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Form **990**

Department of the Treasury

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

Open to Public

	revenue				24 2000		·	Inspection
			endar yea	r, or tax year beginning 07-0 C Name of organization	01-2008 and ending 06-30-2009)	D Employer ide	ntification number
	eck ıf a _l dress ch		Please use IRS	Columbia College			57-032491	
		lange	abel or	Doing Business As			ımber	
	me cha	t	orint or Type. See				(803) 786-3	2600
Init	tial retu		Specific Instruc-		x if mail is not delivered to street addres	ss) Room/suite	G Gross receipt	
Г Теі	mınatıo	on t	ions.	1301 Columbia College Drive			d divisi recapi	φ 31,230,300
┌ Am	ended	return		City or town, state or country,	and ZIP + 4			
	plication	n pending		Columbia, SC 29203				
		_	F Nan	ne and address of Principal (Officer	W/=\	<u> </u>	•
			· Nun	ne and address of thinespan	o meer	affilia	s a group return tes?	TYes ▼ No
T Ta	y-eyem	nnt status	▼ 501(c)) (3) ◄ (insert no))(1) or		affiliates include	
)(1) (1) (1) (2)			See instructions)
) W	eb sit	e: 🟲 www	columbia	collegesc edu		H(c) Grou	p Exemption Nu	mber 🟲
			-			1. 4. 6.5	1054	
К Тур	e of org	ganization J	Corporat	tion trust association oth	er 🟲	L Year of For	mation 1854 M	State of legal domicile SC
Pa	rt I	Summ						
	1			ie organization's mission or i	_			
3			_		unities that develop students' ca		-	d expression, life-long
€		learning,	acceptan	ice of personal responsibility	y, and commitment to service and	d social justic	e	
≣	_			C 11			5 0/ - 6 - 1 1	
Governance					ued its operations or disposed of			
	3		_		ody (Part VI, line 1a)		_	27
8	4			_	governing body (Part VI, line 1b)		27
Ě	5			nployees (Part V, line 2a)			_	785
Activities &	6			olunteers (estimate if necess			6 _	200
4		_			Part VIII, line 12, column (C)	•	_	0
	ь	Net unrel	ated busi	iness taxable income from F	orm 990-T, line 34		7b	
						Prio	r Year	Current Year
gı.	8			d grants (Part VIII, line 1h)		5,911,106	4,180,329	
Ravenue	9	Program	service	revenue (Part VIII, line 2g)			27,341,952	28,085,267
946	10				nes 3, 4, and 7d)		1,434,706	-270,989
ш.	11			art VIII, column (A), lines 5			310,242	456,870
	12	Total rev	venue—a	dd lines 8 through 11 (must	equal Part VIII, column (A), line	•	35,021,010	32,451,477
	13		and simila	ar amounts paid (Part IX, co	lumn (A.) lines 1–3)		9,495,812	9,915,954
	14			or for members (Part IX, colu	,		3,133,012	0
	15				efits (Part IX, column (A), lines 5	_		
\$	15	10)	, other co	mpensation, employee bene	ents (Fart IX, Coldinii (A), lines 3		13,464,793	14,440,170
Expenses	16a	Professi	onal fund	iraising fees (Part IX, colum	n (A), line 11e)			0
Ě	ь	(Total fun	draising exi	penses, Part IX, column (D), line 2	os 681,217			
Ш	17			(Part IX, column (A), lines 1			10,105,010	8,764,896
	18				al Part IX, line 25, column (A))		33,065,615	33,121,020
	19			venses Subtract line 18 from			1,955,395	-669,543
<u>የ</u>						Beginni	ng of Year	End of Year
90 G	20	Totalac	sate (Da	rt X, line 16)			57,365,581	52,180,401
33.4E							, ,	
Not Assets or Fund Balances	21		•	Part X, line 26)			16,408,573	16,565,646
	22			nd balances Subtract line 21	l from line 20		40,957,008	35,614,755
Pai	rt II		ture Blo					
					ned this return, including accompanying of preparer (other than officer) is based			
Plea	ıse	*****		,		1	05-14	····- ····, ·····- ··- · · · · · · ·
Sigr		I B	ure of office	 er		Date	03 14	
Here	е	lohn D	Jones VP-	-Finance				
			or print nam					
		Preparer's	.		Date	heck if	Preparer's PTIN (See Gen Inst)
Paid		signature	William	n T Pouncey	s	elf-		, ,
	arer's	Eleman'-	F /	c k 1 W HUNT AND COMPANY	e	mpolyed 🕨 🦳		
Use (ıf self-emp		P			EIN Þ	
556	J.113	address, a	nd ZIP + 4	PO BOX 265			Dhana	02) 254 0406
				COLUMBIA, SC 292020265			Phone no 🕨 (8	U3) Z54-8196
May	the IR	S discuss	this retu	rn with the preparer shown a	bove? (See instructions)			□Yes □No

