CADILLAC AVE INSPECTION	6/30/24	1,100				1,100	0 -- Memo	0	0
722	3 CADILLAC AVE INSPECTION	6/30/24	1,000				1,000	0 -- Memo	0	0
728	COMPUTERS	12/31/23	36,451				36,451	5 MO S/L	3,645	7,290
729	NEW DORM	12/31/23	245,187				245,187	5 MO S/L	24,519	49,037
730	BHF FARMSTAND	12/31/23	17,428				17,428	5 MO S/L	1,743	3,485
731	AV EQUIPMENT	12/31/23	9,318				9,318	5 MO S/L	932	1,863
732	DIGITAL MIXER/STAGE	12/31/23	6,004				6,004	5 MO S/L	600	1,201
733	COMPUTER DISPLAYS	12/31/23	11,438				11,438	5 MO S/L	1,144	2,287
734	MACBOOKS	12/31/23	8,622				8,622	5 MO S/L	862	1,725
735	HUB MONITORS	12/31/23	6,552				6,552	5 MO S/L	655	1,311
736	TABLE FOR SHEEP	12/31/23	5,365				5,365	5 MO S/L	537	1,073
737	RAMAN SPECTROMETER	12/31/23	15,071				15,071	5 MO S/L	1,507	3,014
738	WATER HEATER	12/31/23	8,034				8,034	5 MO S/L	803	1,607
739	STORY FRAMES	12/31/23	30,500				30,500	5 MO S/L	3,050	6,100
740	PRF FREEZER	12/31/23	17,354				17,354	5 MO S/L	1,735	3,471
741	BIRD TRACKING DEVICE	12/31/23	5,685				5,685	5 MO S/L	569	1,137

