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Form **990** 

Department of the Treasury Internal Revenue Service

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

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

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

OMB No 1545-0047 2008

Inspection

A Fo	r the .	2008 са	lendar yea	r, or tax year beginning 06	-01-2008 and ending 05-31-2009	)										
<b>B</b> Ch	eck if a	pplicable	Please	C Name of organization Wartburg College			D Employer ide	entification number								
☐ Add	dress ch	ange	use IRS label or	Doing Business As			42-068035 E Telephone nu									
☐ Na	me cha	nge	print or type. See	Doing Business As			·									
Init	ıal retu	rn	Specific Instruc-	Number and street (or P O 1	oox if mail is not delivered to street addres	ss) Room/suite	(319) 352- G Gross receip									
Г Те	mınatıo	n	tions.	100 Wartburg Blvd			d dioss recep	<b>15</b> \$ 90,200,922								
┌ Am	ended	return		City or town, state or country	y, and ZIP + 4		1									
Гарі	olication	pending		Waverly, IA 50677												
			<b>F</b> Nan	ne and address of Principa	l Officer	<b>H(a)</b> Is th	s a group return	for								
				E Hamm			affiliates?									
				artburg Blvd y,IA 50677		U/b) A	ll offiliator includ	-da Evas Evas								
I Ta	x-exem	pt status		(3) <b>◄</b> (insert no )	(a)(1) or	H(b) Are all affiliates included? Yes No (If "No," attach a list See instructions)										
J W	eb sit	e: ► WW	/W WARTBU	JRG EDU		H(c) Group Exemption Number ►										
<u>к</u> Тур	e of org	janization	<b>✓</b> Corporat	ıon	ther <b>▶</b>	<b>L</b> Year of Fo	ormation 1852 <b>M</b>	State of legal domicile IA								
						·	·									
Pa	rt I	Sum	mary													
	1			-	r most significant activities											
ည		SEESC	HEDULE O													
Governance																
ie.	2	Check t	this box	ıf the organızatıon dıscont	inued its operations or disposed of	f more than 2	5% of its asset	s								
ŝ	3	Number	r of voting r	nembers of the governing	body (Part VI, line 1a)		з _	28								
26 67	4	Number	rofındepen	dent voting members of th	ne governing body (Part VI, line 1b	)	. 4_	27								
Ĕ	5	Total nu	umber of en	nployees (Part V , line 2a)			5 _	2,181								
Activities &	6	Total nu	umber of vo	lunteers (estimate if nece	ssary)		6 _	500								
∢					Part VIII, line 12, column (C)	•	_	209,108								
	Ь	Net unr	elated busi	ness taxable income from	Form 990-T, line 34		7b	-5,542								
						Pri	or Year	Current Year								
함	8			d grants (Part VIII, line 11			9,298,374	6,363,377								
Revent	9 10	-		,	g)		54,434,681 1,687,973	59,142,748								
歪	11			art VIII, column (A), lines		3,176,105	2,119,603									
	12		-		st equal Part VIII, column (A), line											
	4.0	12)					68,597,133	57,197,603								
	13			er amounts paid (Part IX, c er for members (Part IX, co			19,326,830	20,974,822								
	14 15		•	, ,	numn (A), line 4) nefits (Part IX, column (A), lines 5	_										
8	13	10)	es, other co	impensation, employee be	ments (Fait IX, Column (A), mes 3		23,814,759	25,787,419								
Expenses	16a	Profes	sıonal fund	raısıng fees (Part IX, colu	mn (A), line 11e)			0								
ਡੌ	b	(Total f	undraising exp	penses, Part IX, column (D), line	e 25 <mark>1,424,762 )</mark> )											
	17	Other	expenses (	Part IX, column (A), lines	11a-11d, 11f-24f)		23,030,764	24,397,744								
	18	Total	expenses—	add lines 13-17 (must eq	ual Part IX, line 25, column (A))		66,172,353	71,159,985								
. 02	19	Reven	ue less exp	enses Subtract line 18 fr	om line 12		2,424,780	-13,962,382								
8 9 20 8						Beginn	ing of Year	End of Year								
98 eg	20	Total	assets (Par	t X, line 16)			196,614,743	171,986,716								
Net Assets or Fund Balances	21	Totall	ıabılıtıes (F	Part X, line 26)			100,723,562	97,483,412								
	22			d balances Subtract line :	21 from line 20		95,891,181	74,503,304								
Pa	rt II		ature Blo													
					mined this return, including accompanying on of preparer (other than officer) is based											
Plea		****				2010	-04-13									
Sign Here		Sign	ature of office	er		Date										
	-		S Grace VP f	or Administration												
		IF Typ∈	. от ринк пат	Cana duc	<u> </u>	N 1 - 5		· · · · · · · · · · · · · · · · · · ·								
<b>.</b>		Preparer signature		Marine CPA	2010-04-13 se	Check If elf-	Preparer's PTIN	(See Gen Inst )								
Paid	oror'-		· •			mpolyed 🕨 🦵										
Use (	arer's Only	ıf self-er	ame (or yours nployed),	P			EIN 🕨									
	-111 <b>y</b>	address,	and ZIP + 4	115 South 84th Street Suite	e 400		Phone no 🕨 (4	114) 777-5500								
				Milwaukee, WI 53214	-12/6		THORE TO F (4	<u> </u>								
мау	tne IR	5 discus	s this retu	rn with the preparer shown	above? (See instructions)			▼Yes 「No								