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

1	Briefly describe the organization's mission Columbia College provides educational opportunities that develop students' capacity for critical thought and expression, life-long learning, acceptance of personal responsibility, and commitment to service and social justice
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting or make significant changes in how it conducts any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 10,025,478 including grants of \$) (Revenue \$) Instruction - Expenditures for academic instructional departments within the College
4b	(Code) (Expenses \$ 3,655,153 including grants of \$) (Revenue \$) Student Services - Major expenditures in this office are for the Admissions Office, Financial Aid Office, and Registrar's Office
4c	(Code) (Expenses \$ 3,057,767 including grants of \$) (Revenue \$ 3,673,368) Auxiliary Enterprises - Expenditures for the operation of student housing, food services, telephone system, and campus shop
4d	Other program services (Describe in Schedule O) (Expenses \$ 11,242,199 including grants of \$ 9,915,954) (Revenue \$)
4e	Total program service expenses \$ 27,980,597 Must equal Part IX, Line 25, column (B).

art IV	Checklist of	Required	Schedules
	CIICCRIISE CI	iic quii c u	Scilcadics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> 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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	4	Yes	
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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,"			N o
	complete Schedule D, Part IV	9		
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	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, 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		No
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		Νο
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		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
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		No
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	21		No
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		No
b	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		No
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		N o
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		No
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		No

Part VI . . .

Part IV Checklist of Required Schedules (Continued)

			res	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		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	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		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
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? If "Yes," complete Schedule N, Part II	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		Νο
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	37		Νο

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		Yes	No
·			
of U.S. Information Returns. Enter -0- if not applicable			
1a	68		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and	•	V	
gaming (gambling) winnings to prize winners?	<u>1c</u>	Yes	<u> </u>
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	785		
b If at least one is reported in 2a, did the organization file all required federal employment tax returns		Yes	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year coverage.	ered by this	Tes	<u> </u>
return?	3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			No
At any time during the calendar year, did the organization have an interest in, or a signature or other over, a financial account in a foreign country (such as a bank account, securities account, or other account)?		Yes	
b If "Yes," enter the name of the foreign country ^{CJ}			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E Financial Accounts.	Bank and		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	·? 5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	nanation?		No
	35		
c If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Tax Shelter Transaction?	ing Prohibited 5c		No
6a Did the organization solicit any contributions that were not tax deductible?	6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?	butions or gifts 6b		No
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 more?	5 or 7a		No
f b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7ь		No
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it			l
file Form 8282?			No
d If "Yes," indicate the number of Forms 8282 filed during the year	0		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a benefit contract?	a personal		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor	ntract? 7f		No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as require	ed? 7g		No
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098			
required?	<u>7h</u>		No
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization excess business holdings at any time during the	anization, have		
year?	8		No.
9 Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		No
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations Enter			
a Gross income from members or shareholders			
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 in lieu of Form 10	041? 12 a		No
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Section A.	Governing	Body and	Management	
				Ξ

			Yes	NO
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 27			
Ь	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 business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νo
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?	9Ь		No
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		No
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

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		Νο
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		Νo
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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		Νo
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		Νο

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. value values values values values.
- 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 John D Jones

1301 Columbia College Dr Columbia, SC 29203 (803) 786-3699

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		(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

				(tion that a			all			(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trust on 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)	am co orga	Estimated amount of other compensation from the organization and related organizations	
_													
1b	Total			•				►	767,025	5			103,169
2	Total number of individuals (including compensation from the organization		a) who	recei	ved	mo	re thar	1 \$ 1	00,000 ın reportabl	е			
	•												
												V	
3	Did the organization list any former on line 1a? <i>If "Yes," complete Schedu</i>									ated employee	3	Yes	No No
3		<i>lle J for such</i> s the sum of	<i>individi</i> reporta	<i>ial</i> . ble c	 omp	ens	ation	• and	other compensation	n from the			
	on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organizatio	the J for such s the sum of ns greater th	reporta nan \$15	ble c 0,00	omp 07 /	ens [f")	ation /es," co	and ompi	other compensation lete Schedule J for su	n from the	3 4	Yes	
4	on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organizatio individual	the J for such s the sum of ns greater th eive or accru	reportanan \$15	ble c 0,00	omp 02 i	ens [f ") •	ation /es," co • • m any	and ompi	other compensation lete Schedule J for su	from the			
4 5	on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organizatio individual	Ile J for such s the sum of ns greater th envelope or accrus, "complete s	reportanan \$15	ble c 0,00	omp 02 i	ens [f ") •	ation /es," co • • m any	and ompi	other compensation lete Schedule J for su	from the	4		N o
5	on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organization individual	s the sum of ns greater the sum of ns greater the sum of ns greater the sum of the sum o	reportanan \$15 ue comportanan secomportanan secomportana secompo	ble c 0,00 ensa	omp 10? I	ens If ") fro th p	ation Yes," co many erson	and ompi e unre	other compensation lete Schedule J for su 	from the	4		N o
4 5	on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, is organization and related organization individual	s the sum of ns greater the sum of ns greater the sum of ns greater the sum of the sum o	reportanan \$15 ue comp Schedule	ble c 0,00 ensa	omp 10? I	ens If ") fro th p	ation Yes," co many erson	and ompi e unre	other compensation lete Schedule J for su	from the	5		No
4 5	on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, is organization and related organization individual	s the sum of ns greater the sum of ns greater the sum of ns greater the sum of the sum o	reportanan \$15 ue comp Schedule	ble c 0,00 ensa	omp 10? I	ens If ") fro th p	ation Yes," co many erson	and ompi e unre	other compensation lete Schedule J for su	for services te than	5	Yes (C	No
4 5	on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, is organization and related organization individual	s the sum of ns greater the sum of ns greater the sum of ns greater the sum of the sum o	reportanan \$15 ue comp Schedule	ble c 0,00 ensa	omp 10? I	ens If ") fro th p	ation Yes," co many erson	and ompi e unre	other compensation lete Schedule J for su	for services te than	5	Yes (C	No

