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DLN: 93493014013051

$_{\text{Form}}990$

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009

Open to Public Inspection

B Che	eck ıf a	pplicable	Please	r, or tax year beginning 06 C Name of organization SIMPSON COLLEGE	-01-2009 a	and ending 05-31-2	2010		D Employer i	dentif	ication number
☐ Add			use IRS label or	Doing Business As					42-0680: E Telephone		er
∏ Nar		_	print or type. See						(515) 96:	1-625	1
☐ Initi			Specific Instruc- tions.	Number and street (or P O t 701 North C St	oox if mail is not	delivered to street ac	ddress) Ro	oom/suite	G Gross receip		
☐ Am				City or town, state or country Indianola, IA 50125	, and ZIP + 4						
App	lication	n pending		·							
			John W	•	lofficer		H(a) Is thi affilia	s a group reti tes?	urn for	□Yes 〒No
				orth C St ola,IA 50125				la	661:-4 i1		┌ Yes ┌ No
								-	l affiliates incl o." attach a lu		e instructions)
I Tax	k-exem	npt status	5 01(c)) (3) ◀ (insert no)	(a)(1) or	27	н(_	pexemption	-	·
			wsimpson							1	
	n of or			tion Trust Association	Other 🟲		L	Year of fo	rmation 1860	M Sta	te of legal domicile IA
Ра	1			e organization's mission o	r most signifi	cant activities					
Activities & Governance	2	that gui	work, servi de us on is this box ► of voting r	ommunity, Graduating stuce and scholarship, Drawing sues of personal integrity, and in the stuck of the sound in the stuck of the soverning of the governing of the soverning of	ng upon our r moral respo ntinued its op body (Part V)	elationship with the nsibility, social just on the second	stice and	Method diglobal c	st Church an itizenship 25% of its ne	t asse	religious traditions ets
ŧ	4			ndent voting members of th			e 1b) .		•		38
q.	5	Total number of employees (Part V, line 2a)Total number of volunteers (estimate if necessary)									1,39
	_			ted business revenue from			,				90,75
		_		iness taxable income from						74 <u> </u>	(
								Prio	r Year		Current Year
_	8	Contri	butions and	d grants (Part VIII, line 11	n)				5,811,202		5,794,821
Rayenue	9	•		revenue (Part VIII, line 2			_		45,436,430	_	47,929,461
Ž.	10			me (Part VIII, column (A),		•	·		1,006,640	_	2,358,346
_	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8 12 Total revenue—add lines 8 through 11 (must equal)										980,648
					•		,		52,932,555		57,063,276
	13			ar amounts paid (Part IX, o					17,048,910		18,627,692
	14			or for members (Part IX, co		-	_		0		0
8	15	10)	es, other co	ompensation, employee be	nents (Part 1	x, column (A), line	es 5-		20,278,309		20,824,814
Expenses	16a	Profes	sıonal fund	Iraısıng fees (Part IX, colu	mn (A), lıne 1	1e)			0		0
ਡੌ	ь	Total fu	ndraising exp	enses (Part IX, column (D), line	25) - 1,167,67	6	_				
	17			(Part IX, column (A), lines					15,303,360		15,071,291
	18			Add lines 13–17 (must eq					52,630,579		54,523,797
<u>%</u> ठ	19	Reven	ue iess ext	penses Subtract line 18 fr	om me 12 .				301,976 of Current		2,539,479 End of Year
Net Assets or Fund Balances	20	Total	accets (Do	rt X, line 16)					ear L15,430,447		125,619,485
A B	21			Part X, line 26)			_		28,137,493		30,268,263
Z 5	22			nd balances Subtract line :			· 🗀		87,292,954		95,351,222
Par	t II		ature Bl								
				erjury, I declare that I have exar correct, and complete Declarati							
Sign Here		Sign	ature of office	er				2011- Date	01-14		
	-	Ken		/ice Pres for Business & Finance							
		Prepare	r's k		Da	ate	Check	ıf	Preparer's ide	ntıfyına	number
Paid		signatui					self- empoly	<u> </u>	(see instruction		
	arer'		name (or you	rs					ETAL &		
Use		ıf self-e	mployed), , and ZIP + 4	•					EIN Þ		
									Phone no 🕨		
May t	he IR	.S discus	s this retu	rn with the preparer shown	above? (see	ınstructions) .				Г	Yes No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Simpson College is an independent, selective, church-related, comprehensive liberal arts college dedicated to excellence in higher education. The Simpson College community is equally committed to Promoting integrative learning that enables students of all ages to develop intellectual and practical skills, Nurturing values which foster personal worth and individuality within a creative, diverse and just community, Graduating students who continue to grow as free, responsible and fulfilled individuals in the world of family, work, service and scholarship, Drawing upon our relationship with the United Methodist Church and our religious traditions that guide us on issues of personal integrity, moral responsibility, social justice and global citizenship.