### Part III Statement of Program Service Accomplishments (See the instructions.)

•	Statement of Program s	service Accomplish	inents (See the	1113ti uction3.)	
1	Briefly describe the organization's mission Undergraduate education that challenges and n	ourtures students for lives of lea	adership and service as	a spirited expression of their fait	h and learning
2	Did the organization undertake any si the prior Form 990 or 990-EZ? .		s during the year v	which were not listed on	┌ Yes ┌ No
3	If "Yes," describe these new services  Did the organization cease conducting		ngas in haw it sand	uete any program	
3	services?		· · · · · ·		┌ Yes ┌ No
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organization others, the total expenses, and reven	ements for each of the org ons and 4947(a)(1) trusts	are required to re	port the amount of grants a	
4a	(Code ) (Expenses \$ Instruction of students enrolled and the relat respectively		iding grants of \$ nd 1,690 full-time equiv	20,974,822 ) (Revenue \$ valent students enrolled for the fa	45,233,083 ) Il 2008 and winter 2009 terms
4Ь	(Code ) (Expenses \$ Auxiliary enterprises supports students living fall and 2009 winter terms respectively		iding grants of \$ as providing books Th	0 ) (Revenue \$ ere were 1,427 and 1,362 studer	13,752,589 ) ats living on campus for the 2008
4c	(Code ) (Expenses \$ All other program related services	10,427,826 ınclu	iding grants of \$	) (Revenue \$	1,921,497 )
	- The other program related services				
4d	Other program services (Describe i	n Schedule O )			
	(Expenses \$	including grants of \$		) (Revenue \$	)
4e	Total program service expenses \$	56,941,539 <i>N</i>	Aust equal Part IX, L	ine 25, column (B).	

Part IV	Chec	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 💋	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νo
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νo
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II $\Box$	21		Νo
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νο
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes	

Part VI . . . .

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent 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.	37		Νo

Pa	rt V Statements Regarding Other IRS Filings and Tax Complian	ce				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal	1				
	of U.S. Information Returns . Enter -0- if not applicable					
		1a	2,445			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments	to ven	dors and reportable	4-	V	
2-	gaming (gambling) winnings to prize winners?	i ·		1c	Yes	
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		2,181			
b	If at least one is reported in 2a, did the organization file all required federal employ		,			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file the			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sc	hedule	0	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a over, a financial account in a foreign country (such as a bank account, securities a account)?	-	·	4a		No
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Financial Accounts.	Report o	of Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time du	rıng the	tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited	d tax sl	nelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exem</i> Tax Shelter Transaction?	pt Enti	ty Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement were not tax deductible?	that su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo comore?	ntrıbut	ion of \$75 or	7a		No
ь	If "Yes," did the organization notify the donor of the value of the goods or services	provide	ed?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prop	erty for	which it was required to			
_	file Form 8282?	1		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pa		niums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a per		enefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization	file a F	orm 1098-C as	74		
8	required?		tion 500(a)(3)	7h		
•	supporting organizations. Did the supporting organization, or a fund maintained by a excess business holdings at any time during the year?			8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds					
а	Did the organization make any taxable distributions under section 4966?			9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related perso			9b		
10	Section 501(c)(7) organizations. Enter					
а	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					
	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 )					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıeu (	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

2

3

4

5

6

7a

7Ь

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	ı, desc	ribe th	e cırd	cumsta	ances,
1a	Enter the number of voting members of the governing body	1a				28
b	Enter the number of voting members that are independent	1b				27
2	Did any officer, director, trustee, or key employee have a family relationship or a bustother officer, director, trustee, or key employee?	siness 	relatio	onsh •	ip with	any

3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	
ŀ	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5

	filed?
5	Did the organization become aware during the year of a material diversion of the organization's assets?
6	Does the organization have members or stockholders?

•																							
Does the organiza	tion	have	e me	mbe	rs,	stoc	kho	lder	s, o	r ot	her	per	sons	who	may	elect	one	or	more	e r	nem	ıbers	of the
governing body?																							

D	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	•
	Did the organization contemporaneously document the meetings held or written actions undertaken during the	ıе
	year by the following	

	year by the following													
3	the governing body?													

b	eachc	ommit	tee with a	uthorit	y to a	act on ber	half of th	ne govern	ing bod	y,	•	•	•	•	•	•	•	•	•	•	•	•
1	Does t	:he org	anızatıon	have lo	calc	:hapters,	branche	s, or affil	ıates?													
		,, ,															_					

b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,
	affiliates, and branches to ensure their operations are consistent with those of the organization?
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations

Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	s
must describe in Schedule O the process, if any, the organization uses to review the Form 990	-

11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached a	at
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	

8	la	Yes	
8	ь	Yes	
9	a		No
9	ь		
1	.0	Yes	
1	.1		Νο

### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

RICHARD SEGGERMAN 100 WARTBURG BLVD WAVERLY,IA 50677 (319) 352-8215

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i	(B) Average hours per week	Posit	(C	) chec	:k al			Reportable compensation from the organization (W-	(E)	(F)	
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
							-				

### Part VII Continued

	(B) Average hours per week	(C) Position (check all that apply)						(D)	(E)	(F)
<b>(A)</b> Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			1							
							<u> </u>			
							$\vdash$			
							$\vdash$			
1b Total							-	1,190,355	5	151,675

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►7

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

### **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

(A) Name and business address	( <b>B)</b> Description of services	(C) Compensation
Cardinal Construction Inc 531 Commercial Street PO Box 897 WATERLOO, IA 50704	Construction Contractor	1,541,717
Modern Builders Inc 517 1st Avenue NE Waverly, IA 50677	Construction Contractor	227,363
Hawkeye StagesMarshall Coaches Inc 703 Dudley Street Decorah, IA 52101	Bus Charter	199,142
ME & V 6711 CHANCELLOR DRIVE CEDAR FALLS, IA 50613	MARKETING CONSULTANTS	195,870
RuffaloCODY 221 3rd Avenue SE Suite 10 Cedar Rapids, IA 524063018	Management Consultant	182,075
Total number of independent contractors (including those in 1) who red from the organization		7

# Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
- A6 .m	1a	Federated can	npaigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership d	ues					
gr	с	Fundraising ev	/ents					
ifts, ir ai	d	Related organi	1c					ł
2,2 E	e		izations1d its (contributions) 1e					ŀ
ion; r sir	f	_	tions, gifts, grants, and	5,950,636		ŀ		1
ibut the	-	sımılar amounts n	not included above					
d at a	g		ributions included in					
ပည	h	lines 1a-1f \$	<u>24,387</u> es 1a-1f)		6,363,377			
		(		Business Code				
en n	2a	TUITION & FEES		900,099	45,233,083	45,233,083		
ием	ь	Auxiliary Enterpris	ses	541,900	, ,	13,752,589	157,076	
e Pre	c			,	, ,	, ,	,	
rvic	d							
98 L	e							
Program Service Revenue	f	All other progr	ram service revenue					
Proç	g	Total. Add line ► \$ 59,142,74	es 2a-2f 8					
	3		come (including divi	dends, interest				
		other sımılar a	amounts)		760,133			760,133
	4	Income from inve	estment of tax-exempt b	ond proceeds	305,215			305,215
	5	Royalties .						
		. [	(ı) Real	(II) Personal				
	6a	Gross Rents	122,218					
	ь	Less rental expenses	86,651					
	C	Rental income or (loss)	35,567					
	d	Net rental inco	ome or (loss)		35,567			35,567
		_	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	29,503,195					
		assets other than inventory						
	ь	Less cost or other basis and	40,904,408	92,260				
	c	sales expenses Gaın or (loss)	-11,401,213	-92,260				
	d	ا Net gaın or (lo	ss)		-11,493,473			-11,493,473
	8a	Gross income	from fundraising	. ▶				
		events (not ind \$	cluding					
une			ns reported on line					
ĕ∧e		Attach Schedul	e G ıf total exceeds					
Ţ.	١.	. ,	a					
Other Revenue	b c		xpensesb (loss) from fundrais	ing events				
0	9a							
			part IV , line 19					
		Complete Schedexceeds \$15,00						
			а					
	b		xpensesb	a structure				
	С		(loss) from gaming a	**************************************				
	10a	Gross sales of returns and all	finventory, less lowances .					
			а					
	b	Less cost of						
	С	Net income or Miscellaneou	(loss) from sales of	Business Code				
	11a	Other Program		541,900	2,032,004	1,921,497		110,507
	b	Copy Center I		561,439	47,651		47,651	
	С	Student Cente		561,439	4,381		4,381	
	d	All other rever						
	e	Total. Add line						
	12	Total Payania	. Add lines 1h, 2g, 3	\$ 2,084,036 \$ 4 5 6d 7d	57,197,603	60,907,169	209,108	-10,282,051
		8c,			,,	-,,	_3-,-30	
	]	9c, 10c, and 1	l1e	. •				Form <b>990</b> (2008)

# Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21									
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	20,974,822	20,974,822							
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	1,097,655	282,231	619,508	195,916					
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	18,430,175	16,362,705		583,052					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,161,533	1,024,161	93,553	43,819					
9	Other employee benefits	3,810,965	3,352,541	306,946	151,478					
10	Payroll taxes	1,287,091	1,129,510	103,666	53,915					
11	Fees for services (non-employees)									
а	Management									
b	Legal	7,528		7,528						
c	Accounting	112,813		112,813	_					
d	Lobbying									
е	Professional fundraising See Part IV, line 17									
f	Investment management fees									
g	Other	649,762	488,277	52,334	109,151					
12	Advertising and promotion	185,138	169,053	14,911	1,174					
13	Office expenses	1,657,656	1,393,433	133,512	130,711					
14	Information technology	809,766	485,860	323,906						
15	Royalties									
16	Occupancy	2,061,217	1,895,201	166,016						
17	Travel	1,463,585	1,228,728	117,881	116,976					
18	Payments of travel or entertainment expenses for any Federal, state or local public officials									
19	Conferences, conventions and meetings	19,895	18,283	1,602	10					
20	Interest	4,725,058		4,725,058						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	4,234,426		4,234,426						
23	Insurance	530,208	487,504	42,704						
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )									
а	Food Purchases & Bookst	3,051,747	3,051,747							
ь	Campus Groups & May Ter	1,748,982	1,748,982							
c	Repairs and Maintenance	897,285	824,750	72,270	265					
d	All Other Expenses	871,397	793,193	70,185	8,019					
e	Service Agreements	738,894	678,060	59,513	1,321					
f	All other expenses	632,387	552,498	50,934	28,955					
25	Total functional expenses. Add lines 1 through 24f	71,159,985	56,941,539	12,793,684	1,424,762					
26	Joint Costs. Check if if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Part X	Balance	Sheet
	Balance	SHEET