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated can	npaigns 1a					
mts Ints	b	Membership d						
Contributions, gifts, grants and other similar amounts	с	Fundraising ev	1b /ents 1c					
きき	d	Related organ	ızatıons1d					
ξ, Ē	e	Government grar	its (contributions) 1e	1,509,815				
ution her s	f		tions, gifts, grants, and not included above	2,289,025				j j
	g	Noncash cont	1f rıbutıons ıncluded ın					
<u>a</u> O		lines 1a-1f \$						
	h	Total (Add lin	es 1a-1f) . . .		4,180,329			
a)				Business Code				
Ĕ	2a	Tuition and fees		611,600	24,406,065	24,406,065		
£e. ¥e	Ь	Interest on loans	receiva	611,600	5,834	5,834		
- Se	С	Auxiliary enterpri	ses	611,600	3,673,368	3,673,368		
	d							
S S	e							
Program Serwoe Revenue	f	All other prog	ram service revenue					
_ <u>~</u>	g	> \$ 28,085,26						
	3		come (including divi	·	450,851			450,851
			imounts)	▶				+30,031
	4	Income from inve	estment of tax-exempt be	ond proceeds	0			
	5	Royalties .			0			
			(ı) Real	(11) Personal				
	6a	Gross Rents	129,403					
	Ь	Less rental expenses						
	C	Rental income or (loss)	129,403 ome or (loss)		129,403			129,403
	d	Net rental inco	(i) Securities	(II) O ther	129,403			129,403
	7a	Gross amount	1,085,049	(II) O thei				
		from sales of assets other						
	ь	than inventory Less cost or	1,804,603	2,286				
		other basis and sales expenses Gain or (loss)	-719,554	-2,286				
	c d	Net gain or (lo	ss)	.	-721,840			-721,840
	8a	Gross income	from fundraising					
		events (not in \$	cluding					
ne		of contribution	ns reported on line					
Other Revenue		1c) See Part Attach Schedul	IV , line 18 <i>e G if total exceeds</i>					
æ			а					
<u> </u>	b	Less directe	xpensesb					
₹	С	Net income or	(loss) from fundrais	ing events ▶	0			
	9a	Gross income activities See	from gaming part IV , line 19					
		Complete Schere exceeds \$15,00						
		,,	а					
	ь	Less directe	xpensesb					
	С		(loss) from gaming a	activities ►	0			
	10a	Gross sales o returns and al	f inventory, less lowances					
	ь	Less cost of	a goods sold b					
	С		(loss) from sales of	ınventory►	О			
		Miscellaneou		Business Code				
	11a	Other			327,467	327,467		
	ь							
	С							
	d	All other reve	nue					
	e	Total. Add line						
	12	Total Davis	N dd line - 4 li 0 - 0	\$ 327,467	32,451,477	28,412,734		-141,586
	12	8c,	. Add lines 1h, 2g, 3		32,731,777	20,712,734		171,300

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) organizations must complete column (A) but are not re				
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	·		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	9,915,954	9,915,954		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0	, ,		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	941,060		941,060	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	10,587,113	9,144,565		358,549
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	760,031	588,366	142,009	29,656
9	Other employee benefits	1,344,376	1,133,962	167,527	42,887
10	Payroll taxes	807,590	644,114	139,327	24,149
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	41,643		41,643	
c	Accounting	58,138		58,138	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	114,687	106,483	4,955	3,249
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	1,289,209	1,181,793	107,416	
17	Travel	220,790	182,267	21,383	17,140
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	85,776	59,668	26,349	-241
20	Interest	513,356	491,934	21,422	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,302,402	1,237,282	65,120	
23	Insurance	394,008		394,008	
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	Supplies	333,047	227,657	63,529	41,861
ь	Repairs & Maintenance - Buildi	466,101	426,117	39,984	
С	Other	496,078	223,686	263,100	9,292
d	Operations	1,246,630	1,045,301	194,201	7,128
e	Food Service Contracts	925,042	925,042		
f	All other expenses	1,277,989	446,406	684,036	147,547
25	Total functional expenses. Add lines 1 through 24f	33,121,020	27,980,597	4,459,206	681,217
26	Joint Costs. Check 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				