						Form 990 (2009)
4e	Total program servic	e expenses►\$	49,241,05	4		
	(Expenses \$	6,541,408 ind	cluding grants o	of\$	0) (Revenue \$	0)
4d	Other program servi	ces (Describe in Sch	nedule O) See a	also Additional Data f	or Description	
		rices, was provided to full			cer counseling, college chapialit, in	receolegiste differens, fillalicial
70	`	, , , ,		3 3 '	reer counseling, college chaplain, in	,
	(Code) (Expenses \$	8,160,434	ıncludıng grants of \$	0) (Revenue \$	0)
	Higher Education Instruct	on Instruction and acade	emic support was p	rovided to full and part-tin	ne students (2,021 students)	
4b	(Code) (Expenses \$	15,911,520	including grants of \$	0) (Revenue \$	0)
	Scholarship Programs Sc	holarships and grants to s	students (1,428 st	udents)		
4a	(Code) (Expenses \$	18,627,692	including grants of \$	18,627,692) (Revenue \$	0)
	•	d 501(c)(4) organıza	tions and section	on 4947(a)(1) trusts a	largest program services by are required to report the am service reported	•
4	If "Yes," describe the	5				
3	Did the organization of services?					┌ Yes ┌ No
	If "Yes," describe the					
2	the prior Form 990 or	, -		• ,	r which were not listed on	┌ Yes ┌ No

Part IV	Checklist o	f Required	Schedules
	CHECKHISLU	ı Keuulleu	Scileudies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	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		
6	Did the organization maintain any donor advised funds or any similar funds or 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? <i>If "Yes," complete Schedule D, Part II</i>	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," complete Schedule D, Part IV	9		Νο
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school 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 United States?	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 United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? 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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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		No
31	Part I	31		No
32	Schedule N, Part II	32		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		N o
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		N o
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F.	orm 990	(2009)

art V	Statements	Regarding	Other	TRS Filing	as and '	Tax Com	pliance
	ota to illoito	ive gar aring	•	-110 1 111111	goana	I GA COIII	Pilailee

			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
la l	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
la	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	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 Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
D	Section 501(c)(7) organizations. Enter			
	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			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

701 N C Street Indianola, IA 50125 (515) 961-1512

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 39			
ь	Enter the number of voting members that are independent 1b 38	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
	other officer, director, trustee, or key employee?	2	Yes	
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		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			110
	evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
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?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	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. Own website. Own website.			
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	ie orga	nızatıor	n 🕨
	Ken Birkenholtz			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►8

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Sodexo Inc Affiliates 4880 Paysphere Circle Chicago, IL 60674	Facilities Services	1,917,734
Sodexo Food Services Facilities services 4880 Paysphere Circle Chicago, IL 60674	Food services	1,719,856
ACME Printing Co Inc 66 Washington Ave Des Moines, IA 50314	Printing Services	192,461
Printing Station 1420 Locust Des Moines, IA 50309	Printing Services	125,394
Garner Printing 1697 NE 53rd Ave Des Moines, IA 50313	Printing Services	104,119
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5	who received more than	

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275,564

Part VIII Statement of Revenue

Part v	/	Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under
						revenue		sections 512, 513, or
<u> </u>	1a	Federated cam	paigns 1a	0				514
rani	ь	Membership du	es 1b	0				
g S	c	Fundraising eve	ents 1c	0				
ĭfts ⊪ a	d		zations 1d	0				
s, g milis	l e	Government grants		728,546				
on: sir	f	All other contribution	ons, gifts, grants, and 1f	5,066,275	i			
Contributions, gifts, grants and other similar amounts		sımılar amounts no Noncash contri	ot included above butions included in					
d it		lines 1a-1f \$	22,432					
a ပို	h	Total. Add lines	s 1a-1f	•	5,794,821			
an		-		Business Code				
ven	2a _	Tuition and fees		611,310	40,158,681	40,158,681	0	0
윤	Ь	Residence halls		721,310	4,229,170	0	0	4,229,170
ИСе	C	Food service		722,210	3,080,693	0	0	3,080,693
Ser	d	Conference progra	<u>m</u>	721,000	335,917	335,917	0	0
Program Serwce Revenue	e	Bookstore		451,211	125,000	0	0	125,000
subo	f All other program service revenue				0	0	0	0
<u>&</u>	g	Total. Add lines	s 2a-2f		47,929,461			
	3		ome (including dividen	 				
			ar amounts)	F	1,480,727	0	-2,916 	1,483,643
	4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	43,262 26,564	0	0	43,262 26,564
	5	Royalties	() D		26,364	0		26,364
	6a	Gross Rents	(ı) Real 212,760	(II) Personal				
	ь	Less rental	111,860	0				
	-	expenses	100,900					
	C	Rental income or (loss)		0				
	d	Net rental inco	me or (loss)		100,900	0	49,131	51,769
	_	C	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	5,995,739	U				
	b	than inventory Less cost or other basis and	5,161,382	0				
	_c	sales expenses Gaın or (loss)	834,357	0				
	d	Net gain or (los	s)		834,357	o	0	834,357
ຄ່າ	8a		rom fundraising					
Other Revenue		\$of contributions See Part IV , lin	0 s reported on line 1c) se 18					
썦		· , ·····	a	О				
1er	ь	Less direct ex	penses b	0				
ᅙ	С	Net income or ((loss) from fundraising	events 🗠	0	0	0	0
	9a	Gross income f See Part IV , lin	rom gaming activities ie 19					
			а	0				
	Ь		penses b	0 Vities	٥	0	0	
	10a	Gross sales of returns and allo		villes		0	0	
			a a	0				
	ь	Less cost of g	oods sold b	0				
	С	Net income or ((loss) from sales of inve	entory ►	0	0	0	0
		Miscellaneous	s Revenue	Business Code				
	11a	Finance charge	s	611,310	97,366	97,366	0	0
	ь	A dministrative reimbursement		611,310	66,239	66,239	0	0
	c	Parking fees		812,930	50,305	0	0	50,305
	d	All other reveni	ue		639,274	594,734	44,540	0
	e	Total. Add lines			853,184			
		T.A. 1	C Turk	▶	555,104			
	12	lotal revenue.	See Instructions .	•	57,063,276	41,252,937	90,755	9,924,763 Form 990 (2009)