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				630.531	1	End of year
	2	Savings and temporary cash investments	•	•		5,712,662		5,046,665
	3	Pledges and grants receivable, net	•			5,050,000		4,700,000
	4	Accounts receivable, net	•			737,595	_	869,184
	5	Receivables from current and former officers, directors, trustee:		757,555		003,104		
		other related parties Complete Part II of Schedule L		•			5	
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of					6	
	7	Notes and loans receivable, net				3,404,920	7	3,276,749
	8	Inventories for sale or use				234,779	8	246,658
\$	9	Prepaid expenses and deferred charges				523,087	9	519,503
ssets	10a	Land, buildings, and equipment cost basis	1	1				
⋖	_		10a		139,181,494			
	b	Less accumulated depreciation Complete Part VI of Schedule D	10b		32,422,310	109,577,752	10c	106,759,184
	11	Investments—publicly traded securities			,,	42,212,467		28,007,895
	12	Investments—other securities See Part IV, line 11 Complete P	art VI.	I of	•	25,487,973		19,209,034
	13	Schedule D  Investments—program-related See Part IV, line 11 Complete F			12			
	14	of Schedule D .  Intangible assets			13 14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule				3,042,977	14	3,351,844
	13	D		3,042,377	15	3,331,044		
	16	Total assets. Add lines 1 through 15 (must equal line 34)				196,614,743	16	171,986,716
	17	Accounts payable and accrued expenses .				6,546,728	17	5,017,717
	18	Grants payable		2,902,267	18	2,907,217		
	19	Deferred revenue				55,630	19	33,357
	20	Tax-exempt bond liabilities				85,234,096	20	85,070,152
<u>6</u>	21	Escrow account liability Complete Part IV of Schedule D					21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ē		persons Complete Part II of Schedule L					22	
_	23	Secured mortgages and notes payable to unrelated third parties					23	
	24	Unsecured notes and loans payable					24	
	25	Other liabilities Complete Part X of Schedule D		5,984,841	25	4,454,969		
	26	Total liabilities. Add lines 17 through 25				100,723,562	26	97,483,412
		Organizations that follow SFAS 117, check here ▶ ✓ and comp	olet e l	lines 2	27			
S & S		through 29, and lines 33 and 34.						
Balance	27	Unrestricted net assets				58,939,911	27	33,879,816
- B3	28	Temporarily restricted net assets		9,000,683	28	8,826,930		
돧	29	Permanently restricted net assets		27,950,587	29	31,796,558		
Fund		Organizations that do not follow SFAS 117, check here ► ar lines 30 through 34.	•					
s or	30	Capital stock or trust principal, or current funds					30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund			31			
Assets	32	Retained earnings, endowment, accumulated income, or other fu	-		32			
Net 4	33	Total net assets or fund balances		95,891,181	33	74,503,304		
ž	34	Total liabilities and net assets/fund balances				196,614,743		171,986,716
						155,57 1,1 40		,555,,10
Pa	rt XI	Financial Statements and Reporting						

Part XT	Financial	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
ь	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

**Employer identification number** 

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

wartb	urg Coll	ege						142	-068035:	1		
Pa	rt I	Reason	for Public Cl	harity Status (to be co	mnleted	hy all or	nanizatio					
				ation because it is (Please					moduce	.101137		
1	Ī			nurches, or association of ch					(A)(i).			
2	<u> </u>	•		tion 170(b)(1)(A)(ii). (Attac				. , . , .	. , . ,			
3	Г	A hospital	or a cooperative	e hospital service organizati	on descril	bed in <b>Sec</b>	t ion 170(Ł	b)(1)(A)(i	ii). (Attac	h Schedul	e H )	
4	Γ	A medical i	research organi	zation operated in conjuncti	on with a l	hospital de	escribed ii	n <b>Sect ion</b> :	170(b)(1)	(A)(iii). E	nter the	
		hospital's r	name, city, and	state		•						
5	Γ	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	Γ			overnment or governmental	unıt descr	ıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).			
7	Γ	Anorganiza	ation that norma	ally receives a substantial p	art of its s	support fro	m a gove	rnmental ເ	· ınıt or fron	n the gene	ral public	2
				o)(1)(A)(vi) (Complete Par								
8	$\Gamma$	A communi	ty trust describ	ped in Section 170(b)(1)(A)	( <b>vi)</b> (Com	plete Par	tII)					
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% o	fits supp	ort from co	ontribution	ıs, membe	rship fees	, and gro	SS
		receipts fro	m activities rel	ated to its exempt functions	-subject	to certair	exceptio	ns, and (2	) no more	than 331/	3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess sectio	n 511 tax	x) from bu	sınesses	
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III	)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ct ion 509(	( <b>a)(4).</b> (Se	ee instruc	tions )	
11	Γ	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 <b>Section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h  a								.Check		
e	Γ	•	foundation man	rtify that the organization is agers and other than one or			•			•	•	
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organiz	zatio <u>n,</u>
-		check this		as the organization accepted	d any gift.	or contrib	ution from	any of the				J
g		following pe		as the organization accepted	u any gni	or continu		ally of the				
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
		and (III) bel	ow, the governi	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	7					11g(	ii)	
		(iii) a 35%	controlled enti	ty of a person described in (	ı) or (11) al	bove?				11g(	iii)	
h		Provide the	following inforr	mation about the organizatio	ns the org	janization	supports					
		me of	(ii) EIN	(iii) Type of organization	(iv) I		1 * .*	ou notify		sthe	, ,	nount of
						_	inization i) of your		ation in	supp	ort /	
	Organ	ization		above or IRC section (See Instructions))  col (i) listed in in col (i) of your col (i) organized support? in the U.S.?								
		Yes No Yes No Yes No										

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

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

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)								
	Facts and Circumstances Test								

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

**Employer identification number** Name of the organization Wartburg College 42-0680351 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