Federal Asset Report

FYE: 6/30/2025

INVENTORY SALES

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
742	RAT	12/31/23	9,410			9,410	7 MO S/L	672	1,344
743	2019 RAM PICKUP	12/31/23	43,528			43,528	5 MO S/L	4,353	8,705
744	OSPREY REPAIRS	12/31/23	84,419			84,419	5 MO S/L	8,442	16,884
745	BUSSES	12/31/23	22,715			22,715	5 MO S/L	2,272	4,543
746	CHICKEN TRACTOR	12/31/23	6,600			6,600	5 MO S/L	660	1,320
747	ENGINE BOAT REPAIRS	12/31/23	11,052			11,052	5 MO S/L	1,105	2,211
748	2 BLOOMFIELD LAND	3/26/25	250,000			250,000	0 -- Land	0	0
749	22 ROBERTS LAND	3/26/25	485,000			485,000	0 -- Land	0	0
750	ANDY GOLD. ROAD ART	12/31/24	71,777			71,777	10 MO S/L	0	3,589
751	SEAFOX PUMP	12/31/24	11,121			11,121	10 MO S/L	0	556
752	GEO THERMAL DESIGN	12/31/24	135,500			135,500	10 MO S/L	0	6,775
753	PRF FENCE	12/31/24	5,820			5,820	10 MO S/L	0	291
754	ROBERTS	1/06/25	269,008			269,008	39 MO S/L	0	3,449
755	DAVIS GARAGE	12/31/24	61,914			61,914	39 MO S/L	0	794
756	SEAFOX RENOVATIONS	12/31/24	656,073			656,073	39 MO S/L	0	8,411
757	BHF GREENHOUSE	12/31/24	7,529			7,529	39 MO S/L	0	97
758	BHF HEAT PUMPS	12/31/24	10,193			10,193	15 MO S/L	0	340
759	BHF 168 PROP SIDING	12/31/24	34,522			34,522	39 MO S/L	0	443
760	DAVIS CENTR RENOV	12/31/24	59,152			59,152	39 MO S/L	0	758
761	2 BLOOMFIELD RENOV	12/31/24	15,099			15,099	39 MO S/L	0	194
762	PRF BARN	12/31/24	106,342			106,342	39 MO S/L	0	1,363
763	2 BLOOMFIELD SIDING	12/31/24	8,775			8,775	39 MO S/L	0	113
764	MDR LIGHTHOUSE RAILING	12/31/24	12,139			12,139	15 MO S/L	0	405
765	NWW OUTHOUSE	12/31/24	7,015			7,015	39 MO S/L	0	90
766	COLLINS HOUSE SOLAR	12/31/24	68,840			68,840	15 MO S/L	0	2,295
767	CANOE/KAYAK SHED	12/31/24	7,117			7,117	39 MO S/L	0	91
768	BHF WINDOWS	12/31/24	6,818			6,818	39 MO S/L	0	87
769	CHE ELEVATOR COMPRESS	12/31/24	8,534			8,534	39 MO S/L	0	109
770	DEMO GATES GREENHOUSE	12/31/24	68,100			68,100	39 MO S/L	0	873
771	KWD BOILER INGNITER	12/31/24	5,146			5,146	15 MO S/L	0	172
772	KAELBER DOORS	12/31/24	17,884			17,884	39 MO S/L	0	229
773	DAVIS FOUNDATION REPAIRS	12/31/24	25,000			25,000	39 MO S/L	0	321
774	PRF SOLAR PANELS	12/31/24	20,569			20,569	15 MO S/L	0	686
775	SOLAR PANELS ARTS & SC	12/31/24	23,681			23,681	15 MO S/L	0	789
776	BH ROAD INSULATION	12/31/24	5,668			5,668	39 MO S/L	0	73
777	BNN IT	6/30/25	481,983			481,983	0 -- Memo	0	0
778	CONNECTING BRIDGE	6/30/25	5,269			5,269	0 -- Memo	0	0
779	BRANDING	6/30/25	102,753			102,753	0 -- Memo	0	0
780	WEBSITE	6/30/25	111,807			111,807	0 -- Memo	0	0
781	COMPUTERS	12/31/24	21,120			21,120	5 MO S/L	0	2,112
782	STUDENT HOUSING FURNITURE	12/31/24	192,097			192,097	5 MO S/L	0	19,210
783	CHICKEN COOP	12/31/24	8,513			8,513	5 MO S/L	0	851
784	GLASS WASHER	12/31/24	5,191			5,191	5 MO S/L	0	519
785	UPS AND TRANSFORMER	12/31/24	14,977			14,977	5 MO S/L	0	1,498
786	LONG TERM RECORDER	12/31/24	5,595			5,595	5 MO S/L	0	560
787	COMPUTER	12/31/24	5,221			5,221	5 MO S/L	0	522
788	WALK IN FREEZER	12/31/24	11,549			11,549	5 MO S/L	0	1,155
789	SAUNA	12/31/24	15,443			15,443	5 MO S/L	0	1,544
790	GATES PROJECTOR	12/31/24	6,216			6,216	5 MO S/L	0	622
791	NEW SERVER	12/31/24	171,080			171,080	5 MO S/L	0	17,108
792	RAT	12/31/24	12,196			12,196	7 MO S/L	0	871
793	TRAILER	12/31/24	5,000			5,000	5 MO S/L	0	500
794	REBECCA MAINE GEAR	12/31/24	8,853			8,853	5 MO S/L	0	885
795	IN KIND VAN DONATION	12/31/24	26,875			26,875	5 MO S/L	0	2,688
796	IN KIND BOAT & TRAILER DONATION	12/31/24	5,000			5,000	5 MO S/L	0	500
797	IN KIND BOAT DONATION	12/31/24	9,000			9,000	5 MO S/L	0	900
798	BLOOMFIELD	3/26/25	406,012			406,012	39 MO S/L	0	2,603
Total Other Depreciation			89,795,235			89,795,235		30,359,240	2,214,969
Total ACRS and Other Depreciation			89,795,235			89,795,235		30,359,240	2,214,969
Grand Totals			89,795,235			89,795,235		30,359,240	2,214,969
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			89,795,235			89,795,235		30,359,240	2,214,969

COLLEGE OF THE ATLANTIC

** - *** 2625 FORM 990-T ESTIMATES

Form **990-W**

(Worksheet)

Department of the Treasury
Internal Revenue Service

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)

▶ Go to www.irs.gov/Form990W for instructions and the latest information.
▶ Keep for your records. Do not send to the Internal Revenue Service.

