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 $_{\text{Form}}990$

Department of the Treasury Internal Revenue Service

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

benefit trust or private foundation) ► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

A For	the 2	010 ca	lendar year, or tax year beg	inning 06-01-2010 and ending 05-31-20	011			Inspection
		plicable	C Name of organization LUTHER COLLEGE			D Em	ployer	identification number
Add	ress cha	ange	Doing Business As			42	-0680	466
_	ne chan	_	Doing Business As			E Tele	ephone	number
_	al retur nınated		Number and street (or P O box 700 COLLEGE DRIVE	r if mail is not delivered to street address)	Room/su	(30		7-1015
_	ended r	eturn pending	City or town, state or country, a DECORAH, IA 52101	and ZIP + 4	•	— G Gro	ss receip	ots \$ 123,142,227
			F Name and address of	principal officer	H(a) Is	this a group retu	ırn for affil	lates? Yes No
			RICHARD TORGERSON 700 COLLEGE DRIVE		H/h) A		un altud a d	I?
			DECORAH,IA 52101		1	e all affiliates "No," attac		t (see instructions)
Tax	-exem	pt status	▼ 501(c)(3)	◀ (insert no)				umber ► 9386
We	ebsit e	: - ww	W LUTHER EDU					
Form	of ora	anization	Corporation Trust Associ	ciation	L Year	of formation	1865	M State of legal domicile I/
Par	_		mary					
acreminance	C M B 8 A	COLLEG OF ARTS MUSIC I BODY LU BOO-ACF MONG ENVIRO	E OFFERS MORE THAN 60 DEGREE (BA), WITH THE NEARLY 40 STATES AND N UTHER'S MISSION STATE RE CAMPUS, LOCATED IN THE MOST BEAUTIFUL IN NMENTAL STEWARDSHIP	FOUNDED IN 1861 (INCORPORATED MAJORS, MINORS, AND PREPROFESS GREATEST NUMBER OF GRADUATES GREATHAN 50 COUNTRIES ARE REPROFESS FAITH, LEADERS THE BLUFF COUNTRY OF NORTHEAST REGION AND REINFORCES THE COLLUTHER IS FULLY ACCREDITED BY TOF COLLEGES AND SCHOOLS	IONAL PRO COMING F RESENTED I HIP, AND SE I IOWA ALC LEGE'S STR	GRAMS LE ROM BIOLO N THE 2,50 ERVICE TO NG THE U ONG COMI	ADING DGY, E DO-ME THE L PPER I	G TO THE BACHELOR DUCATION, AND MBER STUDENT ARGER WORLD ITS OWA RIVER, IS
	-							
	_							
			,	n discontinued its operations or dispose verning body (Part VI, line 1a)		an 25% of i	tsneta 3	assets 3
		lumber o	4	2				
	5 T	otal nur	mber of individuals employed		5	3,28		
	6 Total number of volunteers (estimate if necessary)							99
				m Part VIII, column (C), line 12 ne from Form 990-T, line 34			7a 7b	42,98
	D 1	vet uniter	ateu business taxable incor	ne nom rom 990-1, me 34		Prior Year	/B	-12,23 Current Year
_	8	Contrib	outions and grants (Part VII	I, line 1h)		10,290	,140	12,198,45
Hayenue	9	_		I, line 2g)		98,035,45		99,306,003
Ă÷H	10 11			umn (A), lines 3, 4, and 7d)	•	911,7		3,158,23
	12			11 (must equal Part VIII, column (A), I	ıne	<u> </u>		· ·
	13			Part IX, column (A), lines 1–3)		35,199	'	115,911,09
	14			art IX, column (A), line 4)	'	35,19	0	37,412,621
ا م	15	Salarıe		loyee benefits (Part IX, column (A), line:	5 5 -	40.45		20.617.24
<u> </u>	16a	10) Profess	sional fundraising fees (Part	IX, column (A), line 11e)		40,459	39,617,245	
EXP enses	b		ndraising expenses (Part IX, colum				0	
-	17			A), lines 11a-11d, 11f-24f)		34,619	,519	34,735,818
	18			(must equal Part IX, column (A), line 25)	110,278		111,765,684
. 92	19	Revenu	ue less expenses Subtract I	ine 18 from line 12	Begin	95: ning of Cur	L,482	4,145,413
and						Year		End of Year
Fund Balances	20		issets (Part X, line 16) .			239,893		259,231,105
Œ	21 22		sets or fund balances Subtr	179,582		60,370,360 198,860,745		
Par	t II		ature Block			,	, ,	, ,
ign	edge a edge.	*****	i, it is true, correct, and compl	mined this return, including accompanying ete. Declaration of preparer (other than offi			nation	
lere			E TACKE VP FINANCE & ADMIN or print name and title					
		Print/Type preparer's	`	Preparer's signature KAY HEGARTY	Date	Check if s		PTIN
Paid	i		ne MCGLADREY & PULLEN LLP	1	ı	1	•	Firm's EIN 🕨
repa Ise C	11	Fırm's add	ress • 221 THIRD AVENUE SE STE	300				Phone no ▶ (319) 298-
		~ J	CEDAR RAPIDS, IA 52401					5333
ay ti	ne IRS	o discus	s this return with the prepar	er shown above? (see instructions) .				▼ Yes

Form	n 990 (2010) Page :
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
CHU THA GREA COU LEA! IOW COM	HER COLLEGE IS A FOUR-YEAR, RESIDENTIAL LIBERAL ARTS INSTITUTION AFFILIATED WITH THE EVANGELICAL LUTHERAN IRCH IN AMERICA FOUNDED IN 1861 (INCORPORATED 1865) BY NORWEGIAN IMMIGRANTS, THE COLLEGE OFFERS MORE N 60 MAJORS, MINORS, AND PREPROFESSIONAL PROGRAMS LEADING TO THE BACHELOR OF ARTS DEGREE (B A), WITH THE ATEST NUMBER OF GRADUATES COMING FROM BIOLOGY, EDUCATION, AND MUSIC NEARLY 40 STATES AND MORE THAN 50 JINTRIES ARE REPRESENTED IN THE 2,500-MEMBER STUDENT BODY LUTHER'S MISSION STATEMENT EMPHASIZES FAITH, DERSHIP, AND SERVICE TO THE LARGER WORLD ITS 800-ACRE CAMPUS, LOCATED IN THE BLUFF COUNTRY OF NORTHEAST A ALONG THE UPPER IOWA RIVER, IS AMONG THE MOST BEAUTIFUL IN REGION AND REINFORCES THE COLLEGE'S STRONG MITMENT TO ENVIRONMENTAL STEWARDSHIP LUTHER IS FULLY ACCREDITED BY THE HIGHER LEARNING COMMISSION OF NORTH CENTRAL ASSOCIATION OF COLLEGES AND SCHOOLS
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 \$ 68,869,464 including grants of \$ 37,412,621) (Revenue \$ 80,714,560)
	INSTRUCTION LUTHER COLLEGE IS A RESIDENTIAL, LIBERAL ARTS COLLEGE OF THE LUTHERAN CHURCH HERE CREATIVE SCHOLARSHIP, PERSONAL GROWTH, WORSHIP AND SOCIAL RELATIONSHIPS MERGE TO CREATE AN UNDERSTANDING OF THE WHOLENESS OF LIFE TOTAL ENROLLMENT WAS 2,446 FTE STUDENTS IN THE FALL OF 2010 546 STUDENTS GRADUATED IN THE 2010-11 ACADEMIC YEAR LUTHER COLLEGE OFFERS 39 MAJORS, 35 MINORS AND INTERDISCIPLINARY MINORS, AND 10 PREPROFESSIONAL AND SPECIFIC PROGRAMS
4b	(Code) (Expenses \$ 14,600,043 including grants of \$) (Revenue \$ 1,230,554)
	ACADEMIC SUPPORT AND STUDENT SERVICES, RESOURCES ARE PROVIDED THROUGH AN EXTENSIVE LIBRARY AND INFORMATION SERVICES PROGRAM THE COLLEGE HAS OVER 100 STUDENT ORGANIZATIONS, ALONG WITH COLLEGE MINISTRIES, ACADEMIC SUPPORT SERVICES, RECREATION AND WELLNESS PROGRAMS THERE IS A CAREER CENTER, A CAMPUS HEALTH SERVICE AND COUNSELING CENTER, RESIDENTIAL LIFE PROGRAMS, AND ADMISSIONS AND FINANCIAL AID DEPARTMENTS (2,446 FTE STUDENTS)
	(Code) (Expenses \$ 16,247,047 including grants of \$) (Revenue \$ 17,320,912)
	AUXILIARY ENTERPRISES IN THE FALL OF 2010, 2,096 STUDENTS WERE HOUSED IN LUTHER'S RESIDENCE HALLS WITH AN OCCUPANCY RATE OF 97 72% AND 2,139 STUDENTS USED THE COLLEGE'S DINING SERVICES (2,446 FTE STUDENTS)
4d	Other program services (Describe in Schedule O) See also Additional Data for Description
	(Expenses \$ 1,395,281 including grants of \$) (Revenue \$)
4e	Total program service expenses►\$ 101,111,835