50,700

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

**►** \$

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2008

Part	111	Organizations Maintaining Co	llections of Art,	His <sup>.</sup>	<u>tori</u>	<u>cal Treas</u>	ures, or Othe	r Similar	Asse	ts (co	ntınued)
3		g the organization's accession and others s (check all that apply)	r records, check any	of th	e foll	owing that a	re a sıgnıfıcant ι	ise of its col	lection	ı	
а	$\Gamma$	Public exhibition		d	$\sqcap$	Loan or ex	change programs				
b	F :	Scholarly research		e	$\Gamma$	Other					
С	$\Gamma$	Preservation for future generations									
4	Prov Part	ide a description of the organization's co	ollections and explair	n how	v they	further the	organization's e	xempt purpo	se in		
5		ng the year, did the organization solicit o its to be sold to raise funds rather than t						nılar	Γ	Yes	√ No
Par	t IV	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					anızatıon answ	ered "Yes"	' to Fo	orm 9	90,
1a		le organization an agent, trustee, custod ided on Form 990, Part X?	ıan or other ıntermed	ıary	for c	ontributions	or other assets	not	Γ	Yes	┌ No
b	If"Y	es," explain why in Part XIV and comple	te the following table					_			
									A mou	nt	
С	Begi	inning balance					1c				
d	Add	itions during the year					1d				
е	Dıst	ributions during the year					1e				
f	Endi	ing balance					1f				
2a	Dıd t	he organization include an amount on Fo	orm 990, Part X, line	21?					Γ	Yes	┌ No
b	If "Y	es," explain the arrangement in Part XIV									
Pai	t V	Endowment Funds. Complete									
1a	Bogu	nning of year balance	(a)Current Year 50,105,268	(b	<b>)</b> Prior	Year (c)	Two Years Back (d	)Three Years Ba	ack   <b>(e</b>	)Four Ye	ears Back
ь		tributions	4,626,170								
c		estment earnings or losses	-16,233,325								
d		nts or scholarships	650,680								
e		er expenditures for facilities	1,271,488								
		programs									
f	Adm	ninistrative expenses									
g	End	of year balance	36,575,945								
2	Prov	ide the estimated percentage of the yea	r end balance held as								
а	Boar	d designated or quasi-endowment 🕨	18 000 %								
b	Perm	nanent endowment 🕨 82 000 %									
c	Term	n endowment 🕨									
3a		there endowment funds not in the posses	ssion of the organizat	ion t	hat a	re held and	admınıstered for	the			
		nization by nrelated organizations						Г	2-/:\	Yes	No No
		related organizations			•				3a(i) 3a(ii)		No
ь	` '	es" to 3a(ii), are the related organization				ule R?		· · · · [	3b	<u> </u>	
4		cribe in Part XIV the intended uses of th	•								
Par	t VI	Investments—Land, Buildings	s, and Equipmen	t. S	ee F	orm 990, F	Part X, line 10.				
		Description of investment				Cost or other (investment)	(b)Cost or other basis (other)	(c) Deprecia	tion	<b>(d)</b> Boo	ok value
1a	and					179,200	3,558,280			:	3,737,480
b E	Buildii	ngs					115,233,048	21,676	,126	9:	3,556,922
<b>c</b> l	.ease	hold improvements									
d E	quipi	ment					11,607,503	7,210	,570		4,396,93
<b>e</b> (	Other		<u> </u>				8,603,463	3,535	,614		5,067,849

Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
nancial derivatives and other financial products		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
losely-held equity interests		
ther CSV - Life Insurance	1,784,550	
ther Other	299,337	
ther Commingled Trust Funds	7,024,926	
ther Fund of Hedge Funds	3,844,110	
ther Guaranteed Investment Contracts	6,256,111	
otal. (Column (b) should equal Form 990, Part X, col (B) line 12 )	19,209,034	
art VIII Investments—Program Related. See	e Form 990, Part X, line 13	3.
(a) Description of investment type	(b) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
otal. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, III	ne 15.	
(a) Descrip	tion	(b) Book value
otal. (Column (b) should equal Form 990, Part X, col.(B) line 1		<u> </u>
(a) Description of Liability	(b) A mount	
ederal Income Taxes	(D) Amount	
EPOSITS	862,884	
NNUITIES PAYABLE	3,007,715	
EPOSITS HELD IN CUSTODY	138,370	
SSET RETIREMENT OBLIGATION	446,000	
33ET RETTREMENT OBLIGATION	440,000	
otal. (Column (b) should equal Form 990, Part X, col (B) line 25 )	4,454,969	
. , , , , , , , , , , , , , , , , , , ,	7,704,707	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	57,197,603
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	71,159,985
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-13,962,382
4	Net unrealized gains (losses) on investments	4	-7,425,495
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-7,425,495
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-21,387,877
Par	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	29,162,611
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-28,400,317
3	Subtract line <b>2e</b> from line <b>1</b>	3	57,562,928
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	-365,325
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	57,197,603
	Reconciliation of Expenses per Audited Financial Statements With Expenses  Total expenses and losses per audited financial statements		
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	50,550,488
² a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Losses reported on Form 990, Part IX, line 25	-	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	365,325
3	Subtract line <b>2e</b> from line <b>1</b>	3	50,185,163
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV)	1	
С	Add lines <b>4a</b> and <b>4b</b>	4c	20,974,822

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part III, Line 4		The college does not have a significant art collection. The items that are held are used for educational purposes in various courses and for the benefit of the general public.
Part V, Line 4	Description of Intended Use of Endowment Funds	The college's endowment funds are used to support the educational and other support services provided to the student body
Part XII, Line 2d - Other Adjustments		Scholarships and Grants
Part XII, Line 4b - Other Adjustments		Loss on Disposal of Plant Assets Rental Property Expenses Actuarial Adjustment
Part XIII, Line 2d - Other Adjustments		Actuarial Adjustment Rental Property Expense Loss on Disposal of Plant Assets
Part XIII, Line 4b - Other Adjustments		Scholarships and Grants

## OMB No 1545-0047

### NO 1545-004

2008

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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

**Name of the organization** Wartburg College

 ${\bf Employer\ identification\ number}$ 

42-0680351

	·		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?	1	Yes	
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?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy 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 See Schedule O	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Νo
ь	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5с		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	5h		No
		-		
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a	Yes	
b	If you answered "Yes" to either 6a or b, please explain using an attached statement	6b		N o
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, covering racial nondiscrimination? If "No," attach an explanation	7	Yes	

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2008

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### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Name of the organization
Wartburg College

Employer identification number

42-0680351

Part I	General Information on	<b>Activities Outside the United States.</b>	Complete if the organization answered
	"Yes" to Form 990, Part IV,	line 14b.	