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete column (A) but are not required to bot include amounts reported on lines 6b, b, 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	0		Скрепосо
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	18,627,692	18,627,692		
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	0]	
5	Compensation of current officers, directors, trustees, and key employees	556,988	144,042	412,946	0
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	0	0	0
7	Other salaries and wages	15,490,903	13,229,280	1,540,358	721,265
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	807,200	664,211	102,525	40,464
9	Other employee benefits	2,885,719	2,304,739	442,324	138,656
10	Payroll taxes	1,084,004	863,066	 	51,776
11	Fees for services (non-employees)		,		
 a	Management	0	0	0	0
b	Legal	59,955			0
c	Accounting	51,125	0	 	
d	Lobbying	0		,	
u a	Professional fundraising See Part IV, line 17	0	_		0
£				0	
f	Investment management fees	0	0	+	0
g	Other	0	_	-	0
12	Advertising and promotion	468,872		<u> </u>	0
13	Office expenses	1,446,915		·	95,929
14	Information technology	732,318	379,754	 	516
15	Royalties	0	0	 	0
16	Occupancy	2,845,291		 	21,034
17 18	Travel	805,972	717,903	56,835	31,234
	state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	931,721	904,747	20,861	6,113
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	2,325,137	2,224,575	85,021	15,541
23	Insurance	0	0	0	0
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	Contracted services	3,353,283	3,319,000	34,283	0
b	Athletic teams	473,385		 	0
c	Memberships	149,163	8,045	141,118	0
d					
e f	All other expenses	1,428,154	1,333,970	49,036	45,148
25	Total functional expenses. Add lines 1 through 24f	54,523,797		· ·	1,167,676
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	3.,323,131	13,211,037	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,207,070
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet						
					(A) Beginning of year		(B) End of year	
	1	Cash—non-interest-bearing			6,243	1	3,934	
	2	Savings and temporary cash investments	10,304,187	2	15,942,026			
	3	Pledges and grants receivable, net	· · · · · · · · · · · · · · · · · · ·				3,032,301	
	4	Accounts receivable, net	ervable, net					
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	m current and former officers, directors, trustees, key employees, and					
		Schedule L			0	5	0	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and				
		Schedule L			О	6	0	
Assets	7	Notes and loans receivable, net			0	7	0	
Š	8	Inventories for sale or use			0	8	0	
⋖	9	Prepaid expenses and deferred charges			517,678	9	610,204	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	81,152,245				
	b	Less accumulated depreciation	10b	43,146,757	39,033,618	10c	38,005,488	
	11	Investments—publicly traded securities			18,963,974	11	22,274,419	
	12	Investments—other securities See Part IV, line 11	37,462,680	12	41,239,671			
	13	Investments—program-related See Part IV, line 11	3,389,336	13	3,275,527			
	14	Intangible assets	0	14	0			
	15	Other assets See Part IV, line 11	sets See Part IV, line 11					
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			115,430,447	16	125,619,485	
	17	Accounts payable and accrued expenses .			4,897,531	17	5,716,535	
	18	Grants payable			0	18	0	
	19	Deferred revenue			0	19	0	
_	20	Tax-exempt bond liabilities			19,129,360	20	21,218,320	
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .		0	21	0	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	•					
=======================================		persons Complete Part II of Schedule L		•	О	22	0	
	23	Secured mortgages and notes payable to unrelated third parties			1,045,240	23	6,659	
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0	
	25	Other liabilities Complete Part X of Schedule D			3,065,362	25	3,326,749	
	26	Total liabilities. Add lines 17 through 25			28,137,493	26	30,268,263	
es_		Organizations that follow SFAS 117, check here ▶	olete li	nes 27				
ank	27	Unrestricted net assets			24,187,870	27	24,700,471	
Balance	28	Temporarily restricted net assets			16,313,438	28	22,136,918	
	29	Permanently restricted net assets			46,791,646	29	48,513,833	
큪		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	nd com	plet e				
or Fund		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds	•			30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32		
Š	33	Total net assets or fund balances			87,292,954	33	95,351,222	
	34	Total liabilities and net assets/fund balances \dots			115,430,447	34	125,619,485	

			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		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

a - | DLN: 9349301401305

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

h

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization SIMPSON COLLEGE

Employer identification number

I I J	JN COL	42-0680389										
Par	τI	Reason for Public Charity Status (All organizations must complete this part.) See instruc	ctions									
	_	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			,							
1	\sqcap	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).										
2	굣	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5	Г	An organization operated for the benefit of a college or university owned or operated by a governmental un section 170(b)(1)(A)(iv). (Complete Part II)	ıt describe	- id in								
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the described in	ne general	public								
_	_	section 170(b)(1)(A)(vi) (Complete Part II)										
8	<u> </u>	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)	6									
9	,	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross										
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more that										
		its support from gross investment income and unrelated business taxable income (less section 511 tax) f	rom busin	esses								
_	_	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
.0	<u> </u>	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
1	ı	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carrone or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See see the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d T		a)(3).	Check							
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)										
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III su check this box	pporting o	rganız	ation,							
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?										
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)	44.00	Yes	No							
		and (III) below, the governing body of the the supported organization?	11g(i)									
		(ii) a family member of a person described in (i) above?	11g(ii)									
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11a(iii)		1							

