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DLN: 93493014010021

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

belief it trust of private foundation)

2009

OMB No 1545-0047

Open to Public Inspection

Internal F	Revenue :	Service	ne org	ganization may have to us	e a copy of this return i	o satisty st	ate reporting	requirements	Inspection	
A Fo	the 2	2009 calenda		r, or tax year beginning 06	-01-2009 and ending	05-31-2010)			
B Check if applicable Please C Name of organization LUTHER COLLEGE								D Employer id	entification number	
Add	ress cha	LOTTIER COLLEGE							56	
— Nan	ne chan	nge prin	tor	Doing Business As	E Telephone number					
— _{Inıtı}	al retur	n Spe c		Number and street (or P O t	ox if mail is not delivered to	street addres	s) Room/suite	(563) 387-		
— Ten	nınated	Inst tion:		700 COLLEGE DRIVE			, , , , , , , , , , , , , , , , , , , ,	G Gross receipts	\$ \$ 130,165,115	
– _{Ame}	ended r	eturn	-	City or town, state or country						
— Ann	lication	pending		DECORAH, IA 52101	,					
~ ₽₽₽	ilcation	·				1				
		I		ne and address of principa RD TORGERSON	lofficer		H(a) Is th affilia	ıs a group retur	n for	
		7	00 CO	DLLEGE DRIVE			allilla	ites	j les je No	
		D	ECOR	RAH,IA 52101			H(b) Are al	ll affiliates inclu	ded?	
							If"N	o," attach a list	: (see instructions)	
r iax	r-exem	pt status 🔽	501(c)	(3) ◀ (insert no)	(a)(1) or 527		H(c) Grou	up exemption n	umber 🕨 9386	
y W	ebsit e	: WWW LU	THER	EDU						
K Form	n of org	anization 🔽 C	orporati	ion Trust Association C	 Other ►		L Year of fo	rmation 1865	M State of legal domicile IA	
Pai	t I	Summar	7						-	
Activities & Governance	2 3 4	LUTHERAN COLLEGE OOF ARTS DE MUSIC NEABODY LUTH 800-ACRE CAMONG THE ENVIRONMINORTH CENCENCENCENCENCENCENCENCENCENCENCENCENC	CHURIFERS GREE RLY 4 ER'S CAMPU EMOS ENTAL TAL A otting m depend	E IS A FOUR-YEAR, RESI CH IN AMERICA FOUND MORE THAN 60 MAJOR (BA), WITH THE GREAT OSTATES AND MORE T MISSION STATEMENT E US, LOCATED IN THE BL T BEAUTIFUL IN REGIO L STEWARDSHIP LUTHE ASSOCIATION OF COLL If the organization disconnembers of the governing dent voting members of the	DED IN 1861 (INCORP S, MINORS, AND PRE TEST NUMBER OF GRA HAN 50 COUNTRIES A MPHASIZES FAITH, L UFF COUNTRY OF NO N AND REINFORCES OF R IS FULLY ACCREDITE EGES AND SCHOOLS Intinued its operations of body (Part VI, line 1a) the governing body (Part	ORATED 1 PROFESSION DUATES OF CARE REPREE ADERSHI RTHEAST 1 FHE COLLE FED BY THI r disposed	865) BY NO DNAL PROGICOMING FRO SENTED IN P, AND SERVIOWA ALON GE'S STROME HIGHER LE	RWEIGIAN IM RAMS LEADIN M BIOLOGY, THE 2,500-ME VICE TO THE G THE UPPER NG COMMITME EARNING COM 25% of its net	MIGRANTS, THE G TO THE BACHELOR EDUCATION, AND EMBER STUDENT LARGER WORLD ITS IOWA RIVER, IS ENT TO MISSION OF THE	
		Total number of employees (Part V, line 2a)								
		Total number of volunteers (estimate if necessary)							a 1,083	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34						•	a 61,876 b -10,370		
	D	Net uniterate	J DUSII	Tiess taxable income nom		• •	D.:i-	or Year	Current Year	
	8	Contributio	ac and	d grants (Part VIII, line 11	. \		FIIO	9,343,900	10,290,140	
ē	9			revenue (Part VIII, line 20				88,249,621	98,035,455	
Ravenue	10			ne (Part VIII, column (A),				3,079,793	911,795	
쥰	11			art VIII, column (A), lines				2,871,348	1,992,804	
	12			dd lines 8 through 11 (mus				2,871,348	1,992,804	
	12							103,544,662	111,230,194	
	13			ar amounts paid (Part IX, c				31,377,659	35,199,593	
	14	Benefits pa	d to o	r for members (Part IX, co	lumn (A), line 4)			0	0	
co.	15	Salaries, ot	herco	ompensation, employee be	nefits (Part IX, column	(A), lines 5	-			
<u>ي</u>		10)						38,687,728	40,459,600	
Бхрепзея	16a			raising fees (Part IX, colu				0	0	
五	Ь			enses (Part IX, column (D), line						
	17			Part IX, column (A), lines				30,998,023	34,619,519	
	18			Add lines 13–17 (must eq				101,063,410	110,278,712	
. 02	19	Revenue les	sexp	enses Subtract line 18 fr	om line 12		 	2,481,252	951,482	
Net Assets or Fund Balances								g of Current 'ear	End of Year	
95 E	20	Total asset	s (Pari	t X, line 16)				231,080,700	239,893,130	
A AB	21			Part X, line 26)				60,516,233	60,310,510	
2 2 2 3 3	22		-	d balances Subtract line 2				170,564,467	179,582,620	
Par	t II	Signatur								
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge								
Sign		*****	6 . 55					-01-13		
Here	;	Signature o	or office	Г			Date			
				FINANCE & ADMIN						
	-	Type or pri	nt name	e and title		<u> </u>				
		Preparer's	Kay He	enarty	Date		heck if elf-	Preparer's ident	ıfyıng number s)	
Paid		signature	кау пе	-guilty				(SSC MISHACHOTT	-,	
Prena	rer's	Firm's name (d	empolyed 🕨							
		if colf		RSM MCGLADREY INC	FIN b					
Use C		ıf self-employe address, and Z	d),	RSM MCGLADREY INC 221 THIRD AVENUE SE SUI	TE 300			EIN 🕨		
			d),	P				EIN ▶ Phone no ▶ (319) 298-5333	

May the IRS discuss this return with the preparer shown above? (see instructions)

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Total program service expenses►\$

4e

LUTHER COLLEGE IS A FOUR-YEAR, RESIDENTIAL LIBERAL ARTS INSTITUTION AFFILIATED WITH THE EVANGELICAL LUTHERAN CHURCH IN AMERICA FOUNDED IN 1861 (INCORPORATED 1865) BY NORWEIGIAN IMMIGRANTS, THE COLLEGE OFFERS MORE THAN 60 MAJORS, MINORS, AND PREPROFESSIONAL PROGRAMS LEADING TO THE BACHELOR OF ARTS DEGREE (B A), WITH THE GREATEST NUMBER OF GRADUATES COMING FROM BIOLOGY, EDUCATION, AND MUSIC NEARLY 40 STATES AND MORE THAN 50 COUNTRIES ARE REPRESENTED IN THE 2,500-MEMBER STUDENT BODY LUTHER'S MISSION STATEMENT EMPHASIZES FAITH, LEADERSHIP, AND SERVICE TO THE LARGER WORLD ITS 800-ACRE CAMPUS, LOCATED IN THE BLUFF COUNTRY OF NORTHEAST IOWA ALONG THE UPPER IOWA RIVER, IS AMONG THE MOST BEAUTIFUL IN REGION AND REINFORCES THE COLLEGE'S STRONG COMMITMENT TO ENVIRONMENTAL STEWARDSHIP LUTHER IS FULLY ACCREDITED BY THE HIGHER LEARNING COMMISSION OF THE NORTH CENTAL ASSOCIATION OF COLLEGES AND SCHOOLS