			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 (see instruction)? 🕏	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, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νο
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b	Yes	
c	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.	11c		Νο
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
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		Νo
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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV.	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 (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 4.332			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
C	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
h	return			
D		2b	Yes	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
Ь	If "Yes," enter the name of the foreign country ►UK, MT, NO			
	See instructions for 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		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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).	_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	<u> </u>
С	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			
e	Did the organization 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	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 a	Sponsoring organizations maintaining donor advised funds. 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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
,	facilities			
11				
	Gross income from members or shareholders			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
L.	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	or 00	1/2010
		F	orm 99() (2010

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

_Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year)		
b	Enter the number of voting members included in line 1a, above, who are independent)		
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		Νο
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		N o
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the		103	
	year by the following			
a	The governing body?	8a	Yes	
Ь	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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form	?		
		11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this 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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	100	100	
	The state of the process in beneaties (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	Yes	
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	Yes	
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply ☐ Own website. ☐ Another's website. ☑ Upon request			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization DIANE TACKE
 700 COLLEGE DRIVE

DECORAH, IA 52101 (563) 387-1015

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi		C) (che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Highest compensated amployee Key employee Officer Institutional Trustee Individual trustee or director		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
See Additional Data Table										
-										
			<u> </u>							

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours	1	tion (che		II		(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amount o	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	:	from from from from from from from from	the ion and ed
See A	ddıtıonal Data Table												
								<u> </u>					
1b	Sub-Total				•	•		P					
c d	Total from continuation sheets Total (add lines 1b and 1c) .					•		>	1,163,990		0		236,401
	Total number of individuals (incl						above		, ,	 n	<u> </u>		
	\$100,000 in reportable compen							,					
												Yes	No
3	Did the organization list any for					ey e	mploy	ee, o	r highest compens	ated employee			
	on line 1a? If "Yes," complete Sci					•	•	•			3	Yes	
4	For any individual listed on line organization and related organiz individual	ations greater tl									4	Yes	
5	Did any person listed on line 1a services rendered to the organiz										5		No
	ection B. Independent Con	tractors											
1	Complete this table for your five		nsatedi	nden	enda	nt c	ontrac	tore	that received more	than			

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO FINANCIAL SERVICES 10 EARHART DRIVE WILLIAMSVILLE, NY 14221	DINING SERVICES	7,388,250
SCHWAB LLC 740 KANAS STREET WINONA, MN 55987	CONSTRUCTION	713,842
OPUS DESIGN BUILD LLC STE 206-11 1200 35TH STREET WEST DES MOINES, IA 50266	CONSTRUCTION	681,552
REILLY CONSTRUCTION COMPANY 110 MAIN STREET OSSIAN, IA 52161	CONSTRUCTION	550,890
SKYLINE CONSTRUCTION PO BOX 127 DECORAH, IA 52101	CONSTRUCTION	346,100
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Part \		2010) Statement of Revenu	10				Pa	ge 9
7:115		1 Statement of Revent	ic .		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
								513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	. 1c . 1d .1e and 1f	2,170,534 9,977,167 1,198,227				
Seg	h	Total. Add lines 1a-1f			12,198,453			
evenue	2a b	TUITION & FEES		Business Code 611310	80,714,560	80,714,560	39,975	
Program Service Revenue	c d e	SALES & SERVICE OF AUX SALES & SERVICE OF EDU		611310		17,320,912 1,230,554		
Progra	g	Total. Add lines 2a-2f			99,306,001			
	4	Investment income (includin and other similar amounts) Income from investment of tax-exe	empt bond proceeds		2,027,675			2,027,675
	b c	Gross Rents Less rental expenses Rental income or (loss)	(1) Real 85,039 239,753 -154,714	(II) Personal	-154,714			-154,714
	7a	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(i) Securities 8,062,451 6,954,393	(II) O ther 22,498	-134,/14			-134,714
		Gain or (loss) Net gain or (loss)	1,108,058	22,498	1,130,556			1,130,556
Other Revenue		Gross income from fundraising (not including \$ 50,752 of contributions reported on I See Part IV, line 18	g events ine 1c)	31,163				
₹		Less direct expenses Net income or (loss) from fun		36,984	-5,821			-5,821
	9a b c		ctivities See Part IV, line 19 . a	ь				
		returns and allowances . Less cost of goods sold . Net income or (loss) from sal						
	11a	Miscellaneous Revenue MISCELLANEOUS		Business Code 611310	525,502			525,502
		SUMMER PROGRAMS		721000	321,264		26,822	
		ALTERNATIVE INVESTMEN		611310	236,136			236,136
		l All other revenue : Total. Add lines 11a-11d .			1,408,947		-23,814	349,859
	12	Total revenue. See Instruction	ons		115,911,097	99,266,026	42,983 rm 990 (20	4,403,635

	990 (2010)				Page 10
Par					
	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to α			'D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	<u>, , , , , , , , , , , , , , , , , , , </u>		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	37,412,621	37,412,621		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,115,403	465,320	483,285	166,798
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	20,788		20,788	
7	Other salaries and wages	28,782,015	24,622,663	2,691,533	1,467,819
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,337,078	1,974,344	230,887	131,847
9	Other employee benefits	5,405,419	4,600,666	541,834	262,919
10	Payroll taxes	1,956,542	1,649,303	197,637	109,602
а	Fees for services (non-employees) Management	, ,	, ,	,	,
ь	Legal	47,023	10,765	36,183	75
С	Accounting	100,892		100,892	
d	Lobbying	·			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	100,509		100,509	
g	Other	·		·	
12	Advertising and promotion	265,536	69,367	188,211	7,958
13	Office expenses	2,874,445	2,566,204	173,134	135,107
14	Information technology	189,555	73,427	69,978	46,150
15	Royalties	·	•		
16	Occupancy	8,497,392	7,770,621	363,385	363,386
17	Travel	2,424,405	2,101,006	127,920	195,479
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings	1,462,837	1,178,925	99,358	184,554
20	Interest	1,084,096	1,003,429	40,334	40,333
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,988,924	5,639,135	87,447	262,342
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	EQUIPMENT RENTAL/MAINTE	7,670,000	6,661,472	770,709	237,819
b	OPERATION AND MAINTENAN	1,883,470	1,599,788	141,841	141,841
c	MISCELLANEOUS	1,197,984	1,138,132	31,931	27,921
d	PRINTING	658,046	428,482	161,734	67,830
e	POSTAGE	290,704	146,165	88,443	56,096
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	111,765,684	101,111,835	6,747,973	3,905,876
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) 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 1 30,664,297 2 29.720.273 4,921,547 6,573,490 3 217,778 4 247,501 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 2,060,317 1,750,436 8 493,003 451,058 268,508 325,150 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 169,545,617 10a Part VI of Schedule D 83.133.584 ь Less accumulated depreciation 10b 87,216,784 **10c** 86.412.033 81.827.500 11 11 94.905.172 18,676,985 23,070,259 12 Investments—other securities See Part IV, line 11 12 7,386,196 7,320,251 13 13 Investments—program-related See Part IV, line 11 . . 14 14 7,104,239 15 7,511,458 15 16 239,893,130 **16** 259,231,105 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 8,141,958 17 8,494,739 17 Accounts payable and accrued expenses . 5,640,867 18 5,721,730 18 314.397 262.844 19 19 31,138,520 29,917,544 20 20 Liabilities 21 131,213 21 118,274 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 364.049 23 167.094 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 14.498.643 25 15.768.998 Other liabilities Complete Part X of Schedule D 26 60.310.510 26 60.370.360 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 80.524.996 84,998,311 Unrestricted net assets Temporarily restricted net assets 25,331,307 28 18,058,481 28 Fund 80,999,143 88,531,127 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 179,582,620 33 198,860,745 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 239,893,130 259,231,105

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		115,9	911,097
2	Total expenses (must equal Part IX, column (A), line 25)	2		65,684	
3	Revenue less expenses Subtract line 2 from line 1	3	4,145,41		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		179,5	82,620
5	Other changes in net assets or fund balances (explain in Schedule O)	5		15,1	.32,712
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		198,8	360,745
Pai	Tt XII Financial Statements and Reporting Check If Schedule O contains a response to any question in this Part XII		•	T	No
1	Accounting method used to prepare the Form 990			ies	140
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νο
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, 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 its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Consolidated basis ☐ 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 th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

DLN: 93493065008242

42-0680466

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

LUTHER COLLEGE

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.