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) list your gove docume	on in ced in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?	
			instructions))	Yes	No	Yes	No	Yes	No	
Total										

Provide the following information about the supported organization(s)

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493014013051

OMB No 1545-0047

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

f the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities	5),
hen	
Contract FOA(s)(2) announce to an accomplete Double I A and D. Double accomplete Double C	

- 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 990-F7 Part VI line 47 (Lobbying Activities) then

	etion 501/a)/2) arganizations that have filed Form 5769 (election under section 501/b)) Complete Part II	•	, .		• •	
	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete			•		ПΛ
	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line				•	
	ction 501(c)(4), (5), or (6) organizations. Complete Part III	, 556	a (i ega	ıı uınış	j proxy tax,	, then
Na	me of the organization	mplo	yer ide	entific	ation numbe	er
SIM	PSON COLLEGE			_		
Dar	14 I-A Complete if the organization is exempt under section 501(c) or is a so		68038		aanizatio	n
ŒЦ	Complete if the organization is exempt under section 501(c) or is a si	<u>seu</u>	011 52	7 01	yanızanı	
1	Provide a description of the organization's direct and indirect political campaign activities in Part	ΙV				
2	Political expenditures		F	\$_		
3	Volunteer hours			_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		•	\$_		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		•	\$_		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				┌ Yes	┌ No
4a	Was a correction made?				☐ Yes	┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ecti	ion 50)1(c)(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ıvıtıe	s 🕨	\$_		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27				
	exempt funtion activities		•	\$_		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	•	\$		
4	Did the filing organization file Form 1120-POL for this year?			T -	☐ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount paid from the filing organization's funds	-				

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,					
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals					
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)						
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)						
c	Total lobbying expenditures (add lines 1a and 18	b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1	c and 1d)							
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both						
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00					
	Over \$17,000,000	\$1,000,000							
		•							
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)							
h	Subtract line 1g from line 1a If zero or less, enter	er -0-							
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -							
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No			
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five			
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı			
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots non-taxable amount								

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

	· · · · · · · · · · · · · · · · · · ·	(a	a)	(b)
		Yes	No	A mount
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	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		1,689
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			1,689
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			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		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

- answered "Yes".

 1 Dues, assessments and similar amounts from members
 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).
- a Current year
- **b** Carryover from last year
- c Total
- 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 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?
- 5 Taxable amount of lobbying and political expenditures (see instructions)

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

Ident if ier	Return Reference	Explanation
SchC_P2B_S00_L01	, ,	Simpson College is a member of the Iowa Association of Independent Colleges and Universities (IAICU) As calculated by IAICU, twelve percent of the dues paid by the college are attributed to lobbying expenditures incurred by the organization

2a

2b

2c 3

4

5

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493014013051

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** SIMPSON COLLEGE 42-0680389 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🛌
Number of states where property subject to conservation easement is located 🛌
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

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

- \$ _____

(ii) Assets included in Form 990, Part X

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

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

Revenues included in Form 990, Part VIII, line 1

Number of conservation easements included in (c) acquired after 8/17/06

►\$ _____

b Assets included in Form 990, Part X

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

Cat No 52283D

2d

Schedule D (Form 990) 2009

'a r	Organizations Maintaining Co	llections of Art	, His	torica	il Trea	asures, or (<u>Oth€</u>	er Similai	ASS	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e follov	ving tha	t are a sıgnıfıc	cant	use of its co	llectio	n	
а	Public exhibition		d		oan or e	exchange prog	grams	s			
b	Scholarly research		e	Го	ther						
c	Preservation for future generations										
1	Provide a description of the organization's co	ollections and expla	ın how	they f	urther t	he organizatio	n's e	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							mılar	Г	Yes	┌ No
۹a۱	rt IV Escrow and Custodial Arrang						ed "\	Yes" to For	m 990	J,	
	Part IV, line 9, or reported an ar		-								
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ns or other as	sets	not	Г	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	followi	ıng tabl	le			1	_		
_							_		A mo	ınt	
с	Beginning balance						1c	1			
d	Additions during the year						1d	1			
e	Distributions during the year						1e				
f	Ending balance						1 f				
а	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	1									
°a	rt V Endowment Funds. Complete										
		(a)Current Year	(b	Prior Ye		(c)Two Years Ba	ck (d) Three Years	Back (e) Four Ye	ears Back
а	Beginning of year balance	58,316,085			60,171		4				
b	Contributions	523,858			82,698						
С	Investment earnings or losses	8,050,948			12,800						
d	Grants or scholarships	2,109,024			79,047						
е	Other expenditures for facilities and programs	1,093,004		1,5	34,937						
f	Administrative expenses	100,000		1	00,000						
g	End of year balance	63,588,863		58,3	16,085						
	Provide the estimated percentage of the yea	r end balance held a									
а	Board designated or quasi-endowment	8% %									
_		70									
b	remailent endowment P										
c a	Term endowment P /0	acion of the organiza	-t t	.h.+	hald a	nd administra	. d f	r + h o			
a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	ilat ale	i ileiu ai	na aummister	eu ioi	i tile		Yes	No
	(i) unrelated organizations								3a(i)	Yes	
	(ii) related organizations								3a(ii)	Yes	
b	If "Yes" to 3a(II), are the related organization	ns listed as required	d on S	chedul	e R? .				3b		
	Describe in Part XIV the intended uses of th										
a	t VI Investments—Land, Building	s, and Equipme	nt. S	ee For	m 990	, Part X, line	<u> 10.</u>				
	Description of investment				ost or othe nvestmer			(c) Accumu depreciat		(d) Boo	k value
а	Land				614,6	1,81	1,426	5			2,426,037
b	Buildings		•		1,239,6	64,55	50,511	. 33,2	16,278	32	2,573,845
c	Leasehold improvements					0 41	6,834	;	20,842		395,992
d	Equipment					0 11,48	39,477	9,84	19,867		1,639,610
e	Other				119,	537 91	10,237	,	59,770		970,004