2		n undertake any significa or 990-EZ?	ant program se	ervices during the year	which were not listed on	Yes ✓ No
	If "Yes," describe t	hese new services on Sc	hedule O			
3	Did the organizatio	n cease conducting, or n	nake significar	nt changes in how it co		Yes 🗸 No
	If "Yes," describe t	hese changes on Schedu	ıle O			
4	Section 501(c)(3)	• • •	ons and secti	on 4947(a)(1) trusts a	largest program services by ex ire required to report the amoun service reported	•
4a	(Code) (Expenses \$	67,629,431	ıncludıng grants of \$	35,199,593) (Revenue \$	79,184,768)
	WORKSHIP, AND SOC THE FALL OF 2009 55	IAL RELATIONSHIPS MERGE TO	O CREATE AN UNI THE 2009-10 ACA	DERSTANDING OF THE WHO	CHURCH HERE CREATIVE SCHOLARSI DLENESS OF LIFE TOTAL ENROLLMENT LEGE OFFERS 37 MAJORS, 32 MINORS	WAS 2,488 FTE STUDENTS IN
4b	(Code) (Expenses \$	14,590,991	ıncludıng grants of \$	0) (Revenue \$	1,160,996)
	COLLEGE HAS OVER 1	00 STUDENT ORGANIZATÍONS CENTER, A CAMPUS HEALTH SI	, ALONG WITH CO	OLLEGE MINISTRIES, ACADE	NSIVE LIBRARY AND INFORMATION SER MIC SUPPORT SERVICES, RECREATION ITIAL LIFE PROGRAMS, AND ADMISSION	AND WELLNESS PROGRAMS
	(Code) (Expenses \$	16,459,866	ıncludıng grants of \$	0) (Revenue \$	17,638,204)
		SES IN THE FALL OF 2009, 2, D THE COLLEGE'S DINING SER			RESIDENCE HALLS WITH AN OCCUPAN	CY RATE OF 101 37% AND
	Other program se	rvices (Describe in Sch	edule O) See	also Additional Data fo	or Description	
	(Expenses \$	1,278,265 incl	luding grants o	of\$) (Revenue \$)

99,958,553

			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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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	ļ	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		No
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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the 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		No
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	Yes	
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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
	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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		Νο
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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
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	

orm 990 (2009)				
Part V	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No

			Yes	NO
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 4,256			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
ь	If "Yes," enter the name of the foreign country ▶UK, MT, NO			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
	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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

700 COLLEGE DRIVE DECORAH,IA 52101 (563) 368-1015

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			
ь	Enter the number of voting members that are independent 1b 30	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its organizational documents since the prior Form 990 was			
5	filed?	5		No No
5 6	Did the organization become aware during the year of a material diversion of the organization's assets?	6	Yes	NO
0 7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	<u> </u>	163	
,	governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b	Yes	
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
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)		V	
10-	Does the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		NO
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
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?			
	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			
	16b			
	ction 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			
19	Own website Another's website Vupon request 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 DIANE TACKE	ne orga	ınızatıor	า 📂

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 not compensate any current or former officer, director, trustee or key employee										
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

2	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? If "Yes," complete Schedule J for such individual	3	Yes		
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 I for such				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services				
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo	

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
SODEXO FINANCIAL SERVICES 10 EARHART DRIVE	DINING SERVICES	6,047,451
WILLIAMSVILLE, NY 14221	DIVING SERVICES	0,017,131
OPUS NW CONSTRUCTION CORP	CONCEDUCTION	2 662 206
10350 BREN RD WEST MINNETONKA, MN 55343	CONSTRUCTION	2,663,306
WICK'S CONSTRUCTION INC	CONCEDUCATION	556 550
PO BOX 428 DECORAH, IA 52101	CONSTRUCTION	556,559
BEYNON SPORTS SURFACES	CONCERNATION	275 646
16 ALT ROAD HUNT VALLEY, MD 21030	CONSTRUCTION	375,616
REILLY CONSTRUCTION COMPANY		
110 MAIN STREET OSSIAN, IA 52161	CONSTRUCTION	338,267
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►10) who received more than	

Color	Part \	/	Statement o	t kevenue					
Business Code	lb .s	1-	Fodoroted	opiane 4-			Related or exempt function	Unrelated business	Revenue excluded from tax under sections 512,513,or
Page	뚩								
Page	뙲	b	Membership du	es 1b					
Page	ું #	С	Fundraising eve	ents 1c	45,558				
Page	<u>≅,≅</u>	d	Related organız	ations 1d					
Page	<u>چ ≅</u>	e	Government grants	(contributions) 1e	2,984,218				
Page	ેં કેં	f	All other contributio	ns, gifts, grants, and 1f	7,260,364				į
Page	至	_ a							
Business Code	Ę÷.	9	lines 1a-1f \$	39,321					
Business Code	중투	h			▶	10,290,140			
20 100					Business Code				
1	e E	22	TUITTON & FEES			70 194 769	70 194 769		
1	Ja,			DE ALIV	· +			E4 407	
100 100	强	_			· ·	, ,		51,487	
1	ACE	C	SALES & SERVICE (DF EDU	611,710	1,160,996	1,160,996		
1	<u>.</u>	d							
1	Ē	e							
100 100	<u>≧</u> 25	f	All other progra	m service revenue					
3 Investment income (including dividends, interest and others imilar amounts)	<u>چ</u>	"	Total Add lines	: 2a-2f		08 U3E 4EE			
### 2,161,799 2,161,799 2,161,799 2,161,799 ### 2,161,799 2,161,799 2,161,799 2,161,799 ### 2,161,799 2,161,799 2,161,799 2,161,799 ### 2,161,799 2,161,799 2,161,799 2,161,799 ### 2,161,799 2,161,799 2,161,799 2,161,799 ### 2,161,799 2,161,799		-			-	20,020,433			
The property of the process Part		1				2,161,799			2,161,799
10 10 10 10 10 10 10 10		4			F				
Comparison Com					H				
Sea Gross Rents 88,981			[
Remail income or (loss) -29,318 -2		6a	Gross Rents		, ,				
C Retatal income -29,318 -29,318 -29,318		ь		118,299					
Total revenue See Instructions			•	-29.318					
(i) Securities (ii) Other (iii) Securities (iii) Other (i		`	or (loss)	,		20.240			20.040
Ta Gross amount from sales of mos sales of mos sales of mos sales of mos sales of assets other than numeritory b Less cost or of other bases and sales expenses c Gain or (loss) d Net gain or (loss) -1,274,806 24,802 d Net gain or (loss) -1,274,806 24,802 d Net gain or (loss) -1,274,806 24,802 d Net gain or (loss) -1,250,004 -1,		d	Net rental incor			-29,318			-29,318
from sales of assets other than inventory b Less cost or other basis and sales expenses c Gam or (loss) -1,274,806		l_	Cross amount						
Total revenue Less cost or on the basis and sales expenses 18,780,308 18,78		/7a	from sales of	17,505,502	24,802				
b less cost or 18,780,308									
Sales expenses C Gam or (loss) C C C C C C C C C		ь		18,780,308					
### A Net gain or (loss)									
Sa Gross income from fundraising events (not including \$ 45,558 of contributions reported on line 1c)		С	Gain or (loss)	-1,274,806	· ·				
events (not including \$ 45,558 of contributions reported on line 1c) See Part IV, line 18		d	Net gain or (los	s)		-1,250,004			-1,250,004
9a Gross income from gaming activities See Part IV, line 19	Revenue	8a	events (not incl \$45, of contributions	uding .558 reported on line 1c) e 18					
9a Gross income from gaming activities See Part IV, line 19	<u>.</u>	_							
9a Gross income from gaming activities See Part IV, line 19	훚					2.001			2.001
See Part IV, line 19	0				events F	-3,081			-3,081
c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances		ya 		e 19					
10a Gross sales of inventory, less returns and allowances . a b Less cost of goods sold . b c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a MISCELLANEOUS 5UMMER PROGRAMS 721,000 266,344 21,930 244,414 c ALTERNATIVE INVESTMENT 611,310 173,926 d All other revenue 10 Total revenue. See Instructions		b	Less direct exp	penses b					
Total revenue See Instructions See Instructio		С	Net income or (loss) from gaming acti	vities				
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a MISCELLANEOUS 611,310 1,230,129 1,230,129 b SUMMER PROGRAMS 721,000 266,344 21,930 244,414 c ALTERNATIVE INVESTMENT 611,310 173,926 173,926 d All other revenue 354,804 -11,541 366,345 e Total. Add lines 11a-11d 2,025,203 2,025,203 12 Total revenue. See Instructions 111,230,194 97,983,968 61,876 2,894,210		10a		wances .					
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a MISCELLANEOUS 611,310 1,230,129 1,230,129 b SUMMER PROGRAMS 721,000 266,344 21,930 244,414 c ALTERNATIVE INVESTMENT 611,310 173,926 173,926 d All other revenue 354,804 -11,541 366,345 e Total. Add lines 11a-11d 2,025,203 2,025,203 12 Total revenue. See Instructions 111,230,194 97,983,968 61,876 2,894,210		ь	Less cost of ac						
MISCELLANEOUS 611,310 1,230,129 1,230,129 b SUMMER PROGRAMS 721,000 266,344 21,930 244,414 c ALTERNATIVE INVESTMENT 611,310 173,926 173,926 d All other revenue 354,804 -11,541 366,345 e Total. Add lines 11a-11d 2,025,203 2,025,203 12 Total revenue. See Instructions 111,230,194 97,983,968 61,876 2,894,210					entory 🕨				
b SUMMER PROGRAMS 721,000 266,344 21,930 244,414 c ALTERNATIVE INVESTMENT 611,310 173,926 173,926 d All other revenue 354,804 -11,541 366,345 e Total. Add lines 11a-11d 2,025,203 2,025,203 12 Total revenue. See Instructions 111,230,194 97,983,968 61,876 2,894,210									
b SUMMER PROGRAMS C ALTERNATIVE INVESTMENT d All other revenue		11a				1,230,129			1,230,129
C ALTERNATIVE INVESTMENT d All other revenue		١.			721,000	266,344		21,930	244,414
d All other revenue					· ·	·		_,- 30	,
e Total. Add lines 11a-11d					011,510	·		_11 E/11	-
12 Total revenue. See Instructions		I				334,004		-11,541	300,343
111,230,194 97,983,968 61,876 2,894,210		e	iotal. Add lines	11a-11d		2,025,203			
		12	Total revenue.	See Instructions .	▶	111,230,194	97,983,968	· · · · · · · · · · · · · · · · · · ·	

