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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010		C Name of organization North Central College		D Employer identification number 36-2169157	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	Doing Business As		E Telephone number (630) 637-5680	
		Number and street (or P O box if mail is not delivered to street address) Room/suite 30 N Brainard Street		G Gross receipts \$ 107,059,871	
		City or town, state or country, and ZIP + 4 Naperville, IL 60540			
		F Name and address of principal officer HAROLD WILDE PRESIDENT 30 N BRAINARD ST NAPERVILLE, IL 60540		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
J Website: ▶ www.noctrl.edu					
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1861		M State of legal domicile IL	

Part I		Summary		
Activities & Governance	1	Briefly describe the organization's mission or most significant activities North Central College is a community of learners dedicated to preparing students to be informed, involved, principled and productive citizens and leaders over their lifetime		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	3	
	5	Total number of employees (Part V, line 2a)	1,91	
	6	Total number of volunteers (estimate if necessary)		
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	172,46	
	7b	Net unrelated business taxable income from Form 990-T, line 34	-85	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	12,235,982	8,482,297
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	71,273,782	76,920,057
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,797,098	1,544,835
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,043,659	1,373,957
			88,350,521	88,321,146
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	22,429,897	25,963,452
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	29,912,650	30,995,699
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	26,717,222	24,942,263
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	79,059,769	81,901,414
	19	Revenue less expenses Subtract line 18 from line 12	9,290,752	6,419,732
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	215,140,816	228,345,563
	22	Net assets or fund balances Subtract line 21 from line 20	58,855,882	59,332,378
			156,284,934	169,013,185

Part II Signature Block	
Sign Here	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
	<div> <div>*****</div> <div>Signature of officer</div> </div> <div> <div>2011-02-08</div> <div>Date</div> </div>
	<div> <div>PAUL H LOSCHEIDER VP FOR BUSINESS AFFAIRS</div> <div>Type or print name and title</div> </div>
Paid Preparer's Use Only	<div> <div>Preparer's signature</div> <div>Date</div> <div> <div>Check if self-employed</div> <div><input checked="" type="checkbox"/></div> </div> <div>Preparer's identifying number (see instructions)</div> </div>
	<div> <div>Firm's name (or yours if self-employed), address, and ZIP + 4</div> <div> <div>GRANT THORNTON LLP</div> <div>175 W JACKSON BLVD STE 2000</div> <div>CHICAGO, IL 60604</div> </div> </div>
	<div> <div>EIN</div> <div>Phone no (312) 856-0200</div> </div>

Part III Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

NORTH CENTRAL COLLEGE IS A COMMUNITY OF LEARNERS DEDICATED TO PREPARING STUDENTS TO BE INFORMED, INVOLVED, PRINCIPLED AND PRODUCTIVE CITIZENS AND LEADERS OVER THEIR LIFETIME IN 2009-2010, THE COLLEGE SERVED 3,183 FULL AND PART-TIME STUDENTS 31 STATES AND U S TERRITORIES AND 30 FOREIGN COUNTRIES ARE REPRESENTED IN OUR STUDENT POPULATION ABOUT 1,300 STUDENTS RESIDE ON THE COLLEGE CAMPUS EACH TERM NORTH CENTRAL COLLEGE CONFERRED 598 UNDERGRADUATE DEGREES AND 112 MASTER'S DEGREES IN THE 2009-2010 ACADEMIC YEAR THE COLLEGE ALSO SERVED 3,600 PEOPLE IN NON-CREDIT EDUCATIONAL AND COMMUNITY PROGRAMS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 20,898,472 including grants of \$ 0) (Revenue \$ 39,836,238)

Instruction Faculty instruction for degree candidates for the academic year and summer school, public service (non-credit), community education, and master's degree programs are provided 88% of the full-time teaching faculty members have a Doctorate or terminal degree in their field of expertise This distinctive faculty publishes numerous articles, books and research documents on a regular basis, although their primary responsibility is teaching Study abroad experiences are encouraged for all students during their college career at North Central Some of the current study abroad opportunities are Ireland, Scotland, England, Greece, China, Japan, and Costa Rica

4b

(Code) (Expenses \$ 5,664,258 including grants of \$ 0) (Revenue \$ 0)