Dart V	Balance	Shoot
Part X	l Balance	Sheet

					(A) Beginning of year		(B) End of year				
	1	Cash—non-interest-bearing			3,700		3,700				
	2	Savings and temporary cash investments			264,591	2	328,748				
	3	Pledges and grants receivable, net			3,647,452	3	2,973,933				
	4	Accounts receivable, net									
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5	0				
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of 3				6	0				
	7	Notes and loans receivable, net			1,814,818	7	1,896,039				
	8	Inventories for sale or use			45,147	8	38,496				
Ø	9	Prepaid expenses and deferred charges			131,882	9	86,665				
ssets	10a	Land, buildings, and equipment cost basis		1							
⋖		, 3, 11	10a	52,723,63	30						
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь	23.973.4	38 28,181,642	100	28,750,192				
	11	Investments—publicly traded securities	TOD	20,070,40	21,152,770		15,869,917				
		·			656,523		803,932				
	12	Investments—other securities See Part IV, line 11 Complete Pa Schedule D			030,323	12	,				
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Section 11 (Section 2) and the section 2 (Section 2) and th$	art VII	I		13	0				
	14	Intangible assets				14	0				
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			259,550	15	171,389				
	16	Total assets. Add lines 1 through 15 (must equal line 34)			57,365,581	16	52,180,401				
	17	Accounts payable and accrued expenses .			752,103	17	373,953				
	18	Grants payable				18					
	19	Deferred revenue			105,604	19	125,503				
_	20	Tax-exempt bond liabilities			8,300,000	20	7,900,000				
<u> </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									
Ë		persons Complete Part II of Schedule L		•		22					
	23	Secured mortgages and notes payable to unrelated third parties			4,599,703	23	5,321,907				
	24	Unsecured notes and loans payable				24					
	25	Other liabilities Complete Part X of Schedule D			2,651,163	25	2,844,283				
	26	Total liabilities. Add lines 17 through 25			16,408,573	26	16,565,646				
ر.		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete li	nes 27							
Balance		through 29, and lines 33 and 34.									
<u>a</u>	27	Unrestricted net assets			21,869,101	27	16,411,802				
8	28	Temporarily restricted net assets			3,065,849	28	2,648,017				
Ξ	29	Permanently restricted net assets			16,022,058	29	16,554,936				
or Fund		Organizations that do not follow SFAS 117, check here ► an lines 30 through 34.	d com	plete							
	30	Capital stock or trust principal, or current funds				30					
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31					
As	32	Retained earnings, endowment, accumulated income, or other fu	nds			32					
Net	33	Total net assets or fund balances			40,957,008	33	35,614,755				
z 	34	Total liabilities and net assets/fund balances			57,365,581	34	52,180,401				
Da	~4 VT	Financial Statements and Reporting									

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

DLN: 93493134024210

Employer identification number

OMB No 1545-0047

Public Charity Status and Public Support

Department of the Treasury Internal Revenue Service

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

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

Colum	bia Col	llege							022401	_		
Рa	rt I	Reason	for Public C	harity Status (to be co	mnleted	hy all or	nanizatio		-032491 Instruct			
				ation because it is (Please					Instruct	.10113)		
1	Ť			nurches, or association of ch					(A)(i).			
2	ⅳ	•		t ion 170(b)(1)(A)(ii). (Atta								
3	Г			e hospital service organizati			tion 170(b)(1)(A)(i	i ii). (Attac	h Schedu	le H)	
4	Г	A medical	research organi	zation operated in conjuncti	on with a l	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the	
		hospital's	name, city, and	state								
5	Γ	An organiz	ation operated 1	or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unit desc	rıbed ın	
		Section 17	0(b)(1)(A)(iv).	(Complete Part II)								
6	Г	A federal, s	state, or local g	overnment or governmental	unıt descr	ıbed ın S e	ction 170	(b)(1)(A)	(v).			
7	Γ	An organız	ation that norm	ally receives a substantial p	art of its s	support fro	om a gove	rnmental ı	ınıt or fron	n the gene	eral public	2
		described	n Section 170(I	o)(1)(A)(vi) (Complete Par	tII)							
8	Γ	A commun	ıty trust descrit	oed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)					
9	Γ	An organız	ation that norm	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ns, membe	rship fees	s, and gro	ss
		receipts fro	om activities re	lated to its exempt functions	s—subject	to certan	n exceptio	ns, and (2) no more	than 331,	/3% of	
		ıts support	from gross inv	estment income and unrelate	ed busines	s taxable	income (less sectio	on 511 ta:	x) from bu	sınesses	
		acquired b	y the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complet	e Part III)			
10	Г	An organız	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See S e	ection 509((a)(4). (S	ee instruc	tions)	
11		one or mor	e publicly suppo	and operated exclusively fo orted organizations describe	d in section	on 509(a)	(1) or sec	tıon 509(a	a)(2) See	•		
			ype I b	type of supporting organiza Type II c	Type III				⊓ d	□ Tvpe	iII - Otl	her
e	Г		• •	rtify that the organization is			-					
	·	•	-	agers and other than one or			•			•		
_		section 50										
f		check this		d a written determination fro	om the IRS	tnat it is	a Type I,	i ype II o	r i ype iii	supportii	ng organiz	zation,
g				as the organization accepte	d any gift	or contrib	utıon from	any of the	<u> </u>			,
		following p										
			•	r indirectly controls, either a		_	th persons	describe	d in (ii)		Yes	No
			· -	ng body of the the supported	_	tion?				11g		
		• •		erson described in (i) above						11g	_	<u> </u>
_		• •		ty of a person described in (. , , ,					11g((111)	<u> </u>
h		Provide the	tollowing infori	mation about the organizatio	ns the org	janization	supports					
	/il NI:	ame of	(ii) EIN	(iii) Type of organization	/is/\ T	s the	(v) Did v	ou notify	(vi) 1	s the	(vii) A n	nount of
		orted	(") [1 1	(described on lines 1-9	, , ,	ation in		nızatıon		ation in	supp	
		nization		above or IRC section	_	listed in		i) of your	col (i) c	rganızed	'	
				(See Instructions)) your governing suppo				oort?	ın the	US?		
							4					
					Yes	No	Yes	No	Yes	No	+	
										1	+	
											1	
										-	+	
										1	+	
								1				