	990 (2009)				Page 10
Pari	t IX Statement of Functional Expenses				
Δ	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	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
7b, 8l	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $\!$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	35,199,593	35,199,593		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,101,025	458,831	477,320	164,874
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	20,737		20,737	
7	Other salaries and wages	28,508,081	24,512,281	2,620,279	1,375,521
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,330,928	1,974,927	232,211	123,790
9	Other employee benefits	6,565,753	5,624,922	643,607	297,224
10	Payroll taxes	1,933,076	, ,	 	103,455
11	Fees for services (non-employees)				· · · · · · · · · · · · · · · · · · ·
а	Management				
Ь	Legal	56,474	4,070	49,341	3,063
c	Accounting	87,010		87,010	<u> </u>
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	145,657	57,586	82,061	6,010
13	Office expenses	2,763,031	2,499,585		110,191
14	Information technology	181,758	63,196	73,682	44,880
15	Royalties	,	,	·	
16	Occupancy	9,435,180	8,715,087	360,046	360,047
17	Travel	2,445,817	2,259,393	 	78,164
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	, ,	, ,	,	, <u>, </u>
19	Conferences, conventions, and meetings	1,358,974	1,115,806	86,264	156,904
20	Interest	853,740	769,037	42,352	42,351
21	Payments to affiliates	,	,	·	<u>·</u>
22	Depreciation, depletion, and amortization	5,797,803	5,433,527	91,069	273,207
23	Insurance		. , = -	, ,	· · ·
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	EQUIPMENT RENTAL/MAINTE	7,358,108	6,311,894	799,861	246,353
ь	OPERATION AND MAINTENAN	1,853,634	1,574,723	 	139,456
С	MISCELLANEOUS	1,394,719	1,247,581	129,506	17,632
d	PRINTING	588,867	337,600	162,454	88,813
e	POSTAGE	298,747	162,161	89,379	47,207
f	All other expenses				<u> </u>
25	Total functional expenses. Add lines 1 through 24f	110,278,712	99,958,553	6,641,017	3,679,142
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 campaign and fundraising solicitation	,,	,,-	,	, ,

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			26,322,482	2	29,720,273
	3	Pledges and grants receivable, net			5,034,962	3	4,921,547
	4	Accounts receivable, net			142,270	4	217,778
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net			2,058,741	7	2,060,317
Ŝ	8	Inventories for sale or use			530,449	8	493,003
⋖	9	Prepaid expenses and deferred charges			367,847	9	268,508
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	164,519,940			
	ь	Less accumulated depreciation	10b	77,303,156	78,923,574	10c	87,216,784
	11	Investments—publicly traded securities			75,234,868	11	81,827,500
	12	Investments—other securities See Part IV, line 11			18,592,609	12	18,676,985
	13	Investments—program-related See Part IV, line 11			7,247,350	13	7,386,196
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			16,625,548	15	7,104,239
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			231,080,700	16	239,893,130
	17	Accounts payable and accrued expenses .			7,903,281	17	8,141,958
	18	Grants payable			5,731,474	18	5,721,730
	19	Deferred revenue			648,856	19	314,397
_	20	Tax-exempt bond liabilities			32,372,463	20	31,138,520
Sej	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	,				
ä		persons Complete Part II of Schedule L \ldots				22	
	23	Secured mortgages and notes payable to unrelated third parties		•	566,424	23	364,049
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			13,293,735	25	14,629,856
	26	Total liabilities. Add lines 17 through 25			60,516,233	26	60,310,510
Fund Balances		Organizations that follow SFAS 117, check here ► ✓ and complete through 29, and lines 33 and 34.	olet e l	ines 27			
anı	27	Unrestricted net assets			78,330,122	27	80,524,996
Ba	28	1				28	18,058,481
Ξ	29	Permanently restricted net assets			76,682,426	29	80,999,143
Ē		Organizations that do not follow SFAS 117, check here 🕨 🦵 as	nd con	nplete			
oľ.		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 for	ınds			32	
Net	33	Total net assets or fund balances			170,564,467	33	179,582,620
I	34	Total liabilities and net assets/fund balances			231,080,700	34	239,893,130

			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)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

LUTHER COLLEGE Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 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 than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box 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) Yes No 11g(i) and (III) below, the governing body of the the supported organization? (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? 11g(iii) h Provide the following information about the supported organization(s) (iii) (iv) (vi) (v) Type of Is the Did you notify the Is the (i) organization organization in (vii) organization in Name of (ii) (described on organization in col (i) listed in A mount of col (i) of your col (i) organized EIN lines 1-9 above supported your governing support? support? in the US? organization or IRC section document? (see Yes No Yes No Yes instructions))

Total

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.	÷·/		
	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						
11	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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As Filed Data -

DLN: 93493014010021

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

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.

Internal Revenue Service Name of the organization **Employer identification number** LUTHER COLLEGE 42-0680466 Person Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the

	organization answered "Yes" to Form	(a) Donor advised funds	(b) Funds and other	accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor actions are the organization's property, subject to the	_	_	Yes
6	Did the organization inform all grantees, donors, as used only for charitable purposes and not for the b conferring impermissible private benefit		any other purpose	Yes
Pai	t III Conservation Easements. Complet	e if the organization answered "Yes'	' to Form 990, Part IV, lın	e 7.
1	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recre Protection of natural habitat	ation or pleasure) Preservation of	an historically importantly la a certified historic structure	nd area
	Preservation of open space	,		
2	Complete lines 2a-2d if the organization held a que easement on the last day of the tax year	alified conservation contribution in the fo	rm of a conservation	
	easement on the last day of the tax year		Held at the End	of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easemer	nts	2b	
c	Number of conservation easements on a certified	nistoric structure included in (a)	2c	
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d	
3	Number of conservation easements modified, trans	sferred, released, extinguished, or termina	ated by the organization durin	g
	the taxable year 🗠			
4	Number of states where property subject to conse	rvation easement is located ►		
5	Does the organization have a written policy regard enforcement of the conservation easements it hold			Yes
5	Staff and volunteer hours devoted to monitoring, in	specting and enforcing conservation eas	ements during the year 🛌	
7	A mount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easeme	nts during the year ▶ \$	
8	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of s	ection	Yes
9	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financ		S
Par	Complete if the organization answere		s, or Other Similar Ass	ets.
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	eld for public exhibition, education or rese	arch in furtherance of public s	
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these ite	or public exhibition, education, or researc		
	(i) Revenues included in Form 990, Part VIII, line	1	► \$	C
	(ii) Assets included in Form 990, Part X		- \$	0
2	If the organization received or held works of art, hi following amounts required to be reported under SF		for financial gain, provide th	e
	Developed to Ferre 200 Deat VIII loss 1		. .	,
а	Revenues included in Form 990, Part VIII, line 1		₽ -\$	