OMB No. 1545-0047

2024

1	Unrelated business taxable income expected in the tax year	1	57,181
2	Tax on the amount on line 1. See instructions for tax computation	2	12,008
3	Alternative minimum tax for trusts. See instructions	3	
4	Total. Add lines 2 and 3	4	12,008
5	Estimated tax credits. See instructions	5	
6	Subtract line 5 from line 4	6	12,008
7	Other taxes. See instructions	7	
8	Total. Add lines 6 and 7	8	12,008
9	Credit for federal tax paid on fuels. See instructions	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	12,008
b	Enter the tax shown on the 2023 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	12,008
c	2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	12,008

	(a)	(b)	(c)	(d)	
11 Installment due dates. See instructions	11	10/15/25	12/15/25	03/16/26	06/15/26
12 Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12		6,004	3,002	3,002
13 2023 Overpayment. See instructions	13				
14 Payment due (Subtract line 13 from line 12)	14		6,004	3,002	3,002

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

Form 990-T	Business Income Activity Summary	2024
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Name COLLEGE OF THE ATLANTIC	Taxpayer Identification Number ** - *** 2625
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Business Activity Income (and allocation of Prior-2018 NOL)

- A. Total Pre-2018 Net Operating Losses Carried Forward N/A **A.** _____
- B. Total Pre-2018 Net Operating Loss allocated to Sch A activities **B.** _____
- C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6 **C.** _____
- D. Pre-2018 Applied (Sum of B and C) **D.** _____
- E. Pre-2018 Remaining (Line A minus Line D) **E.** _____
- F. Pre-2018 Net Operating Losses Expiring this Year **F.** _____
- G. Pre-2018 Net Operating Losses Carried Forward **G.** _____

	Code	Net Income	Allocated Pre2018 NOL
1. BIKE SHOP RENTAL	532000	58,181	
2. _____			
3. _____			
4. _____			
5. _____			
6. _____			
7. _____			
8. _____			
9. _____			
10. _____			
11. _____			
12. _____			
13. _____			
14. _____			
15. All other revenue			
16. Total taxable income		58,181	

Business Activity Losses

	Code		Current Year Loss
1. _____			1. _____
2. _____			2. _____
3. _____			3. _____
4. _____			4. _____
5. All other activities			5. _____
6. Totals			6. _____

Form 990	Two Year Comparison Report	2023 & 2024
For calendar year 2024, or tax year beginning 07/01/24, ending 06/30/25		