Employer identification number

	rt I			blic Charity Stat						nstructions				
he	organi	zation is	not a privat	e foundation becaus	eitis (Forl	ınes 1 thro	ugh 11, check	only one b	ox)					
1	Γ	A churc	:h, conventı	on of churches, or as	ssociation of	churches o	described in s e	ection 170(b)(1)(A)(i).					
2	<u>~</u>	A schoo	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)							
3	Γ	A hospi	tal or a coo	perative hospital sei	rvice organiz	atıon descr	rıbed ın sectio	n 170(b)(1)(A)(iii).					
4	Γ			n organization operat ty, and state	ed in conjun	ction with a	n hospital desc	cribed in se	ction 170(b)	(1)(A)(iii). E	Enter the			
5	Γ			erated for the benefit		or univers	ity owned or o	perated by	a governmen	tal unit desc	rıbed ın			
	_	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	Γ	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	Г			described in section	-	A)(vi) (Co	mplete Part II	[)						
9	Ė		-	at normally receives			·	•	butions, mer	nbership fee	s. and gross			
	·	-		ities related to its ex			• •		•	•				
				oss investment incoi										
			_	janization after June				•		•				
10	Г			ganızed and operated										
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 f g	ı	other the section of the ocheck the Since A	nan foundati 509(a)(2) rganization his box ugust 17, 2 g persons?	ox, I certify that the on managers and oth received a written de	ner than one etermination zation accep	or more pul from the IR	blicly support	ed organıza Type I, Typ on from any	e II or Type	oed in sectio	n 509(a)(1) or ng organization,			
				rectly or indirectly c				persons des	scribed in (ii)		Yes No			
			•	governing body of th		-	ation?			11g				
			•	er of a person describ						11g				
				led entity of a persoi						11g	(111)			
h		Provide	the following	ng information about	the supporte	ed organizat	tion(s)							
(i Nam suppo organiz		ne of (ii) (described on orted EIN lines 1 - 9 above		organızatı col (ı) lıst your gove	(iv) Is the organization in col (i) listed in your governing document?		tify the ion in your rt?	(vi Is t organiza col (i) or in the l	he ition in ganized	(vii) A mount of support				
				instructions))	Yes	No	Yes	No	Yes	No				
						1								

Part II Support Schedule for Organizations Described in Sections 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci die tests	iisted below, pie	case complet	c raic III.				
S	ection A. Public Support		_								
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received (Do not										
	ınclude 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										
	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										
Ü	line 4										
S	ection B. Total Support	1				I					
	endar year (or fiscal year beginning										
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total				
7	A mounts from line 4										
8	Gross income from interest,										
0	dividends, payments received on										
	securities loans, rents, royalties										
	and income from similar										
	sources										
9	Net income from unrelated										
-	business activities, whether or										
	not the business is regularly										
	carried on										
10	Other income Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part IV)										
11	Total support (Add lines 7										
	through 10)										
12	Gross receipts from related activities	es, etc (See inst	ructions)			12					
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,				
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔				
S	ection C. Computation of Pub	lic Support P	ercentage								
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14					
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15					
							 				
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec					
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. -				
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶				
r/a	10%-facts-and-circumstances test-						ın.				
	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										
	_	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F				
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1				
ט	15 is 10% or more, and if the organ										
	Explain in Part IV how the organizat			•		<u>-</u>	clv				
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	LIY ▶				
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1				
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □				

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15						
16 Public support percentage from 2009 Schedule A, Part III, line 15		16						
Section D. Computation of Investment Income Percentage								
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17						
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18						

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version:

EIN: 42-0680466

Name: LUTHER COLLEGE

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

Compensated Employees, and Independent Contractors										
(B) A verage hours		tion (che	')			(D) Reportable compensation from the organization (W-	(E) Reportable compensation	(F) Estimated amount of other compensation	
we e k	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х		х				0	0	0	
1 00	Х						0	0	0	
1 00	Х		х				0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х		х				0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
	(B) Average hours per week 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1	(B) Average hours per week Post of the per week 1 00 X 1 00 X <t< td=""><td>(B) A verage hours per week 1 00</td><td>(B) A verage hours per week</td><td> C</td><td> C</td><td> C</td><td> CC</td><td> Compensation (check all that apply) Compensation from the form related compensation from the organization (W-2/1099-MISC) Compensati</td></t<>	(B) A verage hours per week 1 00	(B) A verage hours per week	C	C	C	CC	Compensation (check all that apply) Compensation from the form related compensation from the organization (W-2/1099-MISC) Compensati	

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

(A) Name and Title	(B) (C) A verage hours that apply)					ll		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee <i>o</i> r director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
PEGGY ETTESTAD BOARD MEMBER	1 00	Х						0	0	0
DAVID MEYER BOARD MEMBER	1 00	Х						0	0	0
STEVEN BARNES BOARD MEMBER	1 00	Х						0	0	0
SUSAN SORLIEN BOARD MEMBER	1 00	Х						0	0	0
DIANE THORMODSGARD BOARD MEMBER	1 00	Х						0	0	0
RICHARD TORGERSON PRESIDENT	40 00			х				248,286	0	59,206
DIANE TACKE VICE PRESIDENT	40 00			х				142,530	0	33,265
WILLIAM CRAFT VICE PRESIDENT	40 00			х				146,712	0	21,804
KEITH CHRISTENSEN VICE PRESIDENT	40 00			х				132,915	0	33,883
SCOT SCHAEFFER VICE PRESIDENT	40 00			х				122,970	0	27,488
ANN HIGHUM VICE PRESIDENT	40 00			х				125,561	0	20,785
MARK LUND DIR OF INT'L EDUCATION	40 00					х		106,568	0	16,662
DAVID MITCHELL MATHEMATICS FACULTY/COACH	40 00					х		117,660	0	23,308
ELWIN FARWELL FORMER	0 00						х	20,788	0	0

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 4d. Other program services (Code) (Expenses \$ 1,061,748 including grants of \$) (Revenue \$) PUBLIC SERVICE OFFERINGS TO THE BROADER COMMUNITY INCLUDE A COLLEGE RADIO STATION, CONFERENCES AND SEMINARS, A PERFORMING ARTS SERIES, UPWARD BOUND, AND A VARIETY OF PROGRAMS IN THE ARTS, ATHLETICS, SCIENCES, AND LEADERSHIP DEVELOPMENT FOR HIGH SCHOOL STUDENTS (Code) (Expenses \$ 333,533 including grants of \$) (Revenue \$

RESEARCH THE COLLEGE RECEIVES GRANTS FOR FACULTY/STUDENT RESEARCH COLLABORATION, PARTICULARLY IN THE SCIENCES THE COLLEGE DEDICATES SPACE, RESOURCES, AND FACULTY TIME FOR COLLABORATIVE INVESTIGATION WITH STUDENTS RESEARCH PROJECTS ACROSS THE CURRICULUM OCCUR DURING THE ACADEMIC YEAR AND IN THE SUMMER (23 PROGRAMS)

DLN: 93493065008242

OMB No 1545-0047

Inspection

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization LUTHER COLLEGE

Employer identification number

			42-0680466		
Pai	rt I Organizations Maintaining Donor A organization answered "Yes" to Form 9		r Funds or Acco	ounts. Complete	e if the
	organization answered Tes to Form 9	(a) Donor advised funds	(b) Funds	and other accoun	ts
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 adv funds are the organization's property, subject to the			☐ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit	5 5	•	e	┌ No
Par	t II Conservation Easements. Complete	ıf the organızatıon answered "Ye	s" to Form 990, P	art IV, line 7.	
1 2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	tion or pleasure) Preservation o	of an historically import of a certified historical form of a conservati	structure	
_	easement on the last day of the tax year				
			Held	at the End of the	Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easement		2b		
С	Number of conservation easements on a certified hi	, ,	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
3	Number of conservation easements modified, transf	erred, released, extinguished, or termi	nated by the organiz	ation during	
	the taxable year 🛌				
4	Number of states where property subject to conserv	ation easement is located ►			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		handling of violatior	rs, and Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation ea	sements during the	year ►	
7	A mount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easem	nents during the yea	r ► \$	
8	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			┌ Yes	┌ No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's finar			
Part	Organizations Maintaining Collection Complete if the organization answered			iilar Assets.	
1a	If the organization elected, as permitted under SFA: art, historical treasures, or other similar assets help provide, in Part XIV, the text of the footnote to its fi	S 116, not to report in its revenue stat d for public exhibition, education or res	ement and balance search in furtherance		,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or resear			
	(i) Revenues included in Form 990, Part VIII, line	1	► \$		0
	(ii) Assets included in Form 990, Part X		► \$		0
2	If the organization received or held works of art, his following amounts required to be reported under SFA		•		
а	Revenues included in Form 990, Part VIII, line 1		► \$		6,000