Par	TIL Organizations Maintaining Co	ollections of Art	, His	torical	Treas	ures, or O	the	r Similar As	sse	tS (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ıe followıı	ng that a	ire a significa	nt u	se of its collec	tion		
а	Public exhibition		d	√ Lo	an or ex	change progr	ams				
b	Scholarly research		e	┌ ot	her						
c	▼ Preservation for future generations										
4	Provide a description of the organization's content XIV	ollections and expla	ın hov	v they fur	rther the	organization	's ex	empt purpose	ın		
5	During the year, did the organization solicite assets to be sold to raise funds rather than			,				ılar	┌ \	/es	√ No
Pai	t IV Escrow and Custodial Arrang					n answere	d "Y	es" to Form	990	,	
	Part IV, line 9, or reported an ar			•							
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					or other ass	ets r	not	Γ·	'es	∏ No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table		г					
_							4 -	A	moui	<u></u>	
C	Beginning balance					-	1c				
d	Additions during the year						1d				
e	Distributions during the year					-	1e				
f	Ending balance					L	1f		_		
2a	Did the organization include an amount on F		21?						Γ,	'es	No
	If "Yes," explain the arrangement in Part XI\			1 11	137 11 1 -	F 000	D-	1.77.1 40			
Рa	rt V Endowment Funds. Complete	If the organization (a)Current Year		wered ")Prior Yea				<u>t IV, line 10.</u>)Three Years Back		Four Ye	ears Back
1a	Beginning of year balance	94,831,214		120,812		, ivo rears bac	\(\(\frac{\chi}{a}\)	Timee rears back	1	1041 10	ars back
b	Contributions	4,419,467		3,720	0,052						
С	Investment earnings or losses	8,669,457		-24,637	7,873						
d	Grants or scholarships	2,814,961		2,772	2,337						
e	Other expenditures for facilities and programs	2,240,807		2,291	1,033						
f	Administrative expenses										
g	End of year balance	102,864,370		94,831	1,214						
2	Provide the estimated percentage of the year	r end balance held a	15		·						
- а	Board designated or quasi-endowment	28 200 % %									
ь	Permanent endowment F 71 800 % %	70									
	remanent endowment P)									
c 3a	Term endowment ► 0 % % Are there endowment funds not in the posse	ssion of the organiza	ation 1	that are l	neld and	administered	lfor	the			
	organization by	oorom or the organiza								Yes	No
	(i) unrelated organizations							3a	(i)		Νo
	(ii) related organizations							· · · -	(ii)		N o
	If "Yes" to 3a(II), are the related organizatio						•	3	b		
4	Describe in Part XIV the intended uses of the trial trial trial trials.					Dart V Juna	1.0				
Pal	TO VI Investments—Land, Building: Description of investment	s, and Equipme	II t. 5	(a) Cost	or other	(b)Cost or of	her	(c) Accumulate	d	(d) Boo	ok value
4				Dasis (INV	estment)	basis (othe		depreciation	+		
	Land				1 646 510		,581	40 700 6	0.1		594,581
	Buildings		•	-	1,646,519	· ·	-	48,790,6	-		1,285,443
	Leasehold improvements		•			12,878		7,513,6	-		5,364,793
	Equipment		•			27,970	,193	20,998,8	20		5,971,967
е	Other			İ		1		I	1		

87,216,784

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	18,447,916	
Closely-held equity interests	20,117,520	·
Other		
REAL ESTATE	221,942	F
NOTES RECEIVABLE	7,127	F
	·	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	18,676,985	
Part VIII Investments—Program Related. See	Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
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	, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
ANNUITIES PAYABLE	5,160,690	
ASSET RETIREMENT OBLIGATION	2,442,471	
DEPOSITS HELD IN CUSTODY FOR OTHERS	472,420	
OTHER LIABILITIES	6,554,275	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	14,629,856	
, , , , , , , , , , , , , , , , , , ,	17,023,030	

Page 4		dule D (Form 990) 2009	Sche
	ıts	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	Par
111,230,194	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
110,278,712	2	Total expenses (Form 990, Part IX, column (A), line 25)	2
951,482	3	Excess or (deficit) for the year Subtract line 2 from line 1	3
7,497,671	4	Net unrealized gains (losses) on investments	4
	5	Donated services and use of facilities	5
	6	Investment expenses	6
	7	Prior period adjustments	7
569,000	8	Other (Describe in Part XIV)	8
8,066,671	9	Total adjustments (net) Add lines 4 - 8	9
9,018,153	10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10
turn	er R	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	Par
84,215,571	1	Total revenue, gains, and other support per audited financial statements	1
		A mounts included on line 1 but not on Form 990, Part VIII, line 12	2
		Net unrealized gains on investments	а
		Donated services and use of facilities	b
		Recoveries of prior year grants	c
		Other (Describe in Part XIV)	d
8,653,069	2e	Add lines 2a through 2d	e
75,562,502	3	Subtract line 2e from line 1	3
		A mounts included on Form 990, Part VIII, line 12, but not on line 1	4
		Investment expenses not included on Form 990, Part VIII, line 7b . 4a	а
		Other (Describe in Part XIV)	b
35,667,692	4c	Add lines 4a and 4b	c
111,230,194	5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
75,197,418	per	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	
75,197,416	1	statements	1
		Amounts included on line 1 but not on Form 990, Part IX, line 25	2
		Donated services and use of facilities	а
		Prior year adjustments	b
		Other losses	c
		Other (Describe in Part XIV) 2d 118,299	d
118,299	2e	Add lines 2a through 2d	e
75,079,119	3	Subtract line 2e from line 1	3
		A mounts included on Form 990, Part IX, line 25, but not on line 1:	4
		Investment expenses not included on Form 990, Part VIII, line 7b 4a	а
		Other (Describe in Part XIV)	Ь
35,199,593	4c	Add lines 4a and 4b	c
110,278,712	5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5 Par

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

Ident if ier	Return Reference	Explanation
Part III, Line 4		WORKS IN THE COLLECTION INCLUDE PAINTINGS, DRAWINGS, WORKS PRODUCED THROUGH PRINT, PHOTOGRAPHIC, OR OTHER TECHNIQUES WHICH PRODUCE MULTIPLE ORIGINALS, SCULPTURE IN MEDIA, ASSEMBLAGES, TEXTILE, CERAMICS, AND UTILITARIAN OR RITUAL OBJECTS IN ANY MEDIUM WHOSE PRINCIPLE VALUE RESIDES IN THEIR AESTHETIC MERIT THE FINE ARTS COLLECTION EXISTS TO SUPPORT THE GENERAL MISSION OF THE COLLEGE BY PROMOTING AWARENESS AND UNDERSTANDING OF A BROAD SPECTRUM OF ARTISTIC EXPRESSION THROUGH DIVERSITY IN MEDIA, CULTURE, AND HISTORICAL PERSPECTIVE AS UNIQUE EXPRESSIONS OF THE HUMAN CONDITION, WORKS IN THE COLLECTION INVIGORATE LEARNING AND TEACHING, AND PROVIDE EXPANDED OPPORTUNITIES FOR STUDY, RESEARCH, AND INDIVIDUAL PLEASURE
Part V, Line 4	Description of Intended Use of Endowment Funds	TO AWARD SCHOLARSHIPS TO STUDENTS AND TO COVER PROGRAM RELATED EXPENSES
Part X	Description of Uncertain Tax Positions Under FIN 48	IN ACCORDANCE WITH THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THE COLLEGE HAS ADDRESSED THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE COLLEGE MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERIT OF THE POSITION EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE COLLEGE AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME THERE WERE NO SIGNIFICANT UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES DURING FISCAL YEAR 2010 OPEN TAX YEARS SUBJECT TO EXAMINATION BY THE US AND STATE TAXING AUTHORITIES ARE FOR THE YEARS 2007 TO 2009, WHICH STATUTES EXPIRE IN 2010 TO 2012, RESPECTIVELY
Part XI, Line 8 - Other Adjustments		ACTUARIAL ADJUSTMENTS 1037099 INTEREST RATE SWAP -479640 BOOK/TAX DIFFERENCE FROM K-1S 11541
Part XII, Line 2d - Other Adjustments		RENTAL EXPENSE 118299 ACTUARIAL ADJUSTMENTS 1037099
Part XII, Line 4b - Other Adjustments		FUNDED/UNFUNDED SCHOLARSHIPS 35199593 INTEREST RATE SWAP 479640 BOOK/TAX DIFFERENCE FROM K-1S -11541
Part XIII, Line 2d - Other Adjustments		RENTAL EXPENSE 118299
Part XIII, Line 4b - Other Adjustments		FUNDED/UNFUNDED SCHOLARSHIPS 35199593