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) 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					 		
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) 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 stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
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 stop here. The organization qualifies a				,			▶ □
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				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
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	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	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) 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						
С	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) 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 stop here						▶ □
	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	Supplemental Information. 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

Software ID: Software Version:

EIN: 57-0324915

Name: Columbia College

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	1										
		(C) Position (check all that apply)							(2)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Thad Henry , Sp Asst to Pres	40 00					Х		132,809	0	19,185	
Ronald White , VP-Enroll Mgmt	40 00			Х				107,977	0	19,671	
Rita Eldridge Vandiver , Trustee		Х						0	0	0	
Rev Quay W Adams , Trustee		Х						0	0	0	
Rev Lee C Bines , Trustee		Х						0	0	0	
Rebecca Laffitte , Trustee		Х						0	0	0	
Patricia Stone Wood , Trustee		Х						0	0	0	
Nancy Cummings Humphries , Trustee		Х						0	0	0	
Mary Cantado , Trustee		Х						0	0	0	
Marion A Knox Jr , Trustee		Х						0	0	0	
Marguerite Willis , Trustee		Х						0	0	0	
M Edward Sellers , Trustee Emeritu		Х						0	0	0	
Leonard L Price , Trustee		Х						0	0	0	
June Johnson Bradham , Trustee		Х						0	0	0	
Johnnie Cordell Breed , Trustee		Х						0	0	0	
John H Lumpkın Jr , Trustee		Χ						0	0	0	
John D Jones , VP-Finance	40 00			Х				132,436	0	22,369	
Joe R Blanchard , Trustee		Х						0	0	0	
Jim B Apple , Trustee		Х						0	0	0	
Jeffrey Selig , Trustee		Х						0	0	0	
Jean E Duke , Trustee		Х						0	0	0	
James C Meadors , Trustee		Х						0	0	0	
G Larry Wilson , Trustee		Х						0	0	0	
Ellen Claussen Davıs , Trustee		Х						0	0	0	
Dr Laurie B Hopkins , Provost	40 00			Х				107,981	0	11,882	
Dr Caroline Whitson , President	40 00			Х				186,186	0	24,342	
Dr Annette Williams Lynn , Trustee		Х						0	0	0	
Dalhı Myers , Trustee		Х						0	0	0	
Cynthia Pryor Hardy , Trustee		Х						0	0	0	
Claire Wilson Yarborough , Trustee		Х	<u> </u>					0	0	0	

Form 990, Part VII - Section Aaa

		(C) Position (check all that apply)						(-)	(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Prector	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	
Charles P Austin Sr , Trustee		Х						0	0	0	
Carol Rich Storey , Trustee		Х						0	0	C	
Bıshop Mary Vırgınıa Taylor , Trustee		Х						0	0	(
Barbara Parks , VP-Advancement	40 00			Х				99,636	0	5,720	

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	me of the organization			Employer ider	ntıfıcatıon num	ber
اں۔	lumbia College			57-0324915		
ar		y all organizations exem				
	<u>-</u>	e the instructions for Schedul	•			
		ganızatıon's dırect and ındırect po	ilitical campaign act	ivities in Part IV		
	Political expenditures				\$	
	V olunteer hours					
a r	t I-B To be completed by for Schedule C for de	y all organizations exempetails.)	pt under section	1 501(c)(3). (See the	instructions	
	Enter the amount of any excise	tax incurred by the organization	under section 4955		\$	
	Enter the amount of any excise	e tax incurred by organization mar	nagers under sectioi	n 4955	\$	
	If the organization incurred in a	a section 4955 tax, did it file Forr	n 4720 for this year	?	┌ Yes	s
a	Was a correction made?				┌ Yes	s
,	If "Yes," describe in Part IV					
a r		y all organizations exemptor Schedule C for details.)	pt under section	n 501(c), except sec	tion 501(c)	(3).
	Enter the amount directly expe	nded by the filing organization for	section 527 exemp	ot function activities	\$	
	Enter the amount of the filing o 527 exempt funtion activities	rganızatıon's ınternal funds contr	ıbuted to other orga	nizations for section	\$	
	Total of direct and indirect exe 1120-POL, line 17b	mpt function expenditures Add Ii	nes 1 and 2 and ent	er here and on Form	\$	
	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes	i
	were made Enter the amount p political contributions received	nd Employer Identification Numbe paid and indicate if the amount wa I and promptly and directly delive action committee (PAC) If addition	s paid from the filing red to a separate po	ı organızatıon's own ınterna Hitical organızatıon, such a	al funds or were as a separate	
(a) Name		(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount contribution and prom directly del separate organizatio enter	.s receive ptly and overed to a political n Ifnone