b Assets included in Form 990, Part X

Part	Ш	Organizations Maintaining Co	llections of Art,	His	tori	cal Trea	sures, or	Othe	r Similar As	ssets (continued)
3		ing the organization's accession and other ms (check all that apply)	records, check any	of th	ne foll	_	_			tıon	
а	~	Public exhibition		d	굣	Loan or e	exchange prog	grams	;		
b	굣	Scholarly research		e	Γ	Other					
c	굣	Preservation for future generations									
4		ovide a description of the organization's cort XIV	llections and explai	n hov	w they	further th	ne organizatio	n's e	xempt purpose	ın	
5	ass	ring the year, did the organization solicit o sets to be sold to raise funds rather than t	o be maintained as p	art o	ofthe	organızat	ion's collectio	n?		☐ Yes	√ No
Par	t I\	Escrow and Custodial Arrange Part IV, line 9, or reported an am						ed "\	es" to Form 9	990,	
1a		the organization an agent, trustee, custod luded on Form 990, Part X?	ıan or other ınterme	dıary	for co	ontributioi	ns or other as	sets	not	☐ Yes	√ No
b	If"	Yes," explain the arrangement in Part XIV	' and complete the f	ollow	/ıng ta	ible			Aı	nount	
c	Ве	ginning balance						1c			
d	A d	lditions during the year						1d			
e	Di	stributions during the year						1e			
f	Εn	ding balance						1f			
2a	Dic	the organization include an amount on Fo	rm 990, Part X, line	21?						✓ Yes	No
b											
Pa	rt V	Endowment Funds. Complete	f the organızatıon	ans	were	d "Yes"	to Form 990), Pa			
			(a)Current Year	(b	Prior `	Year	(c)Two Years Ba	ick	(d)Three Years Back	(e)Four	Years Back
1a	Ве	gınnıng of year balance	102,864,370		94	,831,214	120,812	,405			
b	Со	ntributions	5,777,581		4	,419,467	3,720	,052			
c		estment earnings or losses	17,375,491			,669,457	-24,637				
d		ants or scholarships	2,742,859			,814,961	2,772				
e		her expenditures for facilities d programs	3,037,307		2	,240,807	2,291	,033			
f	A d	ministrative expenses									
g	En	d of year balance	120,237,276		102	,864,370	94,831	,214			
2	Pro	ovide the estimated percentage of the year	r end balance held a	s							
а	Во	ard designated or quasi-endowment 🕨	32 800 %								
b	Рe	rmanent endowment 🕨 67 200 %									
c	Te	rm endowment 🕨 0 %									
3a		e there endowment funds not in the posses	sion of the organiza	tion	that a	re held ar	nd administer	ed for	the		
		anization by unrelated organizations							3a	(i) Yes	No No
	• •	related organizations							3a		No
b		Yes" to 3a(II), are the related organization							3	ь	
4	De	scribe in Part XIV the intended uses of the	e organization's end	owm	ent fu	nds				•	
Par	t V	I Investments—Land, Buildings	, and Equipmer	ıt. S	ee F	orm 990	, Part X, line	e 10.			
		Description of investment				Cost or othe (investmen			(c) Accumulated depreciation	d (d) E	Book value
1 a l	and						59	94,581			594,581
b i	Build	lings		•		2,332,93	39 123,2	79,644	52,534,72	26	73,077,857
c l	_eas	ehold improvements					14,18	82,546	8,143,9	57	6,038,589
d E	Equi	pment					29,1	55,907	22,454,90	01	6,701,006
e () the	er						_			0

86,412,033

Part VIII Investments—Other Securities. See	Form 990, Part X, line 13 T		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market va	lue
(1)Financial derivatives	21,113,128		
(2)Closely-held equity interests			
(3)O ther			
(A) REAL ESTATE	807,227		
(B) NOTES RECEIVABLE	1,732		
(C) INVESTMENT IN SUBSIDIARY	1,148,172		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	23,070,259		
Part VIII Investments—Program Related. See			
(a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market va	lue
Total. (Column (b) should equal Form 990. Part X. col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip		(b) Book va	alue
Total (Column (b) about a good Form 000 Part V cal (P) line 1	<i>-</i>		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	-		
ANNUITIES PAYABLE	5,601,671		
ASSET RETIREMENT OBLIGATION	2,530,706		
DEPOSITS HELD IN CUSTODY FOR OTHERS	407,380		
OTHER LIABILITIES	4,954,698		
INTEREST RATE SWAP LIABILITY	2,274,543		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	15,768,998		

Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	115,911,097
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	111,765,684
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,145,413
4	Net unrealized gains (losses) on investments	4	14,133,986
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	998,726
9	Total adjustments (net) Add lines 4 - 8	9	15,132,712
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	19,278,125
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	93,772,260
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	15,763,953
3	Subtract line 2e from line 1	3	78,008,307
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 100,509		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	37,902,790
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	115,911,097
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	
1	Total expenses and losses per audited financial statements	1	74,492,307
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
с	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	239,753
3	Subtract line 2e from line 1	3	74,252,554
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 100,509		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	37,513,130
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	111,765,684

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
	PART III, LINE 4	WORKS IN THE COLLECTION INCLUDE PAINTINGS, DRAWINGS, WORKS PRODUCED THROUGH PRINT, PHOTO GRAPHIC, OR OTHER TECHNIQUES WHICH PRODUCE MULTIPLE ORIGINALS, SCULPTURE IN MEDIA, ASSEMBLAGES, TEXTILE, CERAMICS, AND UTILITARIAN OR RITUAL OBJECTS IN ANY MEDIUM WHOSE PRINCIPLE VALUE RESIDES IN THEIR AESTHETIC MERIT THE FINE ARTS COLLECTION EXISTS TO SUPPORT THE GENERAL MISSION OF THE COLLEGE BY PROMOTING AWARENESS AND UNDERSTANDING OF A BROAD SPECTRUM OF ARTISTIC EXPRESSION THROUGH DIVERSITY IN MEDIA, CULTURE, AND HISTORICAL PERSPECTIVE AS UNIQUE EXPRESSIONS OF THE HUMAN CONDITION, WORKS IN THE COLLECTION INVIGORATE LEARNING AND TEACHING, AND PROVIDE EXPANDED OPPORTUNITIES FOR STUDY, RESEARCH, AND INDIVIDUAL PLEASURE
	PART IV, LINE 2B	STUDENT DEPOSIT ACCOUNTS ARE HELD BY THE COLLEGE FOR VARIOUS STUDENT GROUPS ON CAMPUS AND ARE REPORTED AS LIABILITIES ON THE ORGANIZATION'S BALANCE SHEET
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	TO AWARD SCHOLARSHIPS TO STUDENTS AND TO COVER PROGRAM RELATED EXPENSES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE COLLEGE FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING CERTAIN TAX POSITIONS THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED NO LIABILITY HAS BEEN RECOGNIZED BY THE COLLEGE FOR UNCERTAIN TAX POSITIONS AS OF MAY 31, 2011 THE COLLEGE'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES THE TAX RETURNS FOR THE CURRENT YEAR AS WELL AS FISCAL YEARS 2008 THROUGH 2010 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES
PART XI, LINE 8 - OTHER ADJUSTMENTS		ACTUARIAL ADJUSTMENTS 1,390,214 INTEREST RATE SWAP -413,474 BOOK/TAX DIFFERENCE FROM K-1S 23,814 EXPENSE FROM WIND ENERGY LLC -1,828
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 239,753 ACTUARIAL ADJUSTMENTS 1,390,214
PART XII, LINE 4B - OTHER ADJUSTMENTS		FUNDED/UNFUNDED SCHOLARSHIPS 37,412,621 INTEREST RATE SWAP 413,474 BOOK/TAX DIFFERENCE FROM K-1S -23,814
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 239,753
PART XIII, LINE 4B - OTHER ADJUSTMENTS		FUNDED/UNFUNDED SCHOLARSHIPS 37,412,621

OMB No 1545-0047

2010

Open to Public

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

►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.