38,005,488

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives	0	F
Closely-held equity interests	0	F
Other	060.440	_
Guaranteed investment contract	960,440	F
Interest in common trust funds	22,489,854	F
Interest in private equity limited partnerships	5,321,410	F
		_
Interest in hedge funds	6,298,725	F
Interest in real estate investment trusts	2,367,956	F
Beneficial interest in trusts	2,493,212	F
Cash surrender value of life insurance policies	1,301,724	F.
Other	6,350	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	12/200/07/2	
Part VIII Investments—Program Related. See		.3. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Federal Perkins Loan due from students	2,482,336	С
Loans due from students	793,191	С
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin	3,275,527	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
Student, personnel and sundry deposits	734,861	
U S government loan funds refundable	2,389,330	
Interest rate swap agreements	202,558	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	3,326,749	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	57,063,276
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	54,523,797
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,539,479
4	Net unrealized gains (losses) on investments	4	5,518,789
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	5,518,789
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,058,268
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	43,954,373
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 0		
е	Add lines 2a through 2d	2e	5,518,789
3	Subtract line 2e from line 1	3	38,435,584
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	18,627,692
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	57,063,276
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	35,896,105
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	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	35,896,105
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 0]	
b	Other (Describe in Part XIV)]	
c	Add lines 4a and 4b	4c	18,627,692
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	54,523,797
Pai	t XIV Supplemental Information		

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

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, 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 Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The Simpson College endowment is intended to support the College's students by providing scholarship and loan funds and the endowment is intended to support the College by providing support for operations and facilities
SchD_P10_S00_L00	Schedule D, Part X	The disclosures for FIN 48 were not required to be made for the year ended May 31, 2010 However, the auditors did perform tests related to FIN 48 and did not identify any liability for uncertain tax positions
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Student aid netted against tuition and fees in the audited financial statements
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Student aid netted against tuition and fees in the audited financial statements

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

SIMPSON COLLEGE

Name of the organization

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

2009

Open to Public

42-0680389 YES NO 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 3 Yes College publications to students, alumni and friends of the College include a statement of the College's racially nondiscriminatory policy Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes 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, use Schedule O (Form 990) 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 h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) 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 line 6a or line 6b, explain on Schedule O (Form 990) 🎜 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," explain on Schedule O (Form 7 Yes 990)

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DLN: 93493014013051

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Internal Revenue Service

Department of the Treasury

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization SIMPSON COLLEGE

Employer identification number

42-0680389

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

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or			
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award			
	the grants or assistance?	Yes	Γ	No

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

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

3 Activites per Region (0)	se schedule r-1	(Form 990) if aut	illional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (including Iceland and Greenland)	0	0	Program Services	Student semester abroad and May Term course travel	223,956
South America	0	0	Program Services	Student semester abroad and May Term course travel	105,144
East Asia and the Pacific	0	0	Program Services	Student semester abroad and May Term course travel	4,856
Sub-Saharan Africa	0	0	Program Services	Student May Term course travel	649
Central America and the Caribbean	0	0	Program Services	Student May Term course travel	151,896
Totals ▶	0				486,501
For Privacy Act and Paperwork R	eduction Act Notic	ce, see the Instruc	tions for Form 990.	Cat No 50082W Sche	edule F (Form 990) 2009

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
	+	

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DLN: 93493014013051

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Open to Public

Name of the organization					Employer identification number				
SIMPSON COLLEGE				42-0680389					
Part I General Infor	mation on Grants	and Assistance				·			
Does the organization m the selection criteria useDescribe in Part IV the organization	ed to award the grants	or assistance?			· -	•	▽Yes □N		
Form 990, Part	IV, line 21 for any	o Governments and recipient that receive (0) if additional space	d more than \$5,000.	. Check this box if no	o one recipient receiv	ed more than \$5,00	0. Use		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(5)	(h) Purpose of grant or assistance		

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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 to Simpson College students	1428	18,627,692	0		
See Additional Data Table					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.											
Ident if ier	Return Reference	Explanation									
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Grants or assistance provided is all for scholarships and grants to Simpson College students which are applied directly to the student's tuition charges. The Office of Financial Assistance awards scholarships and grants to students based on a variety of different criteria for each scholarship.									
-											