1	For grantmakers. 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	Γ	No

2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

**3** Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

<b>3</b> Activites per Region (U	se Schedule F-1	(Form 990) If add	ditional space is needed )		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)		(f) Total expenditures in region
Central America & Caribbean	0	0	Program Service	Instruction	972
East Asia & Pacific	0	0	Program Service	Instruction and Student Services	39,992
Europe	0	0	Program Service	A cademic Support, Instruction, Public Service and Student Services	65,744
North America	0	0	Program Service	A cademic Support, Instruction and Student Services	11,190
South America	0	0	Program Services	Instruction	11,350
Sub-Saharan Africa	0	0	Program Service	Instruction and Student Services	50,240
Totals					179,488
For Paperwork Reduction Act No.	tice, see the instr	uctions for Form 9	90. Cat No	50082W <b>S</b>	chedule F (Form 990) 2008

Pa	Part IV,	line 15, for any edule F-1 if add	sistance to Orga recipient who rec litional space is ne	nizations or Entiti eived more than \$5, eded.	es Outside the Ur ,000. Check this box	nited States. Composite of the composition of the c	plete if the organiza received more thai	tion answered "Yes n \$5,000	" to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		_							
		-							
		-							
		-							
		-							
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		- -							
		-							
		-							
		-							
		-							
		-							
		-							
		-							
2	Enter total nu has provided	mber of organi a section 501(c	zations that are re	cognized as charities	s by the foreign cou	ntry or for which th	e grantee or counse	el . <b>▶</b>	
3	Enter total nu	mber of other of	organizations or er	ntities				. ▶	

	F-1 (Form 990) if a			ted States. Complete	ii ule organization a	iliswered tes to form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2008

Complete this part t	o provide the information required	ın Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation

Software ID:

**Software Version:** 

**EIN:** 42-0680351

Name: Wartburg College

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
--------------------------	---	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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DLN: 93493103001070

Schedule I (Form 990)

## **Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspect ion

Employer identification number

Wartburg College						42-0680351	
Part I General Infor  1 Does the organization mathe selection criteria use 2 Describe in Part IV the organization	aıntaın records to s ed to award the grar	nts or assistance?	of the grants or assista				V Yes □ I
Part II Grants and Ot Form 990, Part Part IV and Sch	ther Assistance IV, line 21 for an nedule I-1 if addit	to Governments any recipient that receptional space is	and Organizations ived more than \$5,0	in the United State 00. Check this box	tes. Complete if the of the first no one recipient rec	eived more than \$5,0	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of seconganizations					•		
3 Enter total number of oth							
For Paperwork Reduction Act No	tice, see the Instruct	ions for Form 990.		Cat No 500551	p	Scl	nedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Institutional Scholarships and Grants	1700	933,379	19,877,767	Tuition Discounting	See Schedule O
Supplemental Education Opportunity Grant (SEOG) is a federal grant that is awarded by the college to qualified students in order to reduce the cost the student must pay for their education	350	163,676			

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

See Additional Data Table

See Additional Data 1 able					
Ident if ier	Return Reference	Explanation			
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The college provides grants and scholarships to its full-time, degree seeking students, by crediting such amounts directly to their student accounts, to be only used as an offset for tuition			

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DLN: 93493103001070

OMB No. 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

## **Compensation Information**

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Name of the organization
Wartburg College

42-0680351

Part I Questions Regarding Compensation

					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
Ь	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "!			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		· · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all t		·			
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes,"			7		Νο
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		Νο

Cat No 50053T

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
John R O HLE (I)	166,475		244,449	11,520	4,998	427,442	266,793	
(ii	)							
(i)								
(ii								
(i)								
(ii	)							
(i)								
(ii								
(i)								
(ii	)							
(i)								
(ii	)							
(i)								
(ii	)							
(i)								
(ii								

### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

DLN: 93493103001070

OMB No 1545-0047

### Schedule K (Form 990) **Supplemental Information on Tax Exempt Bonds**

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Open to Public **Inspection** 

	ne of the organization									Employer	identificat	ion numb	oer	
wa	rtburg College									42-068	0351			
Ρ	art I Bond Issues (Require	ed for 2008)								<u>'</u>	_			
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issu	e Price	<b>(f)</b> Des	cription of F	urpose	( <b>g)</b> De	feased	Beh	On alf of uer
											Yes	No	Yes	No
A	Iowa Higher Education Loan A uthority	42-1235696	462460VZ6	12-29-	2005	49,	918,166	See Schedu	le O			х		х
В	Iowa Higher Education Loan Authority	42-1235696	462460VY9	12-29-	2005	36,	706,381	See Schedule O				х		х
Pā	art III Proceeds (Optional fo	or 2008)		l								1		
					A	l	3		С		<b>D</b>		E	
1														
2														
3	Proceeds in Refunding or Defeas	sance Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures fr	om Proceeds												
7	Capital Expenditures from Proce	eeds												
8	Year of Substantial Completion													
9	Were the bonds issued as part o	of a current refunding iss	sue?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
10	Were the bonds issued as part o	of an advance refunding	ıssue?											
11	Has the final allocation of proce	eds been made?												
12	Does the organization maintain final allocation of proceeds?	adequate books and rec	cords to support the											
Pa	rt IIII Private Business Us	<b>e</b> (Optional for 2008	)			1		1						
					<b>A</b>	<del>                                     </del>	3	+	C		D 		E	
1	Was the organization a partner i which owned property financed b		ember of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No	Yes	•	No
2		nts with respect to the fi	nanced property											

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(	С	I	D	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or 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 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 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(	<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