(election under sec	tion 501(h)). (See the instructions for Schedule C for de		768		
<u> </u>					
Limits on Lo	bbying Expenditures—	(a) Filing Organization's Totals	(b) A ffiliated Group Totals		
Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)				
Total lobbying expenditures to influe	nce a legislative body (direct lobbying)				
Total lobbying expenditures (add line	es 1a and 1b)				
Other exempt purpose expenditures					
Total exempt purpose expenditures	(add lines 1c and 1d)				
columns—					
or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000				
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
Over \$17,000,000	\$1,000,000				
Grassroots nontaxable amount (ente	r 25% of line 1f)				
Subtract line 1g from line 1a Enter -	0- if line g is more than line a				
i Subtract line 1f from line 1c Enter - 0 - if line f is more than line c					
If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form 4720 repo	orting	┌ Yes ┌ No		
	Check If the filing organization Check If the filing organization Limits on Low (The term "expenditures to influe Total lobbying expenditures to influe Total lobbying expenditures (add line Other exempt purpose expenditures Total exempt purpose expenditures to Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 Grassroots nontaxable amount (enter Subtract line 1g from line 1a Enter Subtract line 1f from line 1c Enter If there is an amount other than zero	(election under section 501(h)). (See the instructions for Schedule C for detect of the filing organization belongs to an affiliated group (heck of the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$225,000 plus 10% of the excess over \$1,500,000 Over \$17,000,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a Enter -0 - if line g is more than line a Subtract line 1g from line 1c Enter -0 - if line g is more than line a Subtract line 1ffrom line 1c Enter -0 - if line f is more than line 2 If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reported the subtract line 1 file form 1 file Form 4720 reported the subtract line 1 file form 1 file Form 4720 reported the subtract line 1 file form 2 files files form 2 files files form 4720 reported the subtract line 1 files files files files files form 4720 reported the subtract line 1 files	Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$1,000,000 but not over \$1,000,000 Ver \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of the excess over \$1,500,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of the excess over \$1,500,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of line 1f) Subtract line 1g from line 1a Enter -0 - if line g is more than line a Subtract line 1ffrom line 1c Enter -0 - if line f is more than line c If there is an amount other than zero on either line 1 in or line 1, did the organization file Form 4720 reporting		

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
с	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line d, column (e))								
f	Grassroots lobbying expenditures								

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Part II-B	To be completed by	organizations exempt under section 501(c)(3) that have NOT filed Form	
	5768 (election unde	r section 501(h)). (See the instructions for Schedule C for details.)	

		(a)		(b)		
		Yes	No	4	A moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	V olunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes				
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			1	6,317
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo			
i	Other activities If "Yes," describe in Part IV		Νo			
j	Total lines 1c through				1	6,317
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νο			
b	If "Yes" enter the amount of any tax incurred under section 4912					
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo			
Par	t III-A To be completed by all organizations exempt under section 501(c)(4), se section 501(c)(6). (See the instructions for Schedule C for details.)	ection	501(c)(5), or	-
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), se section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No question 3 is answered "Yes." (See the instructions for Schedule C for details."	" OR i				
1	Dues, assessments and similar amounts from members		1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politica	,				

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
а	Current Year	2a \$
b	Carryover from last year	2b \$
c	Total	2c \$
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)

Ident if ier	Return Reference	Explanation

5 \$

Part IV Supplemental I	nformation	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

	11.10101100 0011100		_				
	me of the organization lumbia College		Emplo	yer ident	ification numbe	er	
			57-0	324915			
Pa	rt I Organizations Maintaining Donor Ac		ınds o	r Accou	ınts. Comple	te ıf	the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(h) Funds a	and other accou	nts	
1	Total number at end of year	(a) Bollot advised fallas	(1)	, r unus c	ina other accou	1103	
2	Aggregate Contributions to (during year)						
3	Aggregate Grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advis	e d	☐ Yes	Г	No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	efit of the donor or donor advisor or other			☐ Yes	Г	No
Pa	rt III Conservation Easements. Complete	<u>if the organization answered "Yes" to</u>	Form	990, Pa	rt IV, line 7.		
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreati Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of cer	rtıfıed hı	storic str	ructure	a	
	on the last day of the tax year		ı				
_					d at the End of	the	Year
a	Total number of conservation easements			2a			
b	Total acreage restricted by conservation easements			2b			
c	Number of conservation easements on a certified hi	` ,		2c			
d	Number of conservation easements included in (c) a	acquired after 8/17/06	l	2d			
3	Number of conservation easements modified, transfe the taxable year ►	rred, released, extinguished, or terminated	d by the	organıza	tion during		
4	Number of states where property subject to conserva	ation easement is located 🕨					
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		itions, a	nd	☐ Yes	Γ	No
6	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►				
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ar 🟲 \$				
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sect	tion		☐ Yes	Γ	No
9	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial nents	stateme	ents that	describes		
Paı	TEXT Complete if the organization answered "		or Oth	er Simi	lar Assets.		
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	h ın furt			≘,	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research in					