Academic support Dean of faculty, continuing education, library services, disabilities support services, tutoring assistance, and academic computing are included in academic support Oesterle Library offers 32 million records in 71 college and university databases in Illinois in addition to the 151,000 volumes in its collection Information technology offers the students on-line access to their grades, schedule, and correspondence with faculty and classmates via Blackboard Each student has 10MB of web-space & 100 MB Hard Drive space available Language, technology, psychology, and science labs are also available Faculty serves as students' academic advisors

4c

(Code) (Expenses \$ 36,850,395 including grants of \$ 25,963,452) (Revenue \$ 25,963,452)

Student services and Athletics Offices servicing the student body include admissions, international recruiting, financial aid, registrar, dean of students, ministry and service, community services, career development, the wellness center, student involvement, orientation, multicultural affairs, and athletic activities Community service projects such as Habitat for Humanity are common pursuits during the December interim term and spring break NCC Athletics maintains 22 NCAA Division III programs The College is compliant with Title IX standards for gender equity and has won 25 team national championships

4d












Other program services (Describe in Schedule O)

(Expenses \$ 10,327,757 including grants of \$ 0) (Revenue \$ 11,120,367)

4e

Total program service expenses \$ 73,740,882

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 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, line 10? 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 	12A	No
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
14b	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	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the 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	No
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

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	3,846	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	1,910	
	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)			
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	No
b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
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	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to 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
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a 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.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

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.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	36	
b	Enter the number of voting members that are independent . . .	1b	30	
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 supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	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

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
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	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section 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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ ELIZABETH A LAKEN 30 N BRAINARD ST NAPERVILLE, IL 60540 (630) 637-5680

1b	Total	1,678,285	0	448,535
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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 **26**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
THE MILLARD GROUP 94346 EAGLE WAY CHICAGO, IL 606789430	CLEANING SERVICES	755,409
GORDON FLESCH COMPANY PO BOX 992 MADISON, WI 537010992	PRINT & COPIER SRVCS	223,533
HURSTHOUSE LANDSCAPING 751 N BOLINGBROOK DR BOLINGBROOK, IL 60440	LANDSCAPING SERVICES	161,835
Royall and Company 1920 E Parham Rd RICHMOND, VA 232282206	Admission Marketing	161,417
CAPITAL INTERNATIONAL PRODUCTIONS 621 SHARON NEW CASTLE RD FARRELL, PA 16121	ARTIST FEES	130,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **34**