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DLN: 93493103001070

OMB No 1545-0047

Open to Public Inspection

### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

**Transactions with Interested Persons** 

Name of the organization Employer identification number

Wartburg College					4.	0.66						
Part I Excess Benefit Transac					(4) organiz		ns on	ly).				
To be completed by organizati	ions	that answered "Yes"	on Form 990, Part IV	/, line	25a or 25b	o, or F	orm 9	90-EZ				
1 (a) Name of disqualific	ed pe	erson	<b>(b)</b> Des	cripti	ion of trans a	ction				<b>c)</b> Cor		
				-						Yes	No	
2 Enter the amount of tax imposed or section 4958	n the	organization manage	ers or disqualified per	sons	during the y	earui	nder •	¢				
3 Enter the amount of tax, if any, on I	ine 2	ahove reimbursed	by the organization	•				φ —— ¢				
Part II Loans to and/or Fron				•				Ψ				
To be completed by organiz				IV. li	ine 26. or Fo	orm 9	90-F	Z. Part	V . line	e 38a		
		) Loan to or		T	0 / 0			(f		T		
(a) Name of interested person and purpose	) Name of interested person and		(c)O riginal principal amount	( <b>d</b> )B	Balance due		In ult?	Appr by boo	oved ard or	or agreemen		
		To From				Yes	No	Yes	No	Yes	No	
	_			<u> </u>							╀	
	$\perp$			<u> </u>								
	+										+-	
	_			-							+	
atal			<b>&gt;</b> \$									
otal	Pon	ofitting Interest										
To be completed by orga		tions that answer	ed "Yes" on Form 9		Part IV, lın	ne 27						
(a) Name of interested person			between interested pe he organization	erson	( <b>c)</b> A m	ount o	fgra	nt or ty	pe of a	assista	nce	
isclosure Subject to		FERPA Laws			Tuition Re	emiss	ıon					
Part IV Business Transactions To be completed by orga				990.	Part IV. lır	ne 28	a. 28	b. or i	28c.			
(a) Name of interested person		(b) Relationship between interested			( <b>d)</b> Descr				(	<b>e)</b> Sha	ation's	
(a) Name of miletested person		person and the organization	transaction		(u) Desci	ιρειστ	01 116	1113 a C LI	-	rever <b>Yes</b>	ues?	
IE & V		Liz Mathis, Regent, h			Marketing a services pr			-		. 63	No	
	a	a ramny member with an ownership interest n ME&V			course of but charged are	usines	s Fe	es				

reasonable for the services

provided

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# SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

DLN: 93493103001070

2008

Open to Public Inspection

Name of the organization Wartburg College Employer identification number

42-0680351

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, Ine 10		Audit firm uses specialized proprietary 990 tax form softw are to process the information provided by the college This results in checks for addition and balancing of supporting schedules to more summarized amounts. The audit firm prepares a draft of the form 990 based on information provided to them and their know ledge of how to complete the 990. After receiving the draft form 990 from the audit firm, personnel from the business office review the draft, reconciling information back to supporting work papers where possible and reviewing other information for completeness, accuracy, consistency, and reasonableness. Next, the President's cabinet and the board's audit committee members review the draft of the form 990 for completeness, accuracy, consistency, and reasonableness. Feedback from all reviews is forwarded to the audit firm and the form 990 is updated accordingly. A copy of the form 990 (with donor names removed) is posted on the secure confidential board of regents' website, and an email is sent to all board members notifying them that the 990 is available for review. Feedback provided from the board members is reviewed and discussed with individual board members as necessary and appropriate. All feedback that requires a significant change to the form 990 is provided in a summary fashion to all board members, to allow additional feedback or comments. The final approved feedback is given to the audit firm to incorporate in the final form 990. The board receives the final form 990 prior to it being filed.

ldentifier Reference		Explanation
Form 990, Part VI, Section B, line 12c		The conflict of interest policy is reviewed, updated, and approved annually by the board. Board members and key employees are reminded of their responsibility to follow the conflict of interest policy. Business office personnel are familiar with the vendors used by the college and would follow the conflict of interest policy if there were any potential transactions that would fall within the scope of that policy.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The board of regents establishes compensation for the president initially and annually, applying all elements noted in this lines query. The comparator group is limited to liberal arts colleges with comparable enrollments, including other ELCA related colleges. The President establishes compensation for the President's Cabinet initially and annually, applying all elements noted in this Line's query, except for contemporaneous substantiation of the deliberation and decision. The comparator group is limited to liberal arts colleges with comparable enrollments, including other ELCA-related colleges.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The governing documents, conflict of interest policy, and financial statements are not made available to the public

ldentifier	Return Reference	Explanation
Form 990, Part I, Line 1	Organization's mission or most significant activities	UNDERGRADUATE EDUCATION THAT CHALLENGES AND NURTURES STUDENTS FOR LIVES OF LEADERSHIP AND SERVICE AS A SPIRITED EXPRESSION OF THEIR FAITH AND LEARNING

ldentifier	Return Reference	Explanation
Form 990, Schedule E, Line 3	Racially Nondiscriminatory Policy	The college follows a nondiscriminatory policy regarding all programs. Enrollment of students is without discrimination as to race, age, sex, color, sexual orientation, handicap, or national origin and is published in the college's catalog, and the college's website. Recruitment procedures are designed and carried out to reach all racial segments in the geographic area served by the college.

ldentifier	Return Reference	Explanation
Form 990, Schedule I, Part III Column (F)	<u>'</u>	Institutional scholarships and grants are used as a direct reduction of the tuition that each full-time student is required to pay

ldentifier	Return Reference	Explanation
Form 990, Schedule K, Part I, Line A, Column (F)	Description of purpose	The 2005 Series A Bond proceeds were used to advance refund or defease the Series 2002 Bonds. The proceeds of the Series 2002 Bonds were used to finance the costs of constructing, improving, and equipping renovations of and additions to the Student Center, Science Building, and various other campus buildings, facilities, and improvements, and for the purpose of currently refunding and refinancing various outstanding indebtedness.

ldentifier Return Reference		Explanation
Form 990, Schedule K, Part I, Line B, Column (F)	Description of purpose	The 2005 Series B Bond proceeds were used to finance the cost of acquiring, constructing, improving, and equipping the Wellness Center, to pay capitalized interest during construction of the Wellness Center, and to fund the Series B Debt Service Reserve Fund

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

### DLN: 93493103001070

OMB No 1545-0047 2008

Open to Public Inspection

Schedule R (Form 990) 2008

**Employer identification number** 

# **SCHEDULE R** (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. See separate instructions.

**Related Organizations and Unrelated Partnerships** 

Wartburg College 42-0680351 Part I Identification of Disregarded Entities (B) (C) Name, address, and EIN of disregarded entity Legal domicile (state Total income Direct controlling Primary activity End-of-year assets or foreign country) entity **Identification of Related Tax-Exempt Organizations** Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity (if section 501(c)(3)) or foreign country) McElroy - Wartburg Loan Fund Provide Student Loans for 100 Wartburg Blvd ΙA 501(c)(3) N/A Post Secondary Education Waverly, IA50677 42-1237616