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493014013051

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization SIMPSON COLLEGE

Employer identification number

42-0680389

Pa	rt I Questions Regarding Compensation		·						
					Yes	Νo			
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III								
	First-class or charter travel	<u> </u>	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	Г	Personal services (e g , maid, chauffeur, chef)						
b	If any of the boxes in line 1a are checked, did the org reimbursement orprovision of all the expenses descr			1b	Yes				
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?								
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the								
	Compensation committee		Written employment contract						
	Independent compensation consultant	고	·						
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee						
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization									
а	Receive a severance payment or change-of-control ;	paymen	nt?	4a		Νo			
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?									
c	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo			
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	ne applicable amounts for each item in Part III						
	Only 501(c)(3) and 501(c)(4) organizations only mus	st comp	plete lines 5-9.						
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	ıne 1a,	did the organization pay or accrue any						
а	The organization?			5a		Νo			
b	Any related organization?			5b		Νo			
	If "Yes," to line 5a or 5b, describe in Part III								
6	For persons listed in form 990, Part VII, Section A, l compensation contingent on the net earnings of	ıne 1a,	did the organization pay or accrue any						
а	The organization?			6a		Νo			
b	Any related organization?			6b		Νο			
	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," d			7		No			
8	Were any amounts reported in Form 990, Part VII, p								
	subject to the initial contract exception described in in Part III	kegs :	section 53 4958-4(a)(3)/ IT "Yes," describe	8		No			
9	If "Yes" to line 8, did the organization also follow the	rebutt:	able presumption procedure described in Regulations	Ť					
-	section 53 4958-6(c)?	. S S G E E	22.2 p. 22 amption procedure described in regulations	9					

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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive	(iii) Other reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or
		compensation	compensation	compensation				Form 990-EZ
John W Byrd	(ı) (ıı)	227,493 0	0	.,	67,133 0	31,664 0	330,672 0	0
Robert J Lane	(ı) (ıı)	135,747 0	0	4,205 0	11,289 0	44,237 0	195,478 0	0
Kenneth I Bırkenholtz	(ı) (ıı)	143,168 0	0 0	0	11,346 0	5,249 0	159,763 0	0 0

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
SchJ_P01_S00_L01a	Part I, Line 1a	The president's spouse periodically travels with the President to official College functions. The spouse's travel is paid by the College when the official College function dictates such participation such as for donor relations and alumni events. The President is provided a residence in which he/she is required to live. The residence is regularly used for College functions. An estimated fair value of \$25,804 has been included under Part VII, Section A, column (F) of the Form 990. Finally, the President is provided with membership to a local country club. The annual membership cost is included in reportable compensation in the amount of \$1,740.
SchJ_P01_S00_L03	Part I, Line 3	The Executive Compensation Committee of the Board of Trustees consists of the Treasurer, Secretary and Chairperson of the Board, which are all independent members of the Board of Trustees. The Committee is charged with reviewing and approving the compensation and benefits for the President. The Committee uses comparability data such as a survey issued to several private colleges regarding total compensation for a president conducted by an independent compensation consultant and salary data for private college administrator positions provided by a state association of independent private colleges. The Committee approves all salary and long-term incentive awards for the President's written employment contract. Minutes of all Committee meetings are kept and maintained. The Committee is required to inform the full Board of Trustees of all provisions and elements of the President's compensation.

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DLN: 93493014013051

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SIMPSON COLLEGE

► Attach to Form 990. ► See separate instructions. Employer identification number

SIM	PSON COLLEGE							42-	0680	389					
Pa	rt I Bond Issues									•					
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	sued (e) Issue Price		(f) Description of Purpose		(g) Defe		feased Be		On alf of uer	
												Yes	No	Yes	No
A	Iowa Higher Education Loan A uthority	42-1235696	462460SZ0	02-15-	2005	11	,931,200		mpus buildi hall improve				х		Х
В		42-1235696		11-19-2009		12	Refunding of taxable loa (9/10/2008), acquisitio machinery, equipment, pand fixtures		ion of			X		X	
Ра	Part II Proceeds			A			В	C			D			E	
1	Total proceeds of issue				,042,360		3,101,14	5	J		_			-	
2	Gross proceeds in reserve funds				981,145			0							
3	3 Proceeds in refunding or defeasance escrows				0			0							
4					0		688,99	8							
5	Issuance costs from proceeds				166,283		100,00	0							
6	Working capital expenditures from pr	oceeds			0			0							
7	Capital expenditures from proceeds			ϵ	5,579,538		2,312,14	7							
8	Year of substantial completion			200	06										
				Yes	No	Yes	No	Yes	No	Yes		No	Yes		No
9	Were the bonds issued as part of a cu	urrent refunding is	sue?		X	X									
10	Were the bonds issued as part of an a	advance refunding	ıssue?	X			Х								
11	Has the final allocation of proceeds b	een made?		X			X								
12	Does the organization maintain adeq the final allocation of proceeds?	uate books and re	cords to support	Х		х									
Pa	t IIII Private Business Use														
				Yes	A No	Yes	B No	Yes	C No	Yes	D	No	Yes	E	No
1	Was the organization a partner in a pa which owned property financed by tax		ember of an LLC,	1 63	X	1 63	X	165	140	163		.10	165		110
2					Х		х								
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.			Cat No 50193E					Schedule K (Form 990) 2009							

Schedule K	(Form 990) 2	2009		
Part III	Private B	usiness	Use	(Continued)