Schools

Inspection
Employer identification number

LUTHE	ER COLLEGE					
Do	rt I 42-0	0680466	YES	NO		
Pa			163	NO		
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its chother governing instrument, or in a resolution of its governing body?	narter, bylaws,	Yes			
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in brochures, catalogues, and other written communications with the public dealing with student admiss programs, and scholarships?		Yes			
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast the period of solicitation for students, or during the registration period if it has no solicitation program that makes the policy known to all parts of the general community it serves? If "Yes," please describ please explain If you need more space use Part II	ı, ın a way		No		
4	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes			
			Yes			
c	Copies of all catalogues, brochures, announcements, and other written communications to the public with student admissions, programs, and scholarships?	dealing 4c	Yes			
c	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes			
5	Does the organization discriminate by race in any way with respect to					
	• Admissions policies?	<u>5a</u>		No No		
c	: Employment of faculty or administrative staff?	5c		No		
c	Scholarships or other financial assistance?	<u>5d</u>		No		
	Educational policies?	5e		No		
	Use of facilities?	<u>5f</u>		No		
		<u>5g</u>		No.		
ľ	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No		
62	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes			
	Has the organization's right to such aid ever been revoked or suspended?	6b		No		
7	cords indicating the racial composition of the student body, faculty, and administrative staff? cords documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory sis? 4ipies of all catalogues, brochures, announcements, and other written communications to the public dealing histudent admissions, programs, and scholarships? 4pies of all material used by the organization or on its behalf to solicit contributions? 4uit answered "No" to any of the above, please explain. If you need more space, use Part II. es the organization discriminate by race in any way with respect to indents' rights or privileges? final policies? final policies? for a facilities? for a nay of the above, please explain. If you need more space, use Part II. for a facilities? for a facilities? for a facilities? for a nay of the above, please explain. If you need more space, use Part II. for a facilities? for a submitted and in the submitted and					
	от кеv Proc /5-50, 19/5-2 СВ 58/, covering racial nondiscrimination? If "No," explain on Part II	7	Yes			

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ny other additional information (see instructions)							
ldentifier	Return Reference	Explanation					
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE COLLEGE CATALOG, VIEW BOOK, APPLICATION FOR ADMISSION, ADMISSIONS GENERAL INFORMATION BROCHURE, AND THE STUDENT HANDBOOK ALL CONTAIN THE COLLEGE'S NONDISCRIMINATORY POLICY THESE MAJOR PUBLICATIONS ARE PROVIDED TO ALL STUDENTS THROUGHOUT THE ADMISSIONS AND ORIENTATION PROCESS BECAUSE THE COLLEGE TY PICALLY DRAWS APPROXIMATELY 33 PERCENT OF OUR STUDENTS FROM IA, 37 PERCENT FROM MN, 12 PERCENT FROM WI, 5 PERCENT FROM IL, 8 PERCENT FROM OUTSIDE THE 4 STATE AREA, AND 5 PERCENT INTERNATIONALLY, WE BELIEVE THAT WE QUALIFY FOR THE PUBLICITY EXCEPTION NOTICE PROVIDED BY SECTION 4 01(2(B) OF REV PROC 75-50 THE COLLEGE IS ACTIVELY COMMITTED TO PROVIDING OPPORTUNITIES TO STUDENTS FROM DIVERSE BACKGROUNDS A COORDINATED MULTICULTURAL AND INTERNATIONAL RECRUITMENT EFFORT EXISTS, COUPLED WITH A STRONG NETWORK OF ADVOCACY AND SUPPORT FOR STUDENTS FROM DIVERSE BACKGROUNDS AS EVIDENCE OF THE COLLEGE'S COMMITMENT, NEARLY 7 PERCENT OF OUR STUDENTS ARE RACIAL MINORITY STUDENTS					
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	LUTHER COLLEGE RECEIVES AID OR ASSISTANCE FROM THE GOVERNMENT AGENCIES AND PROGRAMS AS FOLLOWS STUDENT FINANCIAL ASSISTANCE PROGRAMS CLUSTER, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS, FEDERAL WORK STUDY PROGRAM, FEDERAL PERKINS LOAN PROGRAM, FEDERAL PELL GRANT PROGRAM, FEDERAL SMART GRANT PROGRAM, FEDERAL ACG PROGRAM, FEDERAL DIRECT LOAN PROGRAM, ROBERT C BYRD HONORS SCHOLARSHIPS, TEACHERS EDUCATION ASSISTANCE FOR COLLEGE & HIGHER EDUCATION GRANTS, IOWA TUITION GRANT					

Schedule E (Form 990 or 990-EZ) 2010

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

DLN: 93493065008242 OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Open to Public Inspection

Name of the organization LUTHER COLLEGE 42-0680466

Employer identification number

For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or ass	stance, and the selec	tion criteria used to awar	
For grant makers. Describe in Pa United States					•
Activites per Region (Use Part	V ıf addıtıonal s	space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
SOUTH AMERICA	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	102,39
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	91,04
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	1,012,45
CENTAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	88,27
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	34,88
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	72,10
				LUTHER COLLEGE OFFERS NUMEROUS OPPORTUNITES FOR SHORT AND LONG- TERM STUDY OUTSIDE THE CONTINENTIAL UNITED STATES	
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		266,00
Sub-total Total from continuation sheets		0			1,667,154

to Part I

Part	Part IV, lı	ne 15, for any					plete if the organizate received more than		
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶	
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>				
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	~	Υe	es	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Υe	es	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Υe	es	굣	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Υe	es	্	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	<u> </u>	Υe	es	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Υe	es	굣	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
racitimer	Returniterence	Explanation

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DLN: 93493065008242

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

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

Inspection

Name of the organization

Employer identification number

LUI	nek College							42-0680466			
Pa	rtI Fundraising Ac	tivities. Comple	te if the o	organiza	tion answei	ed "Yes"	to Form	990, Part IV	, line 17.		
1	Indicate whether the orga	nızatıon raısed fund:	s through	any of the	following act	:ivities Ch	ieck all th	nat apply			_
а	Mail solicitations			e	┌ Solicit	ation of no	n-govern	ment grants			
b	Internet and e-mail so	olicitations		f	┌ Solicit	atıon of go	vernment	grants			
c	Phone solicitations			g	☐ Specia	l fundraisi	ng events	;			
d	In-person solicitation	s									
2a	Did the organization have or key employees listed in								Гу	′es ┌	No
b	If "Yes," list the ten higher to be compensated at leas										
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust con contrib	Did ser have ody or trol of outions?	(iv) Gross from ac	-	(or re	nount paid to etained by) iser listed in col (i)	(or ret	ount paid to ained by) nization)
			Yes	No							
Tota	al			.							

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 ALUMNI FUNDRAISING (event type)	(b) Event #2 GOLF OUTING (event type)	(c) O ther Events 3 (total number)	(d) Total Events (Add col (a) through col (c))
IKUĐ	1	Gross receipts	23,43!	26,496	31,984	81,915
Revenue	2	Less Charitable contributions	17,590	14,303	18,859	50,752
	3	Gross income (line 1 minus line 2)	5,84!	12,193	13,125	31,163
	4	Cash prizes				
မွ	5	Non-cash prizes			433	433
Expenses	6	Rent/facility costs	1,406	8,927	10,723	21,056
	7	Food and beverages	6,433	3		6,433
Direct	8	Entertainment				
Δ	9	Other direct expenses .	3,21!	3,802	2,045	9,062
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	🛌	36,984
	11	Net income summary Combine li				-5,821
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
မှ	2	Cash prizes				
sesued:	3	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
<u></u>	5	Other direct expenses				
	6	Volunteer labor	∀es % No	∇ Yes % No	┌ Yes %	
	7	Direct expense summary Add lines	s 2 through 5 ın column ((d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)		
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac	h of these states?		· Fyes Fno
10a b		re any of the organization's gaming l Yes," Explain			the tax year?	· · Fyes Fno

11	Does the organization operate ga	aming activities with nonmembers?		Г үе	s Γ_{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity		
	formed to administer charitable (jaming?		Г _{Yе}	s Γ_{No}
13	Indicate the percentage of gamin	ng activity operated in			
а	The organization's facility			1	
b	An outside facility			,	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	d	
	Name 🟲				
	Address 🟲				
15a		ntract with a third party from whom th		_	_
					s No
ь		ning revenue received by the organizated by the third party 🟲 \$	ation > \$ and the		
c	If "Yes," enter name and address	5			
	Name 🟲				
	Address 🟲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation l	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а		er state law to make charitable distrib		_	_
p.				· Ye	s No
D		required under state law distributed activities during the tax year - \$	to other exempt organizations or spent		
Par		<u>-</u>	r responses to question on Schedul	e G (see	
	Identifier	ReturnReference	Explanation		