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	62,885			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,419,412			
	g	Noncash contributions included in lines 1a-1f \$ 3,944,605					
	h	Total. Add lines 1a-1f		8,482,297			
Program Service Revenue	2a	TUITION (GROSS OF FINANCIAL AID)	Business Code 812,900	64,192,807	64,192,807		
	b	COMMUNITY EDUCATION	812,900	639,462	466,993	172,469	
	c	STUDENT HOUSING AND AUXILIARY ENTERPRISES	812,900	11,120,367	11,120,367		
	d	STUDENT FEES	900,099	426,435	426,435		
	e	OTHER ATHLETIC, ACADEMIC, AND ADMINISTRATIVE REV	900,099	540,986	540,986		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		76,920,057			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,660,319		
4		Income from investment of tax-exempt bond proceeds . .		0			
5		Royalties		0			
6a		Gross Rents	(i) Real 414,096	(ii) Personal			
b		Less rental expenses	58,591				
c		Rental income or (loss)	355,505				
d		Net rental income or (loss)		355,505			355,505
7a		Gross amount from sales of assets other than inventory	(i) Securities 18,641,940	(ii) Other -77,290			
b		Less cost or other basis and sales expenses	18,680,134				
c		Gain or (loss)	-38,194	-77,290			
d		Net gain or (loss)		-115,484			-115,484
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less direct expenses	b				
c		Net income or (loss) from fundraising events . .		0			
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . .		0			
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 . .		0			
Miscellaneous Revenue		Business Code					
11a	THEATRE GATE RECEIPTS	711,130	722,319			722,319	
b	PARKING FEES/FINES	812,930	134,163			134,163	
c	ATHLETIC GATE RECEIPTS	812,900	142,389			142,389	
d	All other revenue		19,581			19,581	
e	Total. Add lines 11a-11d		1,018,452				
12	Total revenue. See Instructions		88,321,146	76,747,588	172,469	2,918,792	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	25,963,452	25,963,452		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,058,803	676,502	177,992	204,309
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	23,064,118	20,364,139	1,893,401	806,578
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,833,587	1,505,702	220,027	107,858
9	Other employee benefits	3,391,867	2,135,260	1,120,501	136,106
10	Payroll taxes	1,647,324	1,441,503	192,981	12,840
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	108,983	3,350	39,150	66,483
c	Accounting	109,250	3,500	105,750	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	653,600	130,720	522,880	
g	Other	2,297,498	1,839,743	457,755	
12	Advertising and promotion	1,434,733	956,565	284,376	193,792
13	Office expenses	1,579,257	1,315,958	169,184	94,115
14	Information technology	648,464	643,819	2,544	2,101
15	Royalties	16,095	15,718	377	
16	Occupancy	6,465,058	6,064,134	399,183	1,741
17	Travel	1,221,904	1,162,544	13,537	45,823
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	195,325	179,733	10,951	4,641
20	Interest	1,045,333	1,001,189	44,144	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,560,182	4,367,608	192,574	
23	Insurance	162,003	157,606	4,397	
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)				
a	FOOD SERVICE	2,322,453	2,322,453		
b	MISCELLANEOUS	1,179,579	690,926	370,428	118,225
c	EQUIPMENT RENT & MAINTENANCE	942,546	798,758	67,072	76,716
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	81,901,414	73,740,882	6,289,204	1,871,328
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			10,588,068	2	6,942,962
	3	Pledges and grants receivable, net			4,337,979	3	3,508,570
	4	Accounts receivable, net			4,754,273	4	3,761,110
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			3,801,940	7	3,854,630
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			2,343,589	9	2,786,773
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	169,263,285	119,492,411	10c	129,579,890
	b	Less accumulated depreciation	10b	39,683,395			
	11	Investments—publicly traded securities			60,223,521	11	67,748,401
	12	Investments—other securities See Part IV, line 11			8,144,361	12	8,552,223
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,454,674	15	1,611,004
	16	Total assets. Add lines 1 through 15 (must equal line 34)			215,140,816	16	228,345,563
Liabilities	17	Accounts payable and accrued expenses			8,873,421	17	6,899,233
	18	Grants payable				18	
	19	Deferred revenue			786,650	19	920,836
	20	Tax-exempt bond liabilities			41,500,000	20	41,500,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			2,194,395	23	2,892,432
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			5,501,416	25	7,119,877
	26	Total liabilities. Add lines 17 through 25			58,855,882	26	59,332,378
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			109,827,722	27	118,199,897
	28	Temporarily restricted net assets			8,924,370	28	11,649,334
	29	Permanently restricted net assets			37,532,842	29	39,163,954
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			156,284,934	33	169,013,185
	34	Total liabilities and net assets/fund balances			215,140,816	34	228,345,563

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	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	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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated 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?	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 . . .	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization North Central College	Employer identification number 36-2169157
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Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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)

f

☐

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

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar 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 Tax revenues levied for the 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)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar 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 purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

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

Additional Data

Software ID:

Software Version:

EIN: 36-2169157

Name: North Central College

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ms Esther T Benjamin TRUSTEE	1 0	X						0	0	0
Mr Steven Bergerson TRUSTEE	1 0	X						0	0	0
Dr John D Bramsen TRUSTEE	1 0	X						0	0	0
Mr Kevin M Gensler Trustee	1 0	X						0	0	0
Dr John M Giannini Trustee	1 0	X						0	0	0
Mrs Misty Gruber Trustee	1 0	X						0	0	0
Mrs Nancy Hanson Trustee	1 0	X						0	0	0
Mr Steven H Hoeft Trustee, Chairman of the Board	1 0	X						0	0	0
Dr Holly Humphrey Trustee, Vice Chair, Acad Aff	1 0	X						0	0	0
Mr Peter P Jones Trustee	1 0	X						0	0	0
Bishop Hee-Soo Jung Trustee	1 0	X						0	0	0
Mr David W Kelsch Trustee, Vice Chair, Bus Aff	1 0	X						0	0	0
Mrs Michele Kenaga Trustee	1 0	X						0	0	0
Mr Ray Kinney Trustee	1 0	X						0	0	0
Mrs Susan Koranda Trustee	1 0	X						0	0	0
Mr Lloyd Krumlauf Trustee	1 0	X						0	0	0
Bishop Linda Lee Trustee	1 0	X						0	0	0
Mr Ronald Lueptow Trustee	1 0	X						0	0	0
Mr Joseph Mallon Trustee, Chair Audit Committee	1 0	X						0	0	0
Mr James A McDermet Trustee	1 0	X						0	0	0
Ms Holly I Myers Trustee, Board Secretary	1 0	X						0	0	0
Mr Michael R Naset Trustee	1 0	X						0	0	0
Mr John L Novak Trustee	1 0	X						0	0	0
Mr Jeff Oesterle Trustee, Vice Chair, Inst Adv	1 0	X						0	0	0
Mr William N Plamondon Trustee	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
Mr Steven Rubin Trustee	1 0	X						0	0	0	
Ms Pat Pulido Sanchez Trustee	1 0	X						0	0	0	
Mr Stephen T Sellers Trustee	1 0	X						0	0	0	
Dr Jeffrey K Swallow Trustee	1 0	X						0	0	0	
Mr Scott Wehrli Trustee	1 0	X						0	0	0	
Dr Myron W Wentz Trustee	1 0	X						0	0	0	
Mr Robert A Wislow Trustee	1 0	X						0	0	0	
Dr Herman B White Jr Trustee, Vice Chair, Std't Aff	1 0	X						0	0	0	
Miss Maria E Wynne Trustee	1 0	X						0	0	0	
Mrs Beth Zimmermann Trustee	1 0	X						0	0	0	
DR HAROLD R WILDE PRESIDENT	60 0			X				313,412	0	142,318	
MR PAUL LOSCHEIDER VP FOR BUSINESS AFFAIRS	60 0			X				177,974	0	44,351	
MS LAURIE HAMEN VP FOR ENROLLMENT MANAGEMENT	60 0			X				185,044	0	37,022	
DR R Devadoss PANDIAN VP FOR ACADEMIC AFFAIRS	60 0			X				183,320	0	45,725	
MR RICK E SPENCER VP INSTITUTIONAL ADVANCEMENT	60 0			X				175,276	0	43,438	
MR MARTIN SAUER DEAN OF ADMISSIONS/FIN AID	50 0					X		141,180	0	20,056	
DR RICHARD WILDERS PROF OF MATH/ASSOCIATE DEAN	50 0					X		137,807	0	30,060	
DR FRANCINE NAVAKAS PROF OF ENGLISH/ASSOCIATE DEAN	50 0					X		126,644	0	30,197	
DR MARTI BOGART PROF OF ECON/ASSOCIATE DEAN	50 0					X		118,698	0	27,802	
MR BRUCE NORTELL DIRECTOR OF PLANNED GIVING	50 0					X		118,930	0	27,566	

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

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TUITION (GROSS OF FINANCIAL AID)	812,900	64,192,807	64,192,807		
COMMUNITY EDUCATION	812,900	639,462	466,993	172,469	
STUDENT HOUSING AND AUXILIARY ENTERPRISES	812,900	11,120,367	11,120,367		
STUDENT FEES	900,099	426,435	426,435		
OTHER ATHLETIC, ACADEMIC, AND ADMINISTRATIVE REV	900,099	540,986	540,986		

SCHEDULE D
(Form 990)

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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization North Central College	Employer identification number 36-2169157
--	---

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply) <input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space	<input type="checkbox"/> Preservation of an historically importantly land area <input type="checkbox"/> Preservation of a certified historic structure
2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06	2c
	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_____	
4 Number of states where property subject to conservation easement is located ▶_____	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶_____	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements	