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

(i) Revenues included in Form 990, Part VIII, line 1

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

-\$

Cat No 52283D

Part	Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	<u>cal Treası</u>	ires, or Othe	<u>r Similar</u>	· Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	owing that ar	e a significant u	ise of its co	llection	I	
а	Public exhibition		d	Γ	Loan or exc	hange programs	;			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how	v the	/ further the	organization's ex	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t						nılar	Γ,	Yes	┌ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					anızatıon answ	ered "Yes	" to Fo	rm 9	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	lary	for c	ontributions	or other assets	not	Γ.	Yes	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following table	1				T			
								A mou	nt	
c	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo		21?					Γ,	Yes	│ No
	If "Yes," explain the arrangement in Part XIV									
Pai	t V Endowment Funds. Complete	f the organization (a)Current Year		were)Prior		Form 990, Par wo Years Back (d)			NEQUE V	oars Back
1a	Beginning of year balance	22,912,419	(D	PHOL	rear (C)	wo fears back (d)	Tillee rears i	back (e)	Four to	ears back
ь	Contributions	521,610								
c	Investment earnings or losses	-4,543,529								
d	Grants or scholarships	1,121,512								
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	17,768,988								
2	Provide the estimated percentage of the yea	r end balance held as	;							
а	Board designated or quasi-endowment	4 370 %								
ь	Permanent endowment > 95 630 %									
c	Term endowment ▶									
3a	Are there endowment funds not in the posses	ssion of the organizat	ion t	:hat a	re held and a	administered for	the			
	organization by								Yes	No
	(i) unrelated organizations			•				3a(i)		No
	(ii) related organizations							3a(ii)	<u> </u>	No.
ь 4	If "Yes" to 3a(II), are the related organizatio Describe in Part XIV the intended uses of th	•						3b		No
	t VI Investments—Land, Buildings					art V. lina 10				
FeI	Threstments—Land, Buildings	s, and Equipmen	L. 3			•				
	Description of investment				Cost or other s (investment)	(b) Cost or other basis (other)	(c) Deprec	iation	(d) Bo	ok value
1a	and					1,501,212				1,501,212
Ь	Buildings					38,607,440	13,46	59,256	2	5,138,184
c l	easehold improvements									
d I	Equipment					12,614,978	10,50	04,182		2,110,796
	Other									
Tota	.Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, columi	n (B),	, line	10(c).)		▶		2	8,750,192
e (Other	orm 990, Part X, columi	• n (B),	, line	10(c).)			04,182 ule D (F	2	28,75

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation · year market value
Financial derivatives and other financial products			
Closely-held equity interests			
<u>O ther</u>			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	e Form 990. Part X. line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-	year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13) Part IX	no 15		
Part IX Other Assets. See Form 990, Part X, II (a) Descri			(b) Book value
(4) 500011	peron		(B) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15.)		
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
US Government advances	1,754,817		
O bligation under split-interest agreemen	345,072		
O bligation under interest rate swap	577,889		
Funds held for others	166,505		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	2,844,283		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	32,451,477
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	33,121,020
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-669,543
4	Net unrealized gains (losses) on investments	4	-4,448,796
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-223,914
9	Total adjustments (net) Add lines 4 - 8	9	-4,672,710
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-5,342,253
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial		23,255,077
	statements	1	
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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-9,915,954
3	Subtract line 2e from line 1	3	33,171,031
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) 4b -719,554		
c	Add lines 4a and 4b	4c	-719,554
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	32,451,477
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	28,597,330
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25]	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	5,392,264
3	Subtract line 2e from line 1	3	23,205,066
4	A mounts 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) 4b 9,915,954]	
c	Add lines 4a and 4b	4c	9,915,954
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	33,121,020
Pai	rt XIV Supplemental Information		

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 XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Scholarships and other student aid \$9915954
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Net realized loss on sale of investments \$719554 Net unrealized loss on investments \$4448796 Net unrealized loss on int rate swap \$204892 Change in value of split-int agreements \$19022
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Net Unrealized Loss on Interest Rate Swap \$ -204892 Change in Value of Split-Interest Agreements \$ -19022
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	To support educational programs and scholarships for students

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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.

Name of the organization **Employer identification number** Columbia College 57-0324915 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? Yes 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 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 Yes The nondiscriminatory policy is on the Columbia College website, www.columbiasc.edu. All solicitations encourage prospective students to visit the website for more information 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 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 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h h Other extracurricular activities? Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **h** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 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 CB 587, covering racial nondiscrimination? If "No," attach an explanation

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OMB No 1545-0047

2008

Open to Public

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

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Inspect ion

Name of the organization						Employer identif	ication number
Columbia College						57-0324915	
Part I General Infor	mation on Gra	nts and Assistance)				
 Does the organization mathematical the selection criteria use Describe in Part IV the organization 	ed to award the grar	nts or assistance?					✓ Yes N
Part IV and Sch	IV, line 21 for ar iedule I-1 if addit	y recipient that rece	eived more than \$5,0		tes. Complete if the of if no one recipient rec		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of sec	tion 501(c)(3) and	government	ı	ı	I		
organizations		-			•	_	

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) Number of recipients	(c)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
Scholarships and Grants	914	9,915,954			

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

			-
See	Additiona	ıl Data	Table

Ident if ier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		All grants are awarded only after confirming a student's eligiblility - consistent to all grant criteria. Each scholarship and grant is reconciled at the end of each semester and award year to verify students maintain eligibility. Reports monitoring GPA, citizenship, federal and institutional eligibility are used to award and ensure reconciliation for each fund

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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 **Employer identification number** Columbia College 57-0324915

					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	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "			1b		No
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t					
	Compensation committee	고	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
ı	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?					Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					Νo
c	Participate in, or receive payment from, an equity-b	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, lıne 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					
5	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 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		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		No