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DLN: 93493065008242 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Inspection

Name of the organization						Employer identification	on number
LUTHER COLLEGE						42-0680466	
Part I General Informatio	n on Grants and	l Assistance				•	
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	ard the grants or as:	sıstance?					▽ Yes ┌
Part II Grants and Other As Form 990, Part IV, line duplicated if additiona	ssistance to Gove e 21 for any recip	vernments and O lent that received n	rganizations in the	United States. Con eck this box if no one	recipient receive	d more than \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
<u> </u>							
2 Enter total number of section 50 5 Enter total number of other organizations and the contract of the contra		ment organizations .				· · · · · • • • • • • • • • • • • • • •	

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT SCHOLARSHIPS	1650	37,412,621			

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 STUDENTS RECEIVING SCHOLARSHIPS AND FELLOWSHIPS ARE DETERMINED BY THE
MONITORING GRANTS		OFFICE OF FINANCIAL STUDENT AID THROUGH CAREFUL STUDY OF THE INFORMATION ON THE FINANCIAL
IN THE U S		ASSISTANCE APPLICATION, THE STUDENT'S ACADEMIC RECORD, TEST SCORES, AND RECOMMENDATIONS
		DETAILED RECORDS AND STATISTICS ARE MAINTAINED BY THE OFFICE OF FINANCIAL AID AND THE OFFICE OF
		ASSESSMENT AND INSTITUTIONAL RESEARCH IN REGARDS TO ALL FINANCIAL AID AWARDED TO STUDENTS OF
		THE COLLEGE, INCLUDING GRANTS AND SCHOLARSHIPS

DLN: 93493065008242

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

LOI	HER COLLEGE		42-0680466			
Pa	rt I Questions Regarding Compensation	n	12 333 133			
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III		•			
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b	Yes	
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the	nat a <u>pp</u> l	У			
	Compensation committee	_	Written employment contract			
	Independent compensation consultant	<u> </u>				
	Form 990 of other organizations	~	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt from the organization or a related organization?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu					
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		No
9	If "Yes" to line 8 did the organization also follow the	a rahutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) RICHARD TORGERSON	(ı) (ıı)	226,326 0	-	21,960	25,167 0		307,492)
(2) DIANE TACKE	(ı) (ıı)	136,530 0		6,000	14,794 0	18,471	175,795)
(3) WILLIAM CRAFT	(ı) (ıı)	146,312 0	0	1	14,643 0	7,161	1 168,516)
(4) KEITH CHRISTENSEN	(ı) (ıı)	132,915 0	_		13,787 0		166,798	
(5) SCOT SCHAEFFER	(ı) (ıı)	122,970 0	- 1	1	12,629 0		150,458)
(6) ELWIN FARWELL	(ı) (ıı)	20,788	- 1		0	1	/)
(7)				1				
(8)								
(9)	<u> </u>		<u> </u>	'				
(10)		1		,				
(11)				1				
(12)		'	,					
(13)		<u> </u>		'	1			
(14)		1	,	'				
(15)		'	,	1				
(16)		<u> </u>		<u> </u>	<u> </u>			

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	1A	LUTHER COLLEGE PROVIDES A HOUSE, UTILITIES, AND COUNTRY CLUB DUES TO THE PRESIDENT OF THE COLLEGE, AND COUNTRY CLUB DUES TO THE VICE PRESIDENT FOR DEVELOPMENT THESE BENEFITS ARE LISTED IN THE WRITTEN COMPENSATION POLICY FOR THE COLLEGE AND ARE ALSO IN THE WRITTEN EMPLOYMENT CONTRACT OF EACH OF THESE INDIVIDUALS THE HOUSING ALLOWANCE FOR THE PRESIDENT, AND THE COUNTRY CLUB DUES FOR THE PRESIDENT AND VICE PRESIDENT FOR DEVELOPMENT ARE NOT TREATED AS TAXABLE COMPENSATION BECAUSE THE PRESIDENT'S HOUSE IS USED FOR COLLEGE BUSINESS AND MEETINGS, AND THE COUNTRY CLUB IS USED EXCLUSIVELY FOR BUSINESS PURPOSES TO BUILD RELATIONSHIPS WITH PROSPECTIVE DONORS TO THE COLLEGE
	PART I, LINE 4A	ELWIN FARWELL, FORMER PRESIDENT RECEIVED \$20,788 IN DEFERRED COMPENSATION

Schedule J (Form 990) 2010

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Schedule O (Form 990).

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493065008242

Open to Public **Inspection**

Part I Bond Issues

Schedule K

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization LUTHER COLLEGE

Employer identification number

(h) O n

42-0680466

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rıce	(f) Description	n of Purpose	(g) Defe	eased	Beha	On alf of uer		Pool incing
									Yes	No	Yes	No	Yes	No
A	CITY OF DECORAH	42-6004485		12-15-2004	3,600		ENTENNIAL UN ENOVATION	NION		X		X		x
В	IOWA HIGHER EDUCATION LOAN AUTHORITY	42-1235696	462460F43	12-10-2008	11,000		SCIENCE BUILDING RENOVATION			х		X		х
c _	CITY OF DECORAH	42-6004485		12-21-2010	7,500	,000 RI	MILLER AND DIESETH RESIDENCE HALL RENOVATIONS			х		х		Х
_									\perp					
	rt II Proceeds													
Pa	rt III Proceeds				<u> </u>	A B			С			D		
1	A mount of bonds retired					1,542,8	858							
2	A mount of bonds legally defea	sed												
3	Total proceeds of issue					3,600,0	000	11,000,000		7,5	500,000			
4	Gross proceeds in reserve fur	nds												
5	Capitalized interest from proc	eeds												
6	Proceeds in refunding escrow													
7	Issuance costs from proceeds	s				13,8	861	213,034			16,500			
8	Credit enhancement from prod	eeds												
9	Working capital expenditures	from proceeds												
10	Capital expenditures from pro	ceeds				3,586,	139	10,786,966			50,062	:		
11	Other spent proceeds													
12	Other unspent proceeds					7,433,4	438			7,4	133,438			
13	Year of substantial completion	n			20	06	20	09	2	012				
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as par	t of a current refund	ing issue?			×		Х			Χ			
15	Were the bonds issued as par	t of an advance refu	nding issue?			Х		х			Χ			

allocation of proceeds? Part IIII Private Business Use

16

Has the final allocation of proceeds been made?

			4	I	В	C		D	
		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?		х		×		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		x		×		X		

Χ

Χ

Does the organization maintain adequate books and records to support the final

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

·	Private business use (Continued)								
			4	I	В		С	I	D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		×		х		
ь	Are there any research agreements that may result in private business use of bond- financed property?		х		×		×		
С	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?	Х		×		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 %		0 %		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 %		0 %		0 %		
6	Total of lines 4 and 5		0 %		0 %		0 %		
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х			

Part IV Arbitrage

Pa	Arbitrage	Α			•	С		D	
		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?	res	NO	res	NO	res	NO	165	NO
	dona issue/		X		X		X		
2	Is the bond issue a variable rate issue?	X		Х			X		
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
		X		X			X		
b	Name of provider	USBANK		BANKOFM	ONTREAL				
С	Term of hedge	10 0000	0000000	10 0000	00000000				
d	Was the hedge superintegrated?		х		х				
e	Was a hedge terminated?		х		х				
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		
6	Did the bond issue qualify for an exception to rebate?		х		Х		х		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanation
SCHEDULE K SUPPLENTAL INFORMATION		SCHEDULE K, PART I, COLUMN C - THE BONDS ISSUED DECEMBER 21, 2010 ARE STRUCTURED SO THAT THE PRINCIPAL IS ISSUED FOR REIMBURSEMENT OF ELIGIBLE COSTS UNTIL PRINCIPAL IS DRAWN DOWN, THE COLLEGE DOES NOT PAY OR EARN INTEREST ON IT THAT IS WHY PART II, LINE 4C IS ZERO, EVEN THOUGH PART II, LINE 12C IS \$7,433,438

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DLN: 93493065008242

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2010

Open to Public Inspection

Name of the organization LUTHER COLLEGE								mployer i	dent if ica	ition numb	er
								2-06804			
Part I Excess Benefit Trai										401	
Complete if the organizat				m 990, F					Part V, I		orrected
1 (a) Name of disq	ualıfıed	person			(b) Desc	ription	of trans	action		Yes	No
											1.0
2 Enter the amount of tax impos	ed on t	he orga	nization man	laders or	disqualified ners	ons dur	ına the	vear unde			
section 4958	• u on t			-			_	•	• \$		
3 Enter the amount of tax, if any	, on lin	e 2, abo	ve, reimburs	ed by th	ie organization .			•	· \$		
Part II Loans to and/or I Complete if the organiz) Part IV line 26	or For	m 990-l	F7 Part V	line 38	a	
Complete if the organiz			1 103 0111	01111 3 3 0	,, r are 1 v , mie 2 e	1	111 3 3 0	(f)	, iiiie 50		
(a) Name of interested person and		oan to om the	(c)0 rig	unal		(e)		Approv		(g)Write	
purpose	organı	zation?	principal		(d)Balance due	defau	ilt /	by boar		agreeme	nt?
	То	From	1			Yes	No	Yes	No	Yes	No
	<u> </u>										
									-		
	 							_	+		
Total				▶ \$							
Total					Persons.						
Complete if the orga						/, line 2	27.				
(a) Name of interested pers	on	(een interested pei	rson	(c)Ar	nount of a	rant or t	ype of assi:	stance
(a) Name of interested pers			an	nd the or	ganization		(0)///			, pe oi ussi.	