Part III

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

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

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☒ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	68,798,252	79,440,231			
b Contributions	2,897,284	4,162,125			
c Investment earnings or losses	10,133,552	-14,748,673			
d Grants or scholarships					
e Other expenditures for facilities and programs	2,860,086	55,431			
f Administrative expenses					
g End of year balance	78,969,002	68,798,252			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 44 310 % %

b

Permanent endowment ▶ 47 000 % %

c

Term endowment ▶ 8 690 % %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i) Yes	
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,534,796		5,534,796
b Buildings		145,846,806	28,706,308	117,140,498
c Leasehold improvements				
d Equipment		17,122,920	10,977,087	6,145,833
e Other		758,763		758,763
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				129,579,890

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements						
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	88,321,146			
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	81,901,414			
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	6,419,732			
4	Net unrealized gains (losses) on investments	4	6,758,083			
5	Donated services and use of facilities	5				
6	Investment expenses	6				
7	Prior period adjustments	7				
8	Other (Describe in Part XIV)	8	-449,564			
9	Total adjustments (net) Add lines 4 - 8	9	6,308,519			
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	12,728,251			
Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return						
1	Total revenue, gains, and other support per audited financial statements	1	69,251,658			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
a	Net unrealized gains on investments				2a	6,758,083
b	Donated services and use of facilities				2b	
c	Recoveries of prior year grants				2c	
d	Other (Describe in Part XIV)	2d	58,591			
e	Add lines 2a through 2d	2e	6,816,674			
3	Subtract line 2e from line 1	3	62,434,984			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
a	Investment expenses not included on Form 990, Part VIII, line 7b				4a	
b	Other (Describe in Part XIV)				4b	25,886,162
c	Add lines 4a and 4b	4c	25,886,162			
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	88,321,146			
Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return						
1	Total expenses and losses per audited financial statements	1	55,996,553			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
a	Donated services and use of facilities				2a	
b	Prior year adjustments				2b	
c	Other losses				2c	
d	Other (Describe in Part XIV)	2d	58,591			
e	Add lines 2a through 2d	2e	58,591			
3	Subtract line 2e from line 1	3	55,937,962			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a	Investment expenses not included on Form 990, Part VIII, line 7b				4a	
b	Other (Describe in Part XIV)				4b	25,963,452
c	Add lines 4a and 4b	4c	25,963,452			
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	81,901,414			
Part XIVSupplemental Information						
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information						

Identifier	Return Reference	Explanation
Organization's Collections and How Collections Further Exempt Purpose	Schedule D, Part III, Question 4	The North Central College Archives consists of manuscripts, publications, photographs, audio-visual materials, artifacts, and other unique historical materials documenting the history of the College The Archives holds similar types of materials for two additional collections, the Suburban Studies Archives (which seeks to document the transition of Chicago's west suburban region following World War II) and the papers of retired US Congressman Harris W Fawell The North Central College Archives' mission is to collect, organize, describe, preserve and make available for research materials on the history of the College and the local area as related to the College The Archives supports the College community's need for historical information and provides reference assistance to archival researchers on and off campus North Central College's Oesterle Library Special Collections (independent of the Archives) includes a collection of presidential and other famous persons signatures, a first editions collection of books, a unique collection of books on Chicago area history, and a set of books and sheet music for jazz North Central College's Art Collection is on display throughout campus and includes a variety of media and artists, from bronzes by Gustav Borglum and Christian Petersen to tapestry by alumna Helen Gamertsfelder Naumann
Intended Use of the Organization's Endowment Funds	Schedule D, Part V, Question 4	The intended uses of the organization's endowment funds include expending funds toward professional faculty chairs, scholarships, facilities maintenance, library enhancement, and departmental enhancement
Organization's Liability for Uncertain Tax Positions under FIN 48	Schedule D, Part X, question 2	The FASB issued guidance that requires tax effects from an uncertain tax position to be recognized in the financial statements only if the position is more likely than not to be sustained if the position were to be challenged by a taxing authority The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged If an uncertain tax position meets the more-likely-than-not threshold, the largest amount of tax benefit that is greater than 50% likely to be recognized upon ultimate settlement with the taxing authority is recorded The College is exempt from income tax under IRC section 501(c)(3), though it is subject to tax on income unrelated to its exempt purposes, unless that income is otherwise excluded by the IRC There are no tax positions for which a material change in any unrecognized tax benefit liability is reasonably possible in the next 12 months There is no interest or penalties recognized in the income statement or balance sheet The tax years ending 2007, 2008 and 2009, are still open to audit for both federal and state purposes This guidance did not have any impact on the Colleges financial statements
Reconciliation of Change in Net Assets	Part XI, Line 8	Split Interest Payments \$816,846 Loss on Interest rate swap (\$1,226,410) Total (\$449,564)
Reconciliation of Revenues	Part XII, Line 2D	Rental Expenses \$ 58,591 Total \$ 58,591
Reconciliation of Revenues	Part XII, Line 4B	Financial Aid \$25,963,452 Loss on Fixed Assets (\$77,290) Total \$25,886,162
Reconciliation of Expenses	Part XIII, Line 2D	Rental Expenses \$58,591 Total \$58,591
Reconciliation of Expenses	Part XIII, Line 4B	Financial Aid \$25,963,452 Total \$25,963,452