Employer identification number

Schools

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13,

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

Name of the organization LUTHER COLLEGE

42-0680466 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? 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," 3 Yes THE COLLEGE CATALOG, VIEW BOOK, APPLICATION FOR ADMISSION, ADMISSIONS GENERAL INFORMATION BROCHURE, AND THE STUDENT HANDBOOK ALL CONTAIN THE COLLEGE'S NONDISCRIMINATORY POLICY THESE MAJOR PUBLICATIONS ARE PROVIDED TO ALL STUDENTS THROUGHOUT THE ADMISSIONS AND ORIENTATION PROCESS BECAUSE THE COLLEGE TYPICALLY DRAWS APPROXIMATELY 32 PERCENT OF OUR STUDENTS FROM IA, 36 PERCENT FROM MN, 13 PERCENT FROM WI, 6 PERCENT FROM IL, 8 PERCENT FROM OUTSIDE THE 4 STATE AREA, AND 5 PERCENT INTERNATIONALLY, WE BELIEVE THAT WE QUALIFY FOR THE PUBLICITY EXCEPTION NOTICE PROVIDED BY SECTION 4 01(2(B) OF REV PROC 75-50 THE COLLEGE IS ACTIVELY COMMITTED TO PROVIDING OPPORTUNITIES TO STUDENTS FROM DIVERSE BACKGROUNDS A COORDINATED MULTICULTURAL AND INTERNATIONAL RECRUITMENT EFFORT EXISTS, COUPLED WITH A STRONG NETWORK OF ADVOCACY AND SUPPORT FOR STUDENTS FROM DIVERSE BACKGROUNDS AS EVIDENCE OF THE COLLEGE'S COMMITTMENT, NEARLY 7 PERCENT OF OUR STUDENTS ARE RACIAL MINORITY STUDENTS 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, 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? Νo 5c d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Nο f Use of facilities? 5f Νo g Athletic programs? Νo h Other extracurricular activities? 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 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form Yes

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DLN: 93493014010021

2009

OMB No 1545-0047

Statement of Activities Outside the United States

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

Open to Public

Inspection

Name of the organization LUTHER COLLEGE

SCHEDULE F

Department of the Treasury Internal Revenue Service

(Form 990)

Employer identification number

				42-0680466	5
Part I General Infor "Yes" to Form 9			de the United States	s. Complete if the organ	nization answered
_	_			the amount of the grant lection criteria used to a	
the grants or assistan	ce [?]				
2 For grant makers. Descri United States	be in Part IV the	organization's pr	ocedures for monitoring th	ne use of grant funds outsıd	e the
3 Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed)	T	_
(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
SOUTH AMERICA			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	93,100
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	184,007
EUROPE (INCLUDING ICELAND AND GREENLAND)			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	918,602
CENTAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	38,634
SUB-SAHARAN AFRICA			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	249,067
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	118,336
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	29,113
EUROPE (INCLUDING ICELAND AND GREENLAND)			INVESTMENTS		0
CENTAL AMERICA AND THE CARIBBEAN			INVESTMENTS		0
	i			I	I

Totals ▶

1,630,859

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: 93493014010021

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Internal Revenue Service Name of the organization **Employer identification number** LUTHER COLLEGE

					42-0680460	5
	ctivities. Comple ers are not require				s" to Form 990, Part I\	V, line 17.
Indicate whether the orga	anızatıon raısed fund	s through a	any of the		Check all that apply	
a	-1		e		non-government grants government grants	
c Phone solicitations	olicitations		q	Special fundrai		
d In-person solicitation	าร		g	i Special lulidrai	sing events	
2a Did the organization have or key employees listed i						Г _{Yes} Г
b If "Yes," list the ten higher to be compensated at lea						
(i) Name of Individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contribi	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No		.,	
			_			
otal			.			

Pai	rt II	Fundraising Events. Components than \$15,000 on Form					report	:ed
			(a) Event #1 ALUMNI FUNDRAISING (event type)	(b) Event #2 GOLF OUTING (event type)	(c) O ther Events 2 (total number)	(d) Tot (Add col co		
IKLE	1	Gross receipts	26,15!	19,609	33,027		7	8,791
Revenue	2	Less Charitable contributions	19,06	8,858	17,635		4	5,558
_	3	Gross income (line 1 minus line 2)	7,090	10,751	15,392		3	3,233
	4	Cash prizes						
9.	5	Non-cash prizes		1,180	761			1,941
Expenses	6	Rent/facility costs	2,197	7 7,652	11,425		2	1,274
	7	Food and beverages	4,330	0				4,330
Direct	8	Entertainment						
Δ	9	Other direct expenses .	4,214	1,148	3,407		1	8,769
	10	Direct expense summary Add line	es 4 through 9 ın columr	ı(d)	🛌		3	6,314
	11	Net income summary Combine lir						3,081
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
မှ	2	Cash prizes						
bens	3	Non-cash prizes						
Direct Expenses	4	Rent/facility costs						
ē Ā	5	Other direct expenses						
	6	Volunteer labor	∀es% No	Г Yes	Г Yes% Г No			
	7	Direct expense summary Add lines	2 through 5 in column ((d)				
	8	Net gaming income summary Com	bine lines 1, column d, a	nd line 7	<u> ▶</u>		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
9 a		ter the state(s) in which the organiza the organization licensed to operate				. 9a	Yes	No
b	If"	No," Explain						
10a b		re any of the organization's gaming l Yes," Explain	ıcenses revoked, susper	nded or terminated during	the tax year?	10a		
11 12		es the organization operate gaming a				11		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493014010021

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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

Inspection

Name of the organization							Employer Identifica	tion number
LUI	HER COLLEGE	42-0680466						
Pa	rt I General Infor	mation on Grants	and Assistance				•	
1 2	Does the organization mathe selection criteria use Describe in Part IV the o	ed to award the grants	or assistance?				•	▽Yes □N
Pa	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
(8	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)		(h) Purpose of grant or assistance

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

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
STUDENT SCHOLARSHIPS	1664		35,199,593		
See Addıtıonal Data Table					

ental Information. Complete t	his part to provide the information required in Part I, line 2, and any other additional information.
Return Reference	Explanation
	Schedule I, Part I, Line 2 STUDENTS RECEIVING SCHOLARSHIPS AND FELLOWSHIPS ARE DETERMINED BY THE OFFICE OF FINANCIAL STUDENT AID THROUGH CAREFUL STUDY OF THE INFORMATION ON THE FINANCIAL ASSISTANCE APPLICATION, THE STUDENT'S ACADEMIC RECORD, TEST SCORES, AND RECOMMENDATIONS DETAILED RECORDS AND STATISTICS ARE MAINTAINED BY THE OFFICE OF FINANCIAL AID AND THE OFFICE OF ASSESSMENT AND INSTITUTIONAL RESEARCH IN REGARDS TO ALL FINANCIAL AID AWARDED TO STUDENTS OF THE COLLEGE, INCLUDING GRANTS AND SCHOLARSHIPS
	Part I, Line 2

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DLN: 93493014010021

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

LOT	TIER COLLEGE		42-0680466			
Pa	rt I Questions Regarding Compensation	1	•			
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro- 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	▽	Housing allowance or residence for personal use			
	Travel for companions	\sqcap	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or- reimbursement orprovision of all the expenses desci	-		1b	Yes	
2	Did the organization require substantiation prior to reofficers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee	at appl				
	Independent compensation consultant	<u>'</u> -	Compensation survey or study			
	Form 990 of other organizations	<u>'</u> -	Approval by the board or compensation committee			
	1 offin 990 of other organizations	'	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	Part VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a		No
ь	Participate in, or receive payment from, a supplemen	ntal nor	iqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pro					
	Only 501(c)(3) and 501(c)(4) organizations only mu					
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebutt	able presumption 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)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a								
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and		(E) Total of columns	
		(i) Base compensation	(ii) Bonus & ıncentıve compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
RICHARD TORGERSON	(ı) (ıı)	225,125	0 0	21,960	25,000 0	32,089	304,174	0
DIANE TACKE	(ı) (ıı)	135,840	0 0	6,000	14,665 0	16,641	. 173,146	0
WILLIAM CRAFT	(ı) (ıı)	144,781 0	0	0 0	1	7,072	166,368	0
KEITH CHRISTENSEN	(ı) (ıı)	131,459 0	0 0	0 0	1	19,750	164,874 0	0
ELWIN FARWELL	(ı) (ıı)	20,737 0	0 0	0		0	20,737	0
			<u> </u>	'				
		<u> </u> '	 '	 '			<u> </u>	
		<u>-</u> '	 '	 '	<u> </u>		<u> </u> '	<u> </u>
	+	<u> </u>	 '	 		<u> </u>	<u> </u>	
	+-	 	 	 		-	 '	
	+	 						
	+		<u> </u>		,		1	
			<u>'</u>	<u></u> '				
1							Schedy	ule 1 (Form 990) 2009

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	Ret urn Ref erence	Explanation
	,	LUTHER COLLEGE PROVIDES A HOUSE, UTILITIES, AND COUNTRY CLUB DUES TO THE PRESIDENT OF THE COLLEGE, AND COUNTRY CLUB DUES TO THE VICE PRESIDENT FOR DEVELOPMENT THESE BENEFITS ARE LISTED IN THE WRITTEN COMPENSATION POLICY FOR THE COLLEGE AND ARE ALSO IN THE WRITTEN EMPLOYMENT CONTRACT OF EACH OF THESE INDIVIDUALS THE HOUSING ALLOWANCE FOR THE PRESIDENT, AND THE COUNTRY CLUB DUES FOR THE PRESIDENT AND VICE PRESIDENT FOR DEVELOPMENT ARE NOT TREATED AS TAXABLE COMPENSATION BECAUSE THE PRESIDENT'S HOUSE IS USED FOR COLLEGE BUSINESS AND MEETINGS, AND THE COUNTRY CLUB IS USED EXCLUSIVELY FOR BUSINESS PURPOSES TO BUILD RELATIONSHIPS WITH PROSPECTIVE DONORS TO THE COLLEGE

Schedule J (Form 990) 2009

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

DLN: 93493014010021

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Inspection

OMB No 1545-0047

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).