Part IV Business Transactions Involving Interested Persons.

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

Complete ii tile organizatio	ni aliswereu Tes Oli	ruilli 990, Pait IV, III	ie zoa, zob, ui zoc.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organi	aring of zation's nues?
	organization			Yes	No
(1) FIRST CITIZENS NATIONAL BANK	MARTI RODAMAKER, BOARD MEMBER IS PRESIDENT OF FIRST CITIZENS NATIONAL BANK	7,500,000	LOAN		No
(2) ANNE CRAFT	SPOUSE OF WILLIAM CRAFT, VICE PRESIDENT	· · · · · · · · · · · · · · · · · · ·	ANNE CRAFT IS EMPLOYED BY LUTHER COLLEGE		No
(3) JUDITH TORGERSON	SPOUSE OF RICHARD TORGERSON, PRESIDENT	· · · · · · · · · · · · · · · · · · ·	JUDITH TORGERSON IS EMPLOYED BY LUTHER COLLEGE		No
				ļ	

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

► Attach to Form 990. Internal Revenue Service Name of the organization

Employer identification number

LUTH	ER COLLEGE				-			
					42-0680466			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of determining of amounts		contribut	tion
1	Art—Works of art	Х	1	6,000	FMV			
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	Х		4,425	FMV			
5	Clothing and household							
good	ds							
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	39	519,113	FMV			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other	Х	1	600,000	APPRAISAL			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens	Х	1	4,076	FMV			
24	Archeological artifacts .							
25	O ther ▶ ()		See Add'l Data					
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received be for which the organization completed	-	= -		29			1
							Yes	No
30a	During the year, did the organizati	on receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years	from the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire	holding p	eriod?			30a		No
Ь	If "Yes," describe the arrangemer	it in Part I	I					
31	Does the organization have a gift	acceptano	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use	thırd partı	es or related organizations	to solicit, process, or sell	non-cash	22-		N

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

b If "Yes," describe in Part II

describe in Part II

32a

Part II

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

Ident if ier	Return Reference	Explanation
	, , ,	THE NUMBER IN COLUMN (B) REPRESENTS NUMBER OF
NUMBER OF CONTRIBUTORS		CONTRIBUTIONS

Schedule M (Form 990) 2010

Software ID: Software Version:

EIN: 42-0680466

Name: LUTHER COLLEGE

Form 990 Schedule M, Part I - Types of Property

Property Type	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining oncash contribution amounts
ITEMS FOR GOLF Other ► (OUTING)	V	10	1.020	- MV
ITEMS FOR NORTHFIELD GOLF	X	10	1,820	FMV
Other►(OUTING)	X	1	575	FMV
1980'S NAVY Other►(UNIFORM)	x	1	50	FMV
BO A R D MEET IN G				
Other►(<u>EXPENSES</u>)	Х	1	376	COST
CAMPAIGN Other►(EVENT)	Х	2	10,538	
Other ► (<u>EQUIPMENT</u>)	Х	1	26,126	FMV
PICTURE Other ► (<u>FRAMING</u>)	Х	1	56	FMV
HANDBELLS AND				
Other ► (CHIMES)	X	1	4,985	
Other ► (POSTAGE)	X	1	61	COST
WINE FOR DECORAH Other►(CAMPAIGN)	x	1	202	COST
DINING SUPPLIES &	^	1	293	C031
Other • (EQUIPMENT)	X	1	18,669	FMV
DES MOINES AREA			,	
CAMPAIGN Other►(<u>EVENT</u>)	x	1	1,064	FMV

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As Filed Data -

DLN: 93493065008242

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization
LUTHER COLLEGE

Employer identification number
42-0680466

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE MEMBERS OF THIS CORPORATION SHALL BE THOSE INDIVIDUALS HOLDING THE FOLLOWING POSITIONS AND OFFICES (A) THE VOTING MEMBERS OF THE CHURCHWIDE ASSEMBLY OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA ENTITLED TO VOTE AT SUCH MEETINGS CHOSEN IN ACCORDANCE WITH THE DISCIPLINE AND USAGE OF SUCH CHURCH, OR ITS SUCCESSOR SUCH MEMBERS SHALL REMAIN MEMBERS OF THE CORPORATION UNTIL THE CONVENING OF THE SUCCEEDING CHURCHWIDE ASSEMBLY OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA AT WHICH TIME SUCH MEMBERS SHALL GIVE PLACE TO THE VOTING MEMBERS AT SUCH SUCCEEDING CHURCHWIDE ASSEMBLY, IN ACCORDANCE WITH THE DISCIPLINE AND USAGE OF SAID CHURCH, OR ITS SUCCESSOR (B) THE MEMBERS OF THE BOARD OF REGENTS OF THIS CORPORATION (C) THE PRESIDENT OF THE COLLEGE OPERATED BY THIS CORPORATION (D) THE OFFICERS OF THE ADMINISTRATION OF THE COLLEGE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE GOVERNING BODY OF LUTHER COLLEGE IS THE BOARD OF REGENTS THE BOARD OF REGENTS ARE LISTED AS MEMBERS OF THE ORGANIZATION REGENTS ARE ELECTED BY THE BOARD AND THEIR ELECTION SHALL BE SUBMITTED FOR RATIFICATION BY THE CORPORATION

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THE GOVERNING BODY OF LUTHER COLLEGE IS THE BOARD OF REGENTS THE BOARD OF REGENTS ARE LISTED AS MEMBERS OF THE ORGANIZATION DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY THE BOARD OF REGENTS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 IS PREPARED BY THE ACCOUNTING MANAGER, REVIEWED BY THE CONTROLLER, AND IS REVIEWED BY THE VP FOR FINANCE AND ADMINISTRATION THE 990 IS THEN SENT TO THE FIRM OF RSM MCGLADREY FOR REVIEW AND ENTRY INTO THEIR TAX SOFTWARE AFTER ALL REVIEWS ARE COMPLETED, THE 990 IS PRESENTED TO THE AUDIT COMMITTEE FOR THEIR REVIEW AND APPROVAL AFTER AUDIT COMMITTEE APPROVAL, THE 990 IS SENT TO EACH BOARD MEMBER, AND THE COMPLETED FORM 990 IS SIGNED BY THE VP FOR FINANCE AND ADMINSTRATION, AND A PARTNER FROM MCGLADREY & PULLEN LLP, AND IS FILED WITH THE IRS

Identifier	Return Reference	Explanation							
	FORM 990, PART VI, SECTION B, LINE 12C	LUTHER COLLEGE'S CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT IS SENT OUT TO THE BOARD OF REGENTS, PRESIDENT, VICE PRESIDENTS, AND KEY EMPLOYEES OF THE COLLEGE IN MAY OF EACH YEAR EACH RECIPIENT IS REQURIED TO READ THE POLICY AND TO COMPLETE, SIGN, AND RETURN THE DISCLOSURE STATEMENT TO THE OFFICE FOR FINANCIAL SERVICES TO BE REVIEWED FOR POTENTIAL INTERESTS THAT COULD GIVE RISE TO CONFLICTS LUTHER COLLEGE'S CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT ADDRESSES ALL AREAS OF CONCERN EXPRESSED ON FORM 990							