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
North Central College

Employer identification number

36-2169157

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain THE COLLEGE'S POLICY IS ONE OF NON-DISCRIMINATION WITH RESPECT TO THE PUBLIC SERVED BY THE INSTITUTION AND WITH RESPECT TO THE COLLEGE PERSONNEL ADVERTISEMENTS, BROCHURES, PUBLICATIONS, APPLICATION FOR ADMISSIONS, ETC , CONTAIN A STATEMENT TO THE EFFECT THAT THE COLLEGE DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, GENDER, AGE, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, SEXUAL ORIENTATION, HANDICAP, DISABILITY, VETERAN STATUS OR UNFAVORABLE DISCHARGE FROM MILITARY SERVICE A CLASSIFIED ADVERTISEMENT IS RUN ONCE PER TERM WITH THE COLLEGE'S ANTI-DISCRIMINATION POLICY	3	Yes
4	Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)	4a	Yes
		4b	Yes
		4c	Yes
		4d	Yes
5	Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)	5a	No
		5b	No
		5c	No
		5d	No
		5e	No
		5f	No
		5g	No
		5h	No
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)	6b	No
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 990)	7	Yes

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
North Central College

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

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
36-2169157

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
--	---------	------------------------------------	--------------------------	-----------------------------------	--	--	------------------------------------

2

Enter total number of section 501(c)(3) and government organizations

▶

3

Enter total number of other organizations

▶

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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
ACADEMIC Scholarships and GRANTS	2359	25,963,452			
See Additional Data Table					

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

[illegible]

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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.**

OMB No 1545-0047

2009

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Inspection

Name of the organization North Central College	Employer identification number 36-2169157
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Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DR HAROLD R WILDE	(i)	313,412	0	0	75,000	67,318	455,730	0
	(ii)	0	0	0	0	0	0	0
MR PAUL LOSCHEIDER	(i)	162,974	15,000	0	10,000	34,351	222,325	0
	(ii)	0	0	0	0	0	0	0
MS LAURIE HAMEN	(i)	170,044	15,000	0	10,000	27,022	222,066	0
	(ii)	0	0	0	0	0	0	0
DR R Devadoss PANDIAN	(i)	173,320	10,000	0	10,000	35,725	229,045	0
	(ii)	0	0	0	0	0	0	0
MR RICK E SPENCER	(i)	162,876	10,000	2,400	10,000	33,438	218,714	0
	(ii)	0	0	0	0	0	0	0
MR MARTIN SAUER	(i)	136,180	5,000	0	0	20,056	161,236	0
	(ii)	0	0	0	0	0	0	0
DR RICHARD WILDERS	(i)	137,807	0	0	0	30,060	167,867	0
	(ii)	0	0	0	0	0	0	0
DR FRANCINE NAVAKAS	(i)	126,644	0	0	0	30,197	156,841	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
HOUSING ALLOWANCE AND PAYMENTS	SCHEDULE J, PART I, QUESTION 1A	THE PRESIDENT IS REQUIRED TO LIVE IN THE PRESIDENT'S HOUSE UNDER THE TERMS OF HIS EMPLOYMENT CONTRACT AND THE ESTIMATED RENTAL VALUE IS NOT REPORTED TO HIM AS COMPENSATION
SCHEDULE J, PART II, COLUMN D	VALUE OF HOUSING PROVIDED TO THE PRESIDENT OF THE COLLEGE (NON-TAXABLE)	IRS instructions to Form 990 require that the fair market value of housing provided to employees by their employer be reported on Form 990, Part VII, Section A and Schedule J, Part II. As a condition of employment, the President of North Central College is required to reside on the campus premises. The residence serves both as a personal residence as well as a venue for regular carrying on of College business. The College has determined that the value of the use of this personal residence is not considered taxable income to the President as provided for in Internal Revenue Code Section 119. For tax year 2009, the value of the President's use of the residence is conservatively estimated to be \$20,400. This estimated value is based on the fair rental value of \$1,700 per month for similar houses in the area. During tax year 2009, the current President, Dr. Harold R. Wilde, made the residence their home for 12 months of the year. Schedule J, Part II, Column (D) includes \$20,400 of non-taxable income associated with the use of the residence provided by the College.
Nonqualified supplemental retirement plan	Schedule J, Part I, Line 4b	The following individuals participate in the supplemental nonqualified 457(f) retirement plan: Dr. Harold R. Wilde \$75,000; Mr. Paul Loscheider \$10,000; Ms. Laurie Hamen \$10,000; Dr. R. D. Pandian \$10,000; Mr. Rick Spencer \$10,000.