Cat No 50135Y

<b>(A)</b> Name, address, and EIN of related organization	Prim	<b>(B)</b> nary activity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	<b>(F)</b> Share of total income		<b>(G)</b> Share of end-of- year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		( <b>D</b> ) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	( <b>G)</b> hare of l-of-yea assets	( <b>H)</b> Percentage r ownership		

Part V	Transactions with Related Organizations

Pa	rt V Transactions with Related Organizations				
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with c	one or more related organizations listed in Parts II-IV	'?		
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		<b>1a</b>		No
b	Gift, grant, or capital contribution to other organization(s)		1b		No
c	Gift, grant, or capital contribution from other organization(s)		1c		No
d	Loans or loan guarantees to or for other organization(s)		1d		No
e	Loans or loan guarantees by other organization(s)		1e		No
f	Sale of assets to other organization(s)		1f		No
g	Purchase of assets from other organization(s)		<b>1</b> g		No
h	Exchange of assets		1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		1i		No
i	Lease of facilities, equipment, or other assets from other organization(s)				No
k		on(s)	1k		No
	Performance of services or membership or fundraising solicitations by other organization	• •	11		No
	Sharing of facilities, equipment, mailing lists, or other assets	(-)	1m	1	No
	Sharing of paid employees		1n		No
0	Reimbursement paid to other organization for expenses		10	-	No
P	Reimbursement paid by other organization for expenses		1p		No
q	O ther transfer of cash or property to other organization(s)		1q		No
r	O ther transfer of cash or property from other organization(s)		1r	Yes	1
2	If the answer to any of the above is "Yes," see the instructions for information on who m		s and transaction thresholds		
	(A) Name of other organization(s)	<b>(B)</b> Transaction type(a-r)	<b>(C)</b> Amount Involved		
(1)	McElroy - Wartburg Loan Fund	R		113,8	55

Na Na	( <b>A)</b> ne of other organization(s)	Transaction type(a-r)	(C) Amount Involved
(1) McElroy - Wartburg Loan Fur	d	R	113,855
(2)			
(3)			
(4)			
(5)			
(6)			

### Part VI Unrelated Organizations Taxable as a Partnership

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

									_	
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		<b>(E)</b> Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1		r J
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	

Software ID: Software Version:

**EIN:** 42-0680351

Name: Wartburg College

### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa												
		Posit t	(C non (	chec	)				(E)	(F)		
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	( <b>D)</b> Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations		
BISHOP PAUL STUMME-DIERS , REGENT	10	Х						0	0	0		
BISHOP STEVEN ULLESTAD , REGENT	10	Х						0	0	0		
DOROTHY BOWEN , REGENT	10	Χ						0	0	0		
DR ARTHUR KING , REGENT	10	Χ						0	0	0		
DR DAROLD BEEKMANN , REGENT	10	Х						0	0	0		
DR GIL WESSEL , CHAIR, COMMITTEE ON BOAR	10	Х						0	0	0		
DR HANS-PETER BRODHUN , REGENT	10	Х						0	0	0		
DR MARILYN FLACHMAN , REGENT	10	X						0	0	0		
DR ROSS CHRISTENSEN , REGENT	10	Х						0	0	0		
ED ENGelBRECHT , REGENT	10	X						0	0	0		
FRED HAGEMANN , CHAIRMAN OF THE BOARD	10	Х						0	0	0		
GARY HOOVER , REGENT	10	Х						0	0	0		
GUNTER SCHUCHARDT , REGENT	10	Х						0	0	0		
JACK SALZWEDEL , REGENT	10	Х						0	0	0		
JIM LOVERIDGE , REGENT	10	Х						0	0	0		
JOANN KILGUS , VICE CHAIR, STUDENT LIFE	10	Х						0	0	0		
JON VOLKERT , VICE CHAIR, INSTITUTIONA	10	Х						0	0	0		
LIZ MATHIS , REGENT	10	Χ						0	0	0		
LOIS O'ROURKE, REGENT	10	Χ						0	0	0		
MARK BALDWIN , REGENT	10	Х						0	0	0		
MICHAEL MCCOY, REGENT	10	Х						0	0	0		
OSCAR SCOFIELD , REGENT	10	Х						0	0	0		
RACHEL RIENSCHE , VICE CHAIR, ACADEMIC AFF	10	X						0	0	0		
RACHELLE JOHNSON , REGENT	10	Х						0	0	0		
RAY MCCASKEY , VICE CHAIR, BUSINESS AND	10	Х						0	0	0		
ROBERT SEVERSON , REGENT	10	Х						0	0	0		
RUTH BAHE-JACHNA , VICE CHAIR, ENROLLMENT M	10	Х						0	0	0		
WILLIAM HAMM , Interim President	40 00	Х		Х				109,831	0	11,549		
John R OHLE , President	40 00	Х		Х				410,924	0	16,518		
DEBORAH L LOERS , VICE- PRESIDENT	40 00			х				107,798	0	23,906		

Form 990, Part VII - Section Aaa

<b>(A)</b> Name and Title	(B) Average hours per week		on a Institutional Trustee	chec pply	)	Highest compensated employee	Former	(D)  Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
EDITH WALDSTEIN , VICE- PRESIDENT	40 00			х				119,033	0	21,224		
FEROL J MENZEL , VICE-PRESIDENT	40 00			Х				132,738	0	14,773		
GARY GRACE , VICE-PRESIDENT	40 00			Х				117,472	0	22,254		
RICHARD SEGGERMAN , CBO and Treasurer	40 00			х				77,752	0	21,438		
SCOTT C LEISINGER , VICE- PRESIDENT	40 00			х				114,807	0	20,013		