	, , , , ,			Α	В			С		D	E	
			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect t financed property which may result in private business use?	o the		X		X						
3b	Are there any research agreements with respect to the finance which may result in private business use?	ed property		x		X						
3с	Does the organization routinely engage bond counsel or other counsel to review any management or service contracts or res agreements relating to the financed property?		X		X							
4	Enter the percentage of financed property used in a private but by entities other than a section 501(c)(3) organization or a sta- government			0 %		0 %						
5	Enter the percentage of financed property used in a private but as a result of unrelated trade or business activity carried on business activities	y your		0 %		0 %						
6	Total of lines 4 and 5			0 %		0 %						
7	Has the organization adopted management practices and proc ensure the post-issuance compliance of its tax-exempt bond l		X		X							
Par	IV Arbitrage	Α			В		С		D		E	
		Yes	No	Yes	В No	Yes	_	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the hond issue?										. ••	
the bond issue?	the bond issue		X		Х							
2	Is the bond issue a variable rate issue?		Х	х								
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and											
	records?		X	Х								
	Name of provider	Regions Bank	<	Regions B	Bank							
b		-		J								
С	Term of hedge			5		5						
4a	Were gross proceeds invested in a GIC?	X			Х							
b	Name of provider	Societe Gene	erale									
С	Term of GIC		3	0 8								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X										
5	Were any gross proceeds invested beyond an available temporary period?		Х		Х							
6	Did the bond issue qualify for an exception to rebate?	X			Х							

DLN: 93493014013051

Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons ► Complete if the organization answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization SIMPSON COLLEGE

Employer identification number

42-0680389

	42 0000309	_
Part I	Excess Benefit Transactions (section $501(c)(3)$ and section $501(c)(4)$ organizations only).	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b	
		_

(c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under **3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . .

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(f) (b) Loan to (g)Written **(e)** In Approved (a) Name of interested person and or from the (c)O riginal default? by board or agreement? (d)Balance due organization? principal amount purpose committee? From Yes Yes No

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person

(b)Relationship between interested person and the organization

(c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
Douglas Shull	Trustee is a director of a bank which has provided a loan to the College	133,000	Interest and fees on loan with the bank		No
P Sumner Worth	Trustee is a key employee of a lumber and construction materials supplier	71,547	Purchase of construction materials under open and competitive bidding		No
Rıta Bırkenholtz	Spouse of officer of the College	39,654	Annual compensation as a full time employee in the Office of College Advancement		No
Evadne Goodhue	Spouse of a Board of Trustee member	14,134	Compensation as an adjunct instructor of the College		No

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Internal Revenue Service Name of the organization

Employer identification number

-	T (D)				42-0680389			
Par	tI Types of Property	(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d rever	- etermır	ning	
1 /	Art—Works of art			-				
2 /	Art—Historical treasures .							
3 /	Art—Fractional interests							
4 E	Books and publications							
	Clothing and household goods							
6 (Cars and other vehicles							
7 E	Boats and planes							
8 I	Intellectual property							
9 9	Securities—Publicly traded .	Х	8	99,472	FMV			
.0 9	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
.4	Qualified conservation contribution—Other							
. 5 F	Real estate—Residential .							
6 F	Real estate—Commercial							
7 F	Real estate—O ther							
8	Collectibles							
9 F	Food inventory							
0 [Orugs and medical supplies .							
1 7	Taxıdermy							
2 H	Historical artifacts							
3 9	Scientific specimens							
4 /	Archeological artifacts							
	A thletic fundraising							
5 (auction Other ▶ (donations)	×	49	13,724	 FMV			
	Other (Meals)	X	3					
	Use of							
	vehicle							
	provided to		_	7717	D			
	Other • (President)	X	1	7,712	Dealer lease rate			
	Other • ()							
	Number of Forms 8283 received for which the organization compl				29			C
	ioi milen ene organization compi		2203,1 41111, 201100,100	iomeagement			Yes	No
0a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
	If "Yes," describe the arrangem					300		
	· · · · · · · · · · · · · · · · · · ·					_		
1	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	<u> </u>
	Does the organization hire or us contributions?	e third part • • •	es or related organizations	to solicit, process, or sell	non-cash	32a		No
Ь	If "Yes," describe in Part II							
	If the organization did not report	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II		, , , , , ,	. ,	,			ı

Page 2

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.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

As Filed Data -

DLN: 93493014013051

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Supplemental Information to Form 990

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE 0

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

Attach to Form 990.