Schedule K (Form 990)	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ 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).</div> <div>▶ Attach to Form 990. ▶ See separate instructions.</div>	OMB No 1545-0047
		2009
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization North Central College	Employer identification number 36-2169157
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Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A BANK OF AMERICA NA	86-1091967	45200FNS4	10-16-2008	17,000,000	RESIDENCE HALL		X		X

Part II Proceeds

		A	B	C	D	E	
1	Total proceeds of issue	17,000,000					
2	Gross proceeds in reserve funds						
3	Proceeds in refunding or defeasance escrows						
4	Other unspent proceeds						
5	Issuance costs from proceeds	314,980					
6	Working capital expenditures from proceeds						
7	Capital expenditures from proceeds	16,685,020					
8	Year of substantial completion	2009					
		Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?		X				
10	Were the bonds issued as part of an advance refunding issue?		X				
11	Has the final allocation of proceeds been made?	X					
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

Part III Private Business Use

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X								

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X								
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %								
6	Total of lines 4 and 5		0 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									

Part IV

Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2	Is the bond issue a variable rate issue?	X									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	X									
b	Name of provider	BANK OF AMERICA NA									
c	Term of hedge		30								
4a	Were gross proceeds invested in a GIC?		X								
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X								
6	Did the bond issue qualify for an exception to rebate?		X								

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
North Central College

Employer identification number
36-2169157

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?
			YesNo
2	Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958		
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization		

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
NA	N/A	2,667

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Scott Wehrli	Trustee	2,302,845	See Schedule O		No
Dick Wehrli	Lifetime Trustee	2,302,845	See Schedule O		No
Albert Benedetti	Lifetime Trustee	2,302,845	See Schedule O		No
David Kelsch	Trustee	271,032	See Schedule O		No
Ray Kinney	Trustee	171,286	See Schedule O		No

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

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

Name of the organization
North Central College

Employer identification number
36-2169157

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	20	580,524	COST/SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	2	2,865,764	OPINIONS OF EXPERTS
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
Building				
25 Other ► (Construction)	X	1	498,317	COST/SELLING PRICE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

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

29

0

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
HOW ORGANIZATION IS REPORTING CONTRIBUTIONS	SCHEDULE M, PART I, COLUMN B	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS, NOT ITEMS RECEIVED
Third Party Vendor Arrangement	Schedule M, Part 1, Line 32a	When North Central College receives a stock gift, the development office refers the donor to our 3rd party broker Stifel Nicolaus (70 W Madison St, Suite 5000, Chicago, IL 60602) The broker then sells the stock and sends North Central College a check for the proceeds less fees