► Attach to Form 990. ► See separate instructions.

Cat No 50193E

Department of the Treasury Internal Revenue Service Name of the organization LUTHER COLLEGE

Schedule K

(Form 990)

Employer identification number 42-0680466

Schedule K (Form 990) 2009

										'- "				
Part I Bond Issues														
	(a) Issuer Name	(b) Issuer EIN (c) CUSIP #		(d) Date Issued		(e) Issue Price		(f) Description of Purpose			(g) Defeased		(h) O n Behalf of Issuer	
											Yes	No	Yes	No
A	ITY OF DECORAH 42-6004485		12-15-2004				CENTENNIAL UNION RENOVATION			Х		Х		
В	IOWA HIGHER EDUCATION LOAN AUTHORITY	42-1235696	462460F43	12-10-2008		11,0	00,000	SCIENCE BUILDING RENOVATION				х		Х
Pai	Part II Proceeds													
				Α		В		С			D		E	
1	Total proceeds of issue			3,600,000		11,000,00		00						
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasanc	e escrows												
4	Other unspent proceeds													
5	Issuance costs from proceeds			13,861		213,03		34						
6	Working capital expenditures from proceeds													
7	Capital expenditures from proceeds			3,586,139		10,786,960		66						
8	Year of substantial completion		2006		2009									
				Yes	No	Yes	No	Yes	No	Yes	No	Υe	:S	No
9	Were the bonds issued as part of a current refunding issue?				X		X							
10	Were the bonds issued as part of an advance refunding issue?				X		Х							
11	Has the final allocation of proceeds been made?			Χ		X								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?			X		Х								
Par	t IIII Private Business Use													
				Α		В			C		D	.,	E	
	Was the organization a partner in a	nartnership or a mo	umber of an IIC	Yes	No	Yes	No	Yes	No	Yes	No	Ye	5	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?			Х		Χ								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?				Х		Χ							

Page 2 Part Private Business Use (Continued) С E В D Α Yes No Yes No Yes No Yes No Yes No Are there any management or service contracts with respect to the За Х Х financed property which may result in private business use? Are there any research agreements with respect to the financed property 3Ь Х Х which may result in private business use? Does the organization routinely engage bond counsel or other outside 3с counsel to review any management or service contracts or research Х Х agreements relating to the financed property? Enter the percentage of financed property used in a private business use 4 by entities other than a section 501(c)(3) organization or a state or local 0 % 0 % government Enter the percentage of financed property used in a private business use 5 as a result of unrelated trade or business activity carried on by your 0 % 0 % organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0 % 0 % 6 Has the organization adopted management practices and procedures to 7 Χ Х ensure the post-issuance compliance of its tax-exempt bond liabilities? Part IV Arbitrage Α В C D Е No Yes No Yes Yes Nο Yes No Yes Nο Has a Form 8038-T. Arbitrage Rebate, Yield Reduction and 1 Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? Х Х Is the bond issue a variable rate issue? 2 Χ Χ Has the organization or the governmental issuer identified a 3a hedge with respect to the bond issue on its books and records? Χ Х USBANK BANK OF MONTREAL Name of provider Term of hedge 10 000000000000 10 000000000000 Were gross proceeds invested in a GIC? Х Χ 4a Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available 5 temporary period? Χ Х Did the bond issue qualify for an exception to rebate? 6

Χ

Χ

NonCash Contributions

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

DLN: 93493014010021 OMB No 1545-0047

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Schedule M (Form 990) 2009

Internal Revenue Service Name of the organization

SCHEDULE M

Department of the Treasury

(Form 990)

Inspection

JTHI	e of the organization ER COLLEGE				Employer identifica 42-0680466	tion nu	mber	
Pa	rt I Types of Property	(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(c Method of c reve	letermi	nıng	
1	Art—Works of art	аррпеавте		- 19				
	Art—Historical treasures .							
	Art—Fractional interests Books and publications			714	FMV			
	Clothing and household							
	goods	X		50	FMV			
	Cars and other vehicles Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Х	40	280,901	FMV			
	Securities—Closely held stock $$.							
L 1	Securities—Partnership, LLC, or trust interests							
L 2	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic structures							
L4	Qualified conservation							
_	contribution—Other							
	Real estate—Residential							
	Real estate—Other							
	Collectibles							
	Food inventory	X	2	505	COST			
	Drugs and medical supplies . Taxidermy							
	Historical artifacts							
	Scientific specimens	Х	2	9,124	FMV			
24	Archeological artifacts							
25	HOTEL Other►(ROOM) PRIZES FOR	X	1	217	COST			
26	GOLF Other ► (OUTING) 42 IN	х	1	450	COST			
27	KIMBALL Other►(<u>PIANO</u>)	X	1	750	FMV			
28	PICTURE Other►(FRAMING) ALL	х	1	69	COST			
	WEATHER TRACK Other ► (RENOVATION)	×	1	975	COST			
	BERM							
	Other ► (PROJECT)	X	1		COST			
	Other►(<u>GOLFTEE</u>) TRACK & FOOTBALL FIELD	^		300	031			
	ENTRANCE Other ► (PROJECT GIFT	х	2	25,878	соѕт			
	BASKET FOR ALUMNI Other►(EVENT)	×	1	220	COST			
	HOTEL & FLIGHT FOR		_					
	Other ► (<u>A MEETING</u>) COMPUTER	×	4	2,530	COST			
	Other \blacktriangleright (EQUIPMENT)	X	1	41,169	соѕт			
	DINING SUPPLIES & Other ► (<u>EQUIPMENT</u>)	X	1	18,669	соѕт			
	WORK ON FOUR Other ► (DUGOUTS)	×	1	3,800	COST			
	WORK ON STORAGE Other ► (SHED)		1		COST			
29	Number of Forms 8283 received for which the organization compl		anızatıon durıng the tax yea	ar for contributions	29			
30a	During the year, did the organiza must hold for at least three year for exempt purposes for the enti	s from the o	date of the initial contributi			30	Yes	No No
b	If "Yes," describe the arrangement					30a		140
31	Does the organization have a gif			eview of any non-standard	contributions?	31	Yes	
	Does the organization have a gri	·		•		32a	Yes	
ь 33	If "Yes," describe in Part II If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,	328	ı es	

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.