Name _____ Taxpayer Identification Number _____

COLLEGE OF THE ATLANTIC

-*2625

		2023	2024	Differences
Revenue	1. Contributions, gifts, grants	8,736,332	9,503,456	767,124
	2. Membership dues and assessments			
	3. Government contributions and grants	512,114	421,352	-90,762
	4. Program service revenue	18,396,166	19,870,920	1,474,754
	5. Investment income	1,351,586	1,353,366	1,780
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	485,902	594,813	108,911
	11. Other revenue	141,892	195,833	53,941
	12. Total revenue. Add lines 1 through 11	29,623,992	31,939,740	2,315,748
Expenses	13. Grants and similar amounts paid	10,511,314	11,546,450	1,035,136
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	317,652	812,959	495,307
	16. Salaries, other compensation, and employee benefits	10,886,917	11,510,094	623,177
	17. Professional fundraising fees			
	18. Other professional fees	1,086,618	1,041,012	-45,606
	19. Occupancy, rent, utilities, and maintenance	86,400	106,153	19,753
	20. Depreciation and Depletion	1,901,733	2,214,968	313,235
	21. Other expenses	7,253,487	7,440,343	186,856
	22. Total expenses. Add lines 13 through 21	32,044,121	34,671,979	2,627,858
	23. Excess or (Deficit). Subtract line 22 from line 12	-2,420,129	-2,732,239	-312,110
Other Information	24. Total exempt revenue	29,623,992	31,939,740	2,315,748
	25. Total unrelated revenue	15,885	65,746	49,861
	26. Total excludable revenue	20,359,661	21,949,186	1,589,525
	27. Total assets	150,222,816	155,722,122	5,499,306
	28. Total liabilities	18,087,145	19,408,569	1,321,424
	29. Retained earnings	132,135,671	136,313,553	4,177,882
	30. Number of voting members of governing body	25	23	
	31. Number of independent voting members of governing body	23	22	
	32. Number of employees	609	596	
	33. Number of volunteers	24	22	

Form 990T	Two Year Comparison Report	2023 & 2024
For calendar year 2024, or tax year beginning 07/01/24, ending 06/30/25		

Name: COLLEGE OF THE ATLANTIC
 Taxpayer Identification Number: ** - *** 2625

		2023	2024	Differences
Business Taxable Income	1. Number of unrelated business activities for this return	1	1	
	2. Unrelated business taxable income from all trades	8,541	58,181	49,640
	3. Charitable contributions			
	4. Section 199A deduction (trusts only)			
	5. Taxable income before NOL loss	8,541	58,181	49,640
	6. Net operating loss (pre-2018)			
	7. Specific deduction	1,000	1,000	
	8. Unrelated business taxable income.	7,541	57,181	49,640
Tax & Credits	9. Income tax (corporate or trust)	1,584	12,008	10,424
	10. Proxy tax			
	11. Other taxes			
	12. Total taxes	1,584	12,008	10,424
	13. Other credits			
	14. General business credit			
	15. Credit for prior year minimum tax			
	16. Total credits			
	17. Net tax after credits	1,584	12,008	10,424
	18. Recapture taxes and 965 tax			
	19. Total Taxes	1,584	12,008	10,424
Due/Refund	20. Prior year overpayment and estimated tax payments			
	21. Payment made with extension			
	22. Backup withholding and foreign withholding			
	23. Other payments			
	24. Total payments			
	25. Balance due/(Overpayment)	1,584	12,008	10,424
	26. Overpayment applied to next year			
	27. Penalties	97	87	-10
	28. Total due/(Refund)	1,681	12,095	10,414
29. Activity Losses NOL (Post-2017)				

Form SchA (990T)	Two Year Comparison for Unrelated Business Activity	2023 & 2024
For calendar year 2024, or tax year beginning 07/01/24, ending 06/30/25		

Organization Name COLLEGE OF THE ATLANTIC	Taxpayer Identification Number ** - *** 2625
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Activity: BIKE SHOP RENTAL		Unincorporated Business Income Tax Code: 532000			
		2023	2024	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.	15,885	65,746	49,861
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.	15,885	65,746	49,861
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.	5,526	5,692	166
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Depreciation and Depletion	18.			
	19. Contributions to deferred compensation plans	19.			
	20. Employee benefit programs	20.	1,818	1,873	55
	21. Other deductions	21.			
	22. Total deductions. Add lines 12 through 22	22.	7,344	7,565	221
	23. Taxable income before deductions. Subtract line 23 from 11	23.	8,541	58,181	49,640
	24. Deductible losses	24.			
	25. Unrelated business taxable income (loss)	25.	8,541	58,181	49,640

Form 990	Tax Return History	2024
Name COLLEGE OF THE ATLANTIC		Employer Identification Number **_***2625