Name of the organization SIMPSON COLLEGE

Employer identification number

42-0680389

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Robert J Lane, Vice President for College Advancement, and Deb J Tierney, Vice President for Enrollment, are in-laws
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	The return preparer reviews a draft copy of the Form 990 with the President and Vice President for Business & Finance. The return preparer and the Vice President for Business & Finance reviewed the draft and addressed questions with a tax expert who is part of the accounting firm that audits the College. Appropriate changes were made to the Form 990 based on these reviews. Then, the final draft of the return is made available to all trustee members prior to filing. The return is made available electronically through the College portal in which all trustee members have access. An email is also sent to the trustee members stating the return is available on the College portal and any comments or questions may be directed to management or the Audit and Compliance Committee of the Board of Trustees. Finally, prior to the return filing, a meeting of the Audit and Compliance Committee of the Board of Trustees is held in which management review the Form 990 with the Committee. The tax expert also participated in the meeting with the Audit and Compliance Committee. Appropriate changes were made to the Form 990 at the direction of the Audit and Compliance Committee before filing.
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	As required by the College bylaws, all trustees, officers and key employees are required to disclose annually interests that could give rise to conflicts. All reported information is compiled under the direction of the President. A summary is provided to the Audit and Compliance Committee of the Board of Trustees who then determines whether further review or action is necessary.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The Executive Compensation Committee of the Board of Trustees consists of the Treasurer, Secretary, and Chairperson of the Board, which are all independent members of the Board of Trustees. The Committee is charged with reviewing and approving the compensation of cabinet-level administrators. The Committee uses comparability data such as a survey issued to several private colleges regarding total compensation for a president conducted by an independent compensation consultant and salary data for private college administrator positions provided by a state association of independent private colleges. Minutes of all Committee meetings are kept and maintained. The Committee is required to inform the full Board of Trustees of all provisions and elements of the President's compensation. The Committee last reviewed the compensation package of the President and cabinet-level administrators during the year ended in May 2009.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Upon written request to the President or Vice President for Business & Finance, the College will make its governing documents, conflict of interest policy, and financial statements available to the public
For Paperwork Reduction A	ct Notice see the	Instructions for Form 990 Cat. No. 51.0.56K Schedule O. (Form 990) 2009

Additional Data

Software ID: Software Version:

EIN: 42-0680389

Name: SIMPSON COLLEGE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 6,541,408 including grants of \$ 0) (Revenue \$ 0)

Student Services Auxiliary Enterprises Auxiliary enterprises including housing, food services and conferencing facilities available for student use (2,021 students)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per		ition (that a					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Donnı M Alley Trustee	5	Х						0	0	0
Douglas J Barakat Trustee	5	X						0	0	0
Wesley S K Daniel Trustee	5	Х						0	0	0
D Robert Downing Trustee	5	X						0	0	0
Allison Fleming Trustee	5	X						0	0	0
Barbara M Gartner Trustee	5	X						0	0	0
Ben F Gaumer Trustee	5	Х						0	0	0
Thomas C Godlasky Trustee	5	Х						0	0	0
Darrell J Goodhue Trustee	5	X						0	0	0
Joseph D Hall Trustee	5	Х						0	0	0
Jordan B Hansell Trustee, Treasurer	5	X		Х				0	0	0
Phillip E Harlow Trustee	5	X						0	0	0
Mark L Hill Trustee	5	X						0	0	0
Kay Hooper Trustee	5	X						0	0	0
Frederick S Hubbell Trustee, Chairman	1	X		Х				0	0	0
Gage A Kent Trustee	5	X						0	0	0
Lında Koehn Trustee	5	X						0	0	0
Terrance J Lillis Trustee	5	X						0	0	0
Fred Lorber Trustee	5	X						0	0	0
Mary Rose Main Trustee	5	Х						0	0	0
Barbara A Miller Trustee	5	X						0	0	0
Mark C Miller Trustee	5	Х						0	0	0
Owen J Newlin Trustee	5	Х						0	0	0
Lızz S Nıchols Trustee	5	X						0	0	0
James R O plt Trustee	5	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Nile D Ramsbottom Trustee	5	Х						0	0	0
Sunnie Richer Trustee	5	x						0	0	0
Robert G Riley Jr Trustee	5	Х						0	0	0
Mary Sconiers Chapman Trustee	5	Х						0	0	0
Kımberly C Shadur Trustee	5	Х						0	0	0
Douglas Shull Trustee	5	Х						0	0	0
Deanna Strable-Soethout Trustee	5	Х						0	0	0
Julius C Trimble Trustee	5	X						0	0	0
Kırk J Tyler Trustee	5	X						0	0	0
Thomas N Urban Trustee	5	X						0	0	0
Stephen F V an Buren Trustee	5	X						0	0	0
Richard M Willis Trustee, Secretary	5	X		Х				0	0	0
P Sumner Worth Trustee	5	Х						0	0	0
John W Byrd President	40	X		X	Χ			231,876	0	98,797
Kenneth I Birkenholtz Vice President for Business & Finance	40			Х	Χ			143,168	0	16,595
Steven J Griffith Vice President and Dean for Academic Affairs	40			Х				124,103	0	17,383
Robert J Lane Vice President for College Advancement	40					×		139,951	0	55,526
James D Thorius Vice President for Student Development	40					×		110,730	0	14,358
Kelley L Bradder Vice President for Information Services	40					X		109,321	0	21,084
Deb J Tierney Vice President for Enrollment	40					X		105,690	0	37,863
Fred Jones Faculty	40					X		100,503	0	13,958

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

-					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Tuition and fees	611,310	40,158,681	40,158,681	0	0
Residence halls	721,310	4,229,170	0	0	4,229,170
Food service	722,210	3,080,693	0	0	3,080,693
Conference program	721,000	335,917	335,917	0	0
Bookstore	451,211	125,000	0	0	125,000

Additional Data

Software ID: Software Version:

EIN: 42-0680389

Name: SIMPSON COLLEGE

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Guaranteed investment contract	960,440	F_
Interest in common trust funds	22,489,854	F_
Interest in private equity limited partnerships	5,321,410	F
Interest in hedge funds	6,298,725	F
Interest in real estate investment trusts	2,367,956	F
Beneficial interest in trusts	2,493,212	F
Cash surrender value of life insurance policies	1,301,724	F
O ther	6,350	F