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
North Central College

Employer identification number
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Identifier	Return Reference	Explanation
Other Program Services	Part III, Line 4D	Auxiliary Services Auxiliary services include residence life, student housing, and food services Facilities include Kaufman a full service dining hall, The Cage a quick service cook-to-order facility, and The Boilerhouse Cafe featuring Starbuck's coffee The bookstore, college union, commuter student gathering room, and other meeting places are also included in Auxiliary service More than 1,300 of the full-time students choose to live in college ow ned or leased properties All campus housing contracts offer flexible meal plan options
Material Difference in voting rights	Part VI, Line 1a and 1b	There were 35 voting members at the beginning of fiscal year 2010 One new member, Maria Wynne, was appointed during the fiscal year The board had a total of 36 voting members for the fiscal year ended 2010 The President and 5 other members of the board have a conflict based on the criteria provided
Directors with a relationship	PART VI, SECTION A, QUESTION 2	Four trustees have invested together in a joint venture This joint venture is independent of any North Central College activities or investments One trustee is related to an honorary trustee, they are brothers One trustee is the son of a life trustee Three trustees, one of whom is a board officer, have a business relationship with each other One Trustee and a former trustee are related and have a business relationship
Process Organization Uses to Review Form 990	Part VI, Section B, Question 11	The review will be conducted prior to filing the 990 with the IRS The Assistant VP of Finance/Comptroller and Senior Accountant gather all information from various areas of the College and submit to tax professionals for the first draft of the 990 The Assistant VP of Finance/Comptroller and Senior Accountant review and make necessary changes The second draft is then review ed by the VP for Business Affairs and the College President Again, updates and changes are made if necessary A final draft is sent via email to all voting board members for their review If any changes are required after board review , they will be sent to the tax professionals for incorporation into the form 990
How Organization Monitors and Enforces Conflict of Interest Policy	Part VI, Section B, Question 12C	The conflict of interest statements are sent to each board member with the May board packet, which includes reading materials for the upcoming meeting All board members are expected to return the conflict of interest statements at the May board meeting, if not sooner A process has been established to follow up with any members who have not returned the conflict of interest statement within the given parameters
Process for Determining Compensation of Top Management	Part VI, Section B, Questions 15A & 15B	The Compensation Committee (a sub-committee of the Board) is responsible for determining the President's salary and reviewing the Vice Presidents' salaries The Compensation Committee works with Human Resources (and possibly outside consultants) to obtain comparable salary/benefit data from organizations such as College and University Personnel Association (CUPA), in order to establish appropriate salary/benefit packages The Compensation Committee consists of the Chair of the Board and two active trustees, who are not related to the President or Vice Presidents and do not perform management-directed services to the College The College has an annual review of their compensation process Annually, the Executive Committee reviews the Compensation Committee's recommendations and approves the President's compensation The Vice Presidents' compensation is brought before the Board of Trustees in an executive session at the fall meeting
How Organization Makes Important Documents Available to the Public	Part VI, Section C, Question 19	The conflict of interest policy and financial statements are available to the public at North Central College's website, www noctrl edu The compensation process for the President and Vice Presidents is not currently posted on the website, but it is available upon request
Business Transactions with Interested Persons	Schedule L, Part IV	Scott Wehrli, active board member, is the son of Richard Wehrli Richard is a Life trustee (non-voting) They are both part ow ners with Albert Benedetti, Life Trustee(non-voting) in several construction related companies that North Central College used to build the Res/Rec Center The amount spent was \$2,302,845 This business transaction between North Central College and the Wehrli/Benedetti construction companies was conducted at arm's length, and a fair market value price was provided to the college for the services provided The full Board of Trustees was made aw are of the construction agreement prior to the beginning of construction David Kelsch is a trustee of the board of North Central College, he is also the President and CEO of Advanced Data Technologies Inc North Central College paid Advanced Data Tech \$271,032 for professional services during fiscal year 2010 The business transaction between North Central College and Advanced Data Technologies Inc was conducted at arm's length, and a fair market value price was provided to the college for the services provided Ray Kinney is a trustee of the board of North Central College, he is also a Principal of Minuteman Press and substantial shareholder of the company North Central College paid Minuteman Press \$171,286 in fiscal year 2010 for their services The business transaction between North Central College and Minuteman Press was conducted at arm's length, and a fair market value price was provided to the college for the services provided