Ident if ier	Return Reference	Explanation
Method for Determining Number of Contributors	, , ,	THE NUMBER OF CONTRIBUTIONS IN COLUMN B ARE THE NUMBER OF ITEMS DONATED
Third Party Use		THE ORGANIZATION MAY AT TIMES UTILIZE INDEPENDENT BROKERS OR INDEPENDENT AGENTS TO SOLICIT, PROCESS, OR SELL GIFTS OF STOCK OR REAL ESTATE

Schedule M (Form 990) 2009

OMB No 1545-0047

SCHEDULE 0

(Form 990)

Department of the Treasury

LUTHER COLLEGE

Supplemental Information to Form 990 Complete to provide information for responses to specific questions on

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Form 990 or to provide any additional information. Internal Revenue Service ► Attach to Form 990. Name of the organization

Employer identification number

42-0680466

ldentifier	Return Reference	Explar	nation
Form 990, Part VI, Section A, line 2	Reference	DAVID LIETZ AND MIKE WIGLEY HAVE A BUSINESS RELA	ATIONSHIP
Form 990, Part VI, Section A, line 6		THE MEMBERS OF THIS CORPORATION SHALL BE THOSE AND OFFICES (A) THE VOTING MEMBERS OF THE CHURCH CHURCH IN AMERICA ENTITLED TO VOTE AT SUCH MEET AND USAGE OF SUCH CHURCH, OR ITS SUCCESSOR SUCCEPORATION UNTIL THE CONVENING OF THE SUCCEED LUTHERAN CHURCH IN AMERICA AT WHICH TIME SUCH MAT SUCH SUCCEEDING CHURCHWIDE ASSEMBLY, IN ACCEPTURCH, OR ITS SUCCESSOR (B) THE MEMBERS OF THE PRESIDENT OF THE COLLEGE OPERATED BY THIS CORPORT OF THE COLLEGE	CHWIDE ASSEMBLY OF THE EVANGELICAL LUTHERAN INGS CHOSEN IN ACCORDANCE WITH THE DISCIPLINE IICH MEMBERS SHALL REMAIN MEMBERS OF THE DING CHURCHWIDE ASSEMBLY OF THE EVANGELICAL MEMBERS SHALL GIVE PLACE TO THE VOTING MEMBERS CORDANCE WITH THE DISCIPLINE AND USAGE OF SAID E BOARD OF REGENTS OF THIS CORPORATION (C) THE
Form 990, Part VI, Section A, line 7a		THE GOVERNING BODY OF LUTHER COLLEGE IS THE BOLLISTED AS MEMBERS OF THE ORGANIZATION REGENTS SHALL BE SUBMITTED FOR RATIFICATION BY THE CORPORT	ARE ELECTED BY THE BOARD AND THEIR ELECTION
Form 990, Part VI, Section A, line 7b		THE GOVERNING BODY OF LUTHER COLLEGE IS THE BOLLISTED AS MEMBERS OF THE ORGANIZATION DECISIONS APPROVAL BY THE BOARD OF REGENTS	
Form 990, Part VI, Section B, Inne 11		THE 990 IS PREPARED BY THE ACCOUNTING MANAGER, THE VP FOR FINANCE AND ADMINISTRATION THE 990 IS REVIEW AND ENTRY INTO THEIR TAX SOFTWARE AFTER PRESENTED TO THE AUDIT COMMITTEE FOR THEIR REVIEW APPROVAL, THE 990 IS SENT TO EACH BOARD MEMBER FOR FINANCE AND ADMINSTRATION, AND A MANAGING THE IRS	THEN SENT TO THE FIRM OF RSM MCGLADREY FOR R ALL REVIEWS ARE COMPLETED, THE 990 IS W AND APPROVAL AFTER AUDIT COMMITTEE , AND THE COMPLETED FORM 990 IS SIGNED BY THE VP
Form 990, Part VI, Section B, Ine 12c		LUTHER COLLEGE'S CONFLICT OF INTEREST POLICY AND OF REGENTS, PRESIDENT, VICE PRESIDENTS, AND KEY E EACH RECIPIENT IS REQURIED TO READ THE POLICY AND STATEMENT TO THE OFFICE FOR FINANCIAL SERVICES TO COULD GIVE RISE TO CONFLICTS LUTHER COLLEGE'S COSTATEMENT ADDRESSES ALL AREAS OF CONCERN EXP	O TO COMPLETE, SIGN, AND RETURN THE DISCLOSURE TO BE REVIEWED FOR POTENTIAL INTERESTS THAT ONFLICT OF INTEREST POLICY AND DISCLOSURE
Form 990, Part VI, Section B, line 15		THE DIRECTOR OF HUMAN RESOURCES AND THE PRESIDENCHMARK SALARY DATA 1 MEDIAN SALARIES FOR COMPARABLE ENROLLMENT 2 MEDIAN AND MAXIMUM SMEDIAN AND MAXIMUM SALARIES FOR 7 COMPARABLE SALARIES FOR 5 COMPARABLE IAICU COLLEGES THE PRESIDENTIAL AND VICE PRESIDENTIAL BENCHMARI AT THE MAY BOARD MEETING, THE BOARD OF REGENTS BENCHMARK INDICATORS AND WILL DETERMINE AND AFPRESIDENTS OF THE COLLEGE THE BOARD OF REGENTS COMPENSATION BENEFITS PROVIDED TO THE OFFICERS NOTIFY THE DIRECTOR OF HUMAN RESOURCES WITH THE AND VICE PRESIDENTS WILL BE RECORDED IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUT CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPARABLE IN THE MINUTED TH	CUPA PRIVATE RELIGIOUS COLLEGES WITH SALARIES FOR 21 SELECTED ELCA COLLEGES 3 PEER ELCA COLLEGES 4 MEDIAN AND MAXIMUM RESIDENT OF THE COLLEGE WILL REVIEW AND PRESENT K SALARY INFORMATION TO THE BOARD OF REGENTS WILL MEET TO REVIEW THE FOUR SALARY PROVE COMPENSATION FOR THE PRESIDENT AND VICE WILL ALSO REVIEW THE NON-SALARY THE CHAIRPERSON OF THE BOARD OF REGENTS WILL E APPROVAL OF COMPENSATION FOR THE PRESIDENT TES OF THE MEETING AND WILL BE MAINTAINED IN A
Form 990, Part VI, Section C, line 19		COPIES OF LUTHER COLLEGE'S GOVERNING DOCUMENTS STATEMENTS, AND FORMS 990 & 990T ARE AVAILABLE FINANCIAL SERVICES, 700 COLLEGE DRIVE, DECORAH, I ALSO AVAILABLE ONLINE AT WWW LUTHER EDU/FINAN	TO THE PUBLIC UPON REQUEST AT THE OFFICE FOR A 52101 THE AUDITED FINANCIAL STATEMENTS ARE
or Panerwork Re	duction Act Notice	see the Instructions for Form 990 Cat No	51056K Schedule O (Form 990) 2009

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OMB No 1545-0047

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SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

LUTHER COLLEGE

Employer identification number

				42-0680466		
Part I Identification of Disregarded Entities (C	Complete if the organization	answered "Yes" on F	orm 990, Part	IV, line 33.)		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
LUTHER COLLEGE WIND ENERGY PROJECT LLC 700 COLLEGE DRIVE DECORAH, IA 52101 35-2366881	PRODUCTION OF ELECTRICITY	IA	(O O N,	/A	

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization (b) Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity

MCELROY LUTHER LOAN FUND

700 COLLEGE DRIVE HIGHER EDUCATION LOAN ΙA 501(C)(3) 11B N/A FUND

DECORAH, IA 52101 42-1202192

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	, Part IV,	, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations?

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (j) General or managing partner?

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(5)

(6)

	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 3			Yes	
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			res	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b	Gift, grant, or capital contribution to other organization(s)		1b		No
C	Gift, grant, or capital contribution from other organization(s)		1 c		No
d	Loans or loan guarantees to or for other organization(s)		1d		No
е	Loans or loan guarantees by other organization(s)		1e		No
f	Sale of assets to other organization(s)		1f		No
g	Purchase of assets from other organization(s)		1 g		No
h	Exchange of assets		1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		1 i		No
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)		11		No
m	Sharing of facilities, equipment, mailing lists, or other assets		1m		No
n	Sharing of paid employees		1n		No
o	Reimbursement paid to other organization for expenses		10		No
p	Reimbursement paid by other organization for expenses		1p		No
q	O ther transfer of cash or property to other organization(s)		1 q		No
r	O ther transfer of cash or property from other organization(s)		1 r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and	transaction thre	sholds		
	(a) Name of other organization	(b) Transaction type(a-r)	Amoun	(c) t involve	ed
(1) (2)					
(3)					
(-)					
(4)					

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

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)**Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493014010021