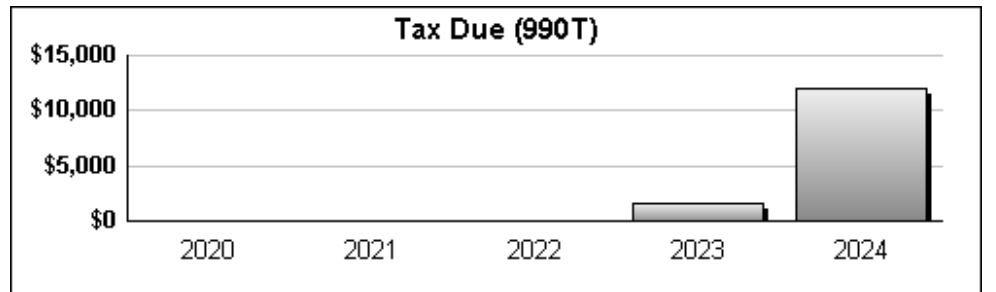
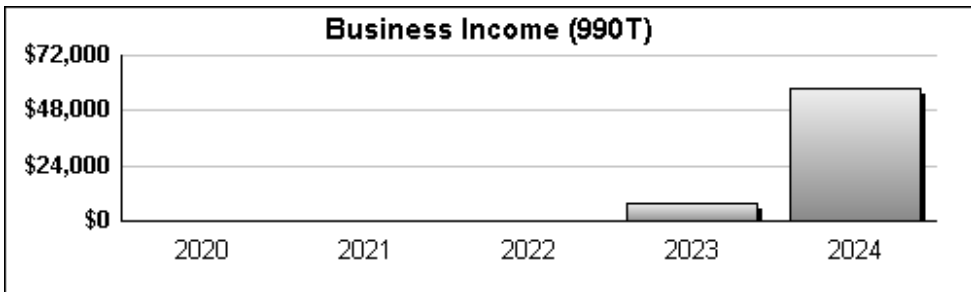
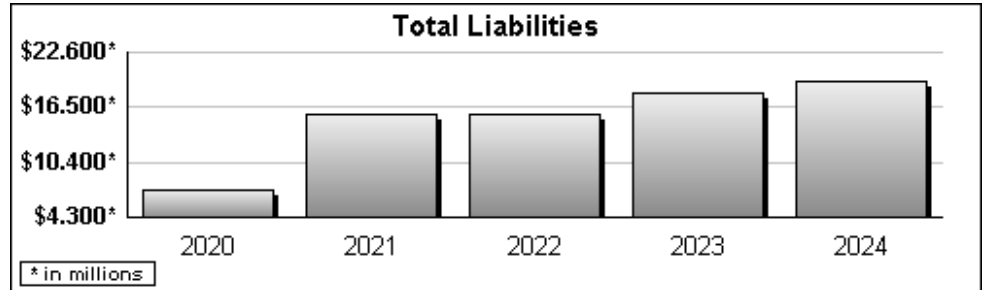
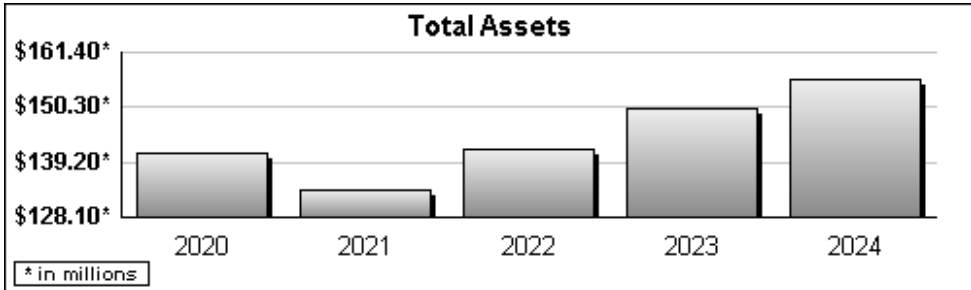
	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants	12,409,533	7,991,774	7,679,055	9,248,446	9,924,808	
Membership dues						
Program service revenue	16,561,935	17,375,689	18,744,811	18,396,166	19,870,920	
Capital gain or loss						
Investment income	440,781	623,773	1,013,356	1,351,586	1,353,366	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	445,512	550,828	565,651	627,794	790,646	
Total revenue	29,857,761	26,542,064	28,002,873	29,623,992	31,939,740	
Grants and similar amounts paid	10,714,623	10,878,153	11,093,221	10,511,314	11,546,450	
Benefits paid to or for members						
Compensation of officers, etc.	290,866	344,352	357,955	317,652	812,959	
Other compensation	8,621,949	8,937,582	9,853,744	10,886,917	11,510,094	
Professional fees	956,747	825,690	1,169,360	1,086,618	1,041,012	
Occupancy costs	34,326	35,344	24,756	86,400	106,153	
Depreciation and depletion	1,319,580	1,551,626	1,580,557	1,901,733	2,214,968	
Other expenses	4,406,231	5,626,078	6,165,855	7,253,487	7,440,343	
Total expenses	26,344,322	28,198,825	30,245,448	32,044,121	34,671,979	
Excess or (Deficit)	3,513,439	-1,656,761	-2,242,575	-2,420,129	-2,732,239	
Total exempt revenue	29,857,761	26,542,064	28,002,873	29,623,992	31,939,740	
Total unrelated revenue				15,885	65,746	
Total excludable revenue	17,448,228	18,550,290	20,323,818	20,359,661	21,949,186	
Total Assets	141,147,121	133,676,028	141,928,490	150,222,816	155,722,122	
Total Liabilities	7,364,358	15,719,420	15,606,387	18,087,145	19,408,569	
Net Fund Balances	133,782,763	117,956,608	126,322,103	132,135,671	136,313,553	