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	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Thad Henry	(1) (11)	132,809			13,302	5,883	151,994	
John D Jones	(1) (11)	132,436			13,460	8,909	154,805	
Dr Caroline Whitson	(1) (11)	186,186			18,113	6,229	210,528	
	(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
Line 1b	Part I, Line 1b Reason for not following policy regarding payment provisions for expenses	No written policy
Line 1a	1a Relevant	1a The College pays dues and membership fees to a social club on behalf of its president. This membership provides a venue for College related events. It is included in the president's employment contract which is approved by the trustees 1b. The College does not have a written policy regarding the use of social clubs, but has an understanding that it is to be used for College business and events.
_		
_		

Non-Cash Contributions

OMB No 1545-0047

Department of the Treasury

SCHEDULE M

(Form 990)

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Inspection Internal Revenue Service Name of the organization Employer identification number Columbia College 57-0324915 Part I Types of Property

		Check If applicable	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g	Method of do reven	etermı	nıng	
1	Art—Works of art	X	1	14,000	A ppraisal			
2	Art—Historical treasures .			,				
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
	Cars and other vehicles							
7	Boats and planes							
	Intellectual property		_					
	Securities—Publicly traded .	X	5	22,089	F M V			
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (describe <u>Piano</u>)	Х	1	5,400	FMV			
26	Other (describe)							
27	Other (describe)							
28	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement			ar for contributions for	29			
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must		Yes	No
	least three years from the date of	of the initial	contribution, and which is	not required to be used for ϵ	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangeme	ent in Part I	I					
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?					31	Yes	
32a	Does the organization hire or use contributions?	e thırd partı • • •	es or related organizations	to solicit, process, or sell r	non-cash • • • • •	32a	Yes	
ь	If "Yes", describe in Part II							
33	If the organization did not report checked, describe in Part II	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a)ıs			
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990.	Cat No 51227J	Schedule	M (For	m 990	2008

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Identifier Explanation Part I, Line 32, Hire and Use of Third The College engaged an independent third party to appraise and sell a painting it received Parties

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SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

2008

Open to Public Inspection

► 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.

Name of the organization
Columbia College

Employer identification number
57-0324915

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 15	The president's compensation is set by the trustees annually and documented in a written contract. No independent review or comparability data is documented in this process. Trustees do not approve compensation contracts for other officers and key employees.

ldentifier	Return Reference Explanation	
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The College makes the referenced documents available upon request and through public posting of the Form 990 (on another's w ebsite)

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	I Evalanation of Monitoring	Trustees must disclose annually any conflicts of interest. Officers and key employees are governed by the staff policies and procedures manual which states that outside employment may not conflict with the interests of the College. Trustees complete conflict of interest disclosures annually. Any conflicts of interest are evaluated on a case by case basis. To date, no conflicts of interest have been identified.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 10	Form 990, Part VI, Line 10 Form 990 Review Process	The Form 990 was not available to the board prior to its extended due date, but will be reviewed at the Summer 2010 retreat

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d	Other Program Services	OTHER PROGRAM SERVICES 4 Student Aid - Includes expenditures for all forms of financial aid to students OTHER PROGRAM SERVICES 5 Academic Support - Expenditures in connection with the operation of the College's library

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

DLN: 93493134024210

2008

OMB No 1545-0047

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Schedule R (Form 990) 2008

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Columbia College

▶ 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

57-0324915 **Identification of Disregarded Entities** (A) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity SC Conference - United Methodist Church Provides annual support 501(c)(3) 4908 Colonial Drive Suite 101 SC 170(b)(1)(A)(ı) N/A to the College Columbia, SC29203 Columbia College Foundation Inc Special project fund NΑ 1301 Columbia College Drive raising to benefit SC 501(c)(3) 170(b)(1)(A)(vi) Columbia College Columbia, SC29203

Cat No 50135Y

(A) Name, address, and EIN of related organization	(B) Primary activity		(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)		(F) Share of total income		(G) Share of end-of- year assets	(H) Disproprtionat allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General o managing partner?	
										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		Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Dart V	Transactions	with	Delated	Organizations
Part V	Transactions	with	Kelated	Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Ye	es l	No
During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	•		No
b Gift, grant, or capital contribution to other organization(s)	16	•		No
c Gift, grant, or capital contribution from other organization(s)	10	: Ye	es	
d Loans or loan guarantees to or for other organization(s)	10	1	7	No
e Loans or loan guarantees by other organization(s)	16	=	 '	No
f Sale of assets to other organization(s)			+	No
g Purchase of assets from other organization(s)	19	,		No
h Exchange of assets	1h	1	T	No
i Lease of facilities, equipment, or other assets to other organization(s)	11	i	'	No
j Lease of facilities, equipment, or other assets from other organization(s)		i		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	(No
Performance of services or membership or fundraising solicitations by other organization(s)	11			No
m Sharing of facilities, equipment, mailing lists, or other assets	1 n	n		No
n Sharing of paid employees	1n	1	<u></u> '	No
• Reimbursement paid to other organization for expenses	10	•	+	No
p Reimbursement paid by other organization for expenses	1 _p	•	'	No
q O ther transfer of cash or property to other organization(s)	10	1	+	No
r Other transfer of cash or property from other organization(s)	11	r	ľ	No

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	SC Conference - United Methodist Church	с	382,739
(2)	Columbia College Foundation Inc	с	700,000
(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

	T	ı	(5)		· -			1	1	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?	
			Yes	No		Yes	No		Yes	No
	1	1				ı		1		