OMB No 1545-0172

Department of the Treasury See separate instructions. ► Attach to your tax return. Sequence No 67 Internal Revenue Service Name(s) shown on return Business or activity to which this form relates Identifying number LUTHER COLLEGE Form 990 Page 10 42-0680466 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses. 250.000 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 800.000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (a) Description of property 6 (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 5,797,803 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (e) Convention (f) Method (business/investment property period deduction service use only—see instructions) 19a 3-year property **b** 5-year property c7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27 5 yrs ΜМ S/L property 27 5 yrs ММ S/L MMS/L i Nonresidential real property MMS/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L c 40-vear 40 vrs ММ S/L Non-Res Prop Type 1 count 0 Non-Res Prop Type 2 count 0 Non-Res Prop Totals count 0 **Summary** (see instructions) 21 Listed proper 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 5.797.803 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense,

comp	lete only	24a, 24b, colui	mns (a	a) thro	ugh (c)	of Sec	ction	A, al	ll of .	Sectio	n B, a	nd Se	ction (C if ap	oplicat	ile.
Section A—Depre																
24a Do you have eviden	ce to support	the business/investi	ment us	e claimed	d? ┌ Yes	. □ _{No}			24b lf	"Yes."	s the ev	/ idence	written?	Tye	sГNo)
										,						-
(a) Type of property (list vehicles first)	(b) Date placed II service	(c) Business/ In investment use percentage	(d) Cost or o	other	(busines	(e) deprecia s/investr e only)	- 11	(f) Recove period		(g) Method/ onvention		(h Deprec deduc	ation/		(i) Elected section 1 cost	
25Special depreciation allow 50% in a qualified busir	•	lified listed property i	placed in	service (l during the	tax year	and u	sed mo	re tha	in 25						
26 Property used more	•	•	inacci	15.0						20						
Lot roperty asea more	thun 50 70	% %	111033	450			П				\top			\Box		
		%														
	orlessin	% %	ee 1160											—		
27 Floperty used 50 %	01 1633 111	%	35 USE				П		S/L	-	Т			\Box		
		%							S/L							
		%			L				S/L		_			+		
28 Add amounts in co		_				ne 21,	page	1 .		2	8					
29 Add amounts in co	ılumn (ı), lır							•		•			29			
Complete this section	forvobiolo				mation						r rolat	ad nar	con			
if you provided vehicles to	your employe	es, first answer the q	uestions	in Section	on C to see	e if you n	neet a	n exce	otion t	o comple	ting this	section	for thos	e vehic	les	
30 Total business/inv	estment m	ıles driven diirina	the	-	a)		o)		(c)			d)	(6	-		f)
year (do not includ		-		Vehi	cle 1	Vehi	cle 2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	'ehic	le 3	Vehi	cle 4	Vehi	<u>cle 5</u>	Vehi	cle 6
31 Total commuting n	niles driver	during the year	F													
32 Total other person			,,, <u> </u>													
·	•		⊢			<u> </u>		+								
33 Total miles driven through 32	· · ·	year Add lines 3	٠. ا													
34 Was the vehicle av	allable for	personal use		Yes	No	Yes	No	Ye	s	No	Yes	No	Yes	No	Yes	No
during off-duty hou	ırs?		.													
35 Was the vehicle us owner or related pe	•	y by a more than	5%													
36 Is another vehicle		or personal use?	` .` -													
		estions for Em	volar	ers W	ho Pro	vide \	/ehi	cles	for	Use b	v The	ir Er	nplov	ees	<u> </u>	<u> </u>
Answer these question 5% owners or related	ns to deterr	nine if you meet a									-				not moi	re tha
37 Do you maintain a employees?	written poli	cy statement tha	t prohil	bits all	personal •	use of	vehic	les, ı	nc lud	ling cor	nmutır	ıg, by y	our.	Y	es	No
38 Do you maintain a employees? See th																
39 Do you treat all us								,, 01 1	, o o i		-					
40 Do you provide mo	re than five	vehicles to your	•			- ormatio	n fron	n you	emp	loyees	- about	the us	e of the	a -		
vehicles, and retai			العامل ما		la damar				•			•	•	\vdash		
Note: If your answ																
Part VI Amortiz		5, 39, 40, 01 41 1	5 165,	40 110	Comple	te seci	.1011 6	101 11	ie co	vereu v	emcie	<u> </u>				
Part VI Amortiz		(b)	<u> </u>			I				(6	.,					
(a)		Date		(c	-			(d)		A morti	-		۸ ۵	(f)	an far	
Description of c	osts	amortization		A mort amo				ode ction		perio				rtızatı hıs yea		
		begins 								perce	ntage					
42 A mortization of co	sts that be	gins during your 2	2009 ta	ax year	(see ins	truction	ıs)									
42 A months = 1 - 1		ann hafar	000 +-	V 146 - 5							43					
43 A mortization of co	sis that be	gan before your 2	UUY ta	x year		•	•		•	•	43					

44 Total. Add amounts in column (f) See the instructions for where to report . . .

44

Additional Data

Software ID: Software Version:

EIN: 42-0680466

Name: LUTHER COLLEGE

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

(Code) (Expenses \$	954,891	ıncludıng grants of \$	0)(Revenue \$	0)
SEMINARS, A PER		WARD BOUNE	D, AND A VARIETY OF PRO	E RADIO STATION, CONFERENCI OGRAMS IN THE ARTS, ATHLETIO	
(Code) (Expenses \$	323,374	ıncludıng grants of \$	0) (Revenue \$	0)
•	, , , ,	•	,	0)(Revenue \$ COLLABORATION, PARTICULARI	•
RESEARCH THE	COLLEGE RECEIVES GRANTS	FOR FACUL	TY/STUDENT RESEARCH	, ,	LY IN THE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	A verage Position (check all hours that apply)							(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	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
JUDY VIJUMS BOARD MEMBER	1 00	Х	-		-		-	0	0	0
RUSSELL BRUEMMER BOARD MEMBER	1 00	х						0	0	0
RONALD HAVE BOARD MEMBER	1 00	Х						0	0	0
MICHAEL R WIGLEY BOARD MEMBER	1 00	Х						0	0	0
DAIVD CARLSON BOARD MEMBER	1 00	Х						0	0	0
EMMA GRAEBER PORTER BOARD MEMBER	1 00	X						0	0	0
RONALD K CALGAARD BOARD MEMBER	1 00	Х						0	0	0
ARNE M SORENSON BOARD MEMBER	1 00	Χ						0	0	0
GREGORY D FIELDS BOARD MEMBER	1 00	Χ						0	0	0
JON M STELLMACHER BOARD MEMBER	1 00	Χ						0	0	0
MICHAEL L HICKS BOARD MEMBER	1 00	Χ						0	0	0
DAVID J KUNDERT VICE CHAIRPERSON	1 00	Χ		Х				0	0	0
SANDRA LEE BOARD MEMBER	1 00	Χ						0	0	0
PAULA R MEYER CHAIRPERSON	1 00	Χ		X				0	0	0
TIMOTHY JONES BOARD MEMBER	1 00	Χ						0	0	0
MARSHA D OLCH BOARD MEMBER	1 00	Χ						0	0	0
STEVEN OVERHOLT BOARD MEMBER	1 00	Х						0	0	0
MARILYN H ROVERUD SECRETARY	1 00	Χ		X				0	0	0
STEVEN SCHAVER BOARD MEMBER	1 00	Х						0	0	0
J STEPHEN SCHMIDT BOARD MEMBER	1 00	Х						0	0	0
PEG ARMSTRONG GUSTAFSON BOARD MEMBER	1 00	X						0	0	0
PAUL TORGERSON BOARD MEMBER	1 00	X						0	0	0
BRUCE ALTORFER BOARD MEMBER	1 00	Χ						0	0	0
MARTI RODAMAKER BOARD MEMBER	1 00	X						0	0	0
GEORGE D KUH BOARD MEMBER	1 00	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	Average Position (check all hours that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DAVID K LIETZ BOARD MEMBER	1 00	Х						0	0	0
TIMOTHY J OITZMAN BOARD MEMBER	1 00	Х						0	0	0
MICHAEL BURK BOARD MEMBER	1 00	X						0	0	0
PEGGY ETTESTAD BOARD MEMBER	1 00	X						0	0	0
DAVID MEYER BOARD MEMBER	1 00	X						0	0	0
RICHARD TORGERSON PRESIDENT	40 00			X				247,085	0	57,089
DIANE TACKE VICE PRESIDENT	40 00			Х				141,840	0	31,306
WILLIAM CRAFT VICE PRESIDENT	40 00			Х				144,781	0	21,587
KEITH CHRISTENSEN VICE PRESIDENT	40 00			Х				131,459	0	33,415
SCOT SCHAEFFER VICE PRESIDENT	40 00			Х				121,535	0	26,499
ANN HIGHUM VICE PRESIDENT	40 00			Х				122,953	0	21,476
MARK LUND DIR OF INT'L EDUCATION	40 00					x		105,574	0	17,616
DAVID MITCHELL INSTRUCTOR IN MATHEMATIC	40 00					X		100,586	0	21,863
ELWIN FARWELL FORMER	0 00						Х	20,737	0	0

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
EQUIPMENT RENTAL/MAINTE	7,358,108	6,311,894	799,861	246,353
OPERATION AND MAINTENAN	1,853,634	1,574,723	139,455	139,456
MISCELLANEOUS	1,394,719	1,247,581	129,506	17,632
PRINTING	588,867	337,600	162,454	88,813
POSTAGE	298,747	162,161	89,379	47,207