Form 990T	Tax Return History	2024
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Name COLLEGE OF THE ATLANTIC	Employer Identification Number **_***2625
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	2020	2021	2022	2023	2024	2025
UBTI from all trades	0	0	0	8,541	58,181	
Charitable contributions						
Net operating loss deduction						
Specific deduction				1,000	1,000	
Section 199A deduction (trusts)						
Income after deductions				7,541	57,181	
Income tax (corporate or trust)				1,584	12,008	
Other taxes						
Total taxes				1,584	12,008	
General business credit						
Other credits						
Net tax after credits				1,584	12,008	
Estimated tax payments						
Other payments						
Balance due /Overpayment				1,584	12,008	

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Federal Statements

FYE: 6/30/2025

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST AND DIVIDENDS	\$ 1,353,366		14			
TOTAL	<u>\$ 1,353,366</u>					

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Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER PROFESSIONAL FEES	\$ 134,238	\$	\$ 134,238	\$
ALUMNI	14,513			14,513
TOTAL	\$ 148,751	\$ 0	\$ 134,238	\$ 14,513

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONSULTANTS	\$ 363,018	\$ 292,916	\$ 15,142	\$ 54,960
REPAIRS AND MAINTENANCE	355,788	195,478	160,310	
MISCELLANEOUS	345,560	222,120	123,440	
FEES	319,753	57,525	245,626	16,602
STUDENT ACTIVITIES	215,399	215,399		
TELEPHONE EXPENSE	155,140	7,460	146,977	703
INSTRUCTIONAL EXPENSES	134,624	134,624		
FACULTY AWARDS/CHAIRS	134,476	134,476		
EVENTS EXPENSE	113,889	22,032		91,857
STUDENT EXPENSES	112,333	112,333		
VISITING FACULTY	90,637	90,637		
SMALL EQUIPMENT PURCHASES	79,960	79,192	768	
MEMBERSHIPS AND DUES	75,196	34,072	36,549	4,575
SMALL PROJECTS	45,693	45,693		
DEPRECIATION ALLOC 990-T	-38,201	-38,201		
TOTAL	\$ 2,503,265	\$ 1,605,756	\$ 728,812	\$ 168,697