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE DIRECTOR OF HUMAN RESOURCES AND THE PRESIDENT OF THE COLLEGE WILL GATHER THE FOLLOWING BENCHMARK SALARY DATA 1 MEDIAN SALARIES FOR CUPA PRIVATE RELIGIOUS COLLEGES WITH COMPARABLE ENROLLMENT 2 MEDIAN AND MAXIMUM SALARIES FOR 21 SELECTED ELCA COLLEGES 3 MEDIAN AND MAXIMUM SALARIES FOR 7 COMPARABLE PEER ELCA COLLEGES 4 MEDIAN AND MAXIMUM SALARIES FOR 5 COMPARABLE IAICU COLLEGES THE PRESIDENT OF THE COLLEGE WILL REVIEW AND PRESENT THE PRESIDENTIAL AND VICE PRESIDENTIAL BENCHMARK SALARY INFORMATION TO THE BOARD OF REGENTS AT THE MAY BOARD MEETING, THE BOARD OF REGENTS WILL MEET TO REVIEW THE FOUR SALARY BENCHMARK INDICATORS AND WILL DETERMINE AND APPROVE COMPENSATION FOR THE PRESIDENT AND VICE PRESIDENTS OF THE COLLEGE THE BOARD OF REGENTS WILL ALSO REVIEW THE NON-SALARY COMPENSATION BENEFITS PROVIDED TO THE OFFICERS THE CHAIRPERSON OF THE BOARD OF REGENTS WILL NOTIFY THE DIRECTOR OF HUMAN RESOURCES WITH THE APPROVAL OF COMPENSATION FOR THE PRESIDENT AND VICE PRESIDENTS WILL BE RECORDED IN THE MINUTES OF THE MEETING AND WILL BE MAINTAINED IN A CONFIDENTIAL ARCHIVE THIS PROCESS WAS LAST COMPLETED IN MAY, 2011

ldentifier	Return Reference	Explanation					
	FORM 990, PART VI, SECTION C, LINE 19	COPIES OF LUTHER COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS, AND FORMS 990 & 990T ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE OFFICE FOR FINANCIAL SERVICES, 700 COLLEGE DRIVE, DECORAH, IA 52101 THE AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ONLINE AT WWW LUTHER EDU/FINANCIALSERVICES					

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 14,133,986 ACTUARIAL ADJUSTMENTS 1,390,214 INTEREST RATE SWAP -413,474 BOOK/TAX DIFFERENCE FROM K-1S 23,814 EXPENSE FROM WIND ENERGY LLC -1,828 TOTAL TO FORM 990, PART XI, LINE 5 15,132,712

DLN: 93493065008242

2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
LUTHER COLLEGE
42-0680466

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	Primary activity		ate y)	(d) Total income	(e) End-of-year assets	(f) Direct controllin entity	Direct controlling			
(1) LUTHER COLLEGE WIND ENERGY PROJECT LLC 700 COLLEGE DRIVE DECORAH, IA 52101 35-2366881	PRODUCTION OF ELECTRICITY		IA		0	1,283,6	94 INC	ITURES			
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete the tax year.)	ıf the	e organızatıon	ans	swered "Yes" o	n Form 990, Part	IV, line 34 becaus	e ıt had	one		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		Exen	(d) mpt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	organ	rolled ization		
(1) MCELROY LUTHER LOAN FUND								Yes	No		
700 COLLEGE DRIVE DECORAH, IA 52101 42-1202192	HIGHER EDUCATION LOAN FUND		IA		501(C)(3)	11B	N/A	Yes			
For Privacy Act and Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.		Cat No 50	135	iY		Schedule R (F	orm 990)	2010		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (j) General or managing partner?		(k) Percentage ownership	
							Yes	No		Yes	No	

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

			<u> </u>		· · · · · · · · · · · · · · · · · · ·		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) LUTHER COLLEGE VENTURES INC 700 COLLEGE DRIVE DECORAH, IA52101 27-3945752	HOLDING COMPANY	IA	N/A	С		1,283,694	100 000 %
	·	<u> </u>	•	•	•		

chedule R (Form 990) 2010				Pa	ige 3				
Part V Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pa	rt IV, line 34, 35, 35	5A, or 36.)						
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related org	anızatıons lısted ın Part	s II-IV?							
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No				
b Gift, grant, or capital contribution to other organization(s)			1b	Yes					
c Gift, grant, or capital contribution from other organization(s)			10		No				
d Loans or loan guarantees to or for other organization(s)			1d		No				
e Loans or loan guarantees by other organization(s)			1e	1	No				
f Sale of assets to other organization(s)			1f		No				
g Purchase of assets from other organization(s)			1 g		No				
h Exchange of assets									
i Lease of facilities, equipment, or other assets to other organization(s)			1i		No				
j Lease of facilities, equipment, or other assets from other organization(s)			1 j		No				
k Performance of services or membership or fundraising solicitations for other organization(s)			1k		No				
l Performance of services or membership or fundraising solicitations by other organization(s)			11		No				
m Sharing of facilities, equipment, mailing lists, or other assets			1n	n	No				
n Sharing of paid employees			1n		No				
Reimbursement paid to other organization for expenses			10		No				
p Reimbursement paid by other organization for expenses			1p	1	No				
q Other transfer of cash or property to other organization(s)			19		No				
r Other transfer of cash or property from other organization(s)			1r		No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ıonshıps and transactı	on thresholds						
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ Involve		ount				
L) LUTHER COLLEGE VENTURES INC	В	1,150,000	CASH						
2)									

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) LUTHER COLLEGE VENTURES INC	В	1,150,000	CASH
(2)			
(3)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	N	
										+	
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

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Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493065008242

OMB No 1545-0172

Form **4562**

Department of the Treasury Internal Revenue Service (99)	•		Attachment Sequence No 67							
Name(s) shown on return LUTHER COLLEGE		Busines	s or activity to v	vhich this forn	Identifying number					
		FORM 9	90 PAGE 10			4	2-0680466			
	•	Certain Property U								
		sted property, compl		_	plete Part I.		1			
1 Maximum amount Se	e the instructions	for a higher limit for ce	rtaın busınesses			1	500,000			
2 Total cost of section :	179 property plac	ed in service (see instr	uctions) .			2				
3 Threshold cost of sec	tion 179 property	/ before reduction in lim	ıtatıon (see ınstr	uctions) .		3	2,000,000			
4 Reduction in limitation	n Subtract line 3	from line 2 If zero or le	ss, enter -0-			4				
5 Dollar limitation for ta	x year Subtract	line 4 from line 1 If zero	or less, enter -	0- If married	filing					
separately, see instru	ctions					5				
			(b) Cost (b)	usiness use						
6 (a)	Description of pr	operty	1 ' '	ıly)	(c) Elected c	ost				
7 Listed property Enter	the amount from	line 29		. 7			_			
8 Total elected cost of	section 179 prop	erty Add amounts in co	lumn (c), lınes 6	and 7 .		8				
9 Tentative deduction 1	Enter the smaller	of line 5 or line 8 .				9				
10 Carryover of disallowe	ed deduction from	line 13 of your 2009 Fo	orm 4562 .			10				
11 Business income limitation		ee instructions)		11						
12 Section 179 expense	deduction Add I	nes 9 and 10 hut do no	t enter more tha	n line 11		12				
13 Carryover of disallowe		ŕ		_						
				. 13						
Note: Do not use Part Part II Special D		Allowance and Othe			include listed n	onert	v) (See instructions)			
14 Special depreciation a						Орст	y y (See mistractions)			
tax year (see instruct		mica property (other tha	minored property	, p.acca se	TVICE dailing the	14				
15 Property subject to se	ection 168(f)(1) e	election				15				
16 Other depreciation (in						16				
		Oo not include listed	property.) (Se	ee instructio	ns.)		<u> </u>			
			ection A		,					
17 MACRS deductions fo	r assets placed ı	n service in tax years be	eginning before 2	2010		17				
18 If you are electing	to group any a	ssets placed in servi	ce during the t	ax year into	one or more					
general asset acco		· · · · · · · · · · · · · · · · · · ·	=	-	▶┌					
Section B—Ass	ets Placed in	Service During 20			General Depi	recia	tion System			
		(c) Basıs for								
(a) Classification of	(b) Month and	depreciation	(d) Recovery	(-) ((6) M at la	.	(g)Depreciation			
property	year placed in service	(business/investment use	period	(e) Convent	ion (f) Metho	'a	deduction			
		only—see instructions)	1							
19a 3-year property										
b 5-year property										
c 7 - year property										
d 10-year property										
e 15-year property										
f 20-year property										
g 25-year property		S/L								
h Residential rental										
property										
i Nonresidential real			39 yrs	MM	S/L					
property	n C. Assets Disc	ed in Conside During 201	 C Tay Year Usin	M M	S/L	Suct				
20a Class life	UII C—ASSETS PIAG	ced in Service During 201	LO TAX TEAT USING	H CHE WICELUA	S/L	- syst	CIII			
b 12-year	┪		12 yrs	+	S/L					
c 40-year			40 yrs	MM	S/L					
	ry (see instruc	tions)	1 10 113	1 101111		l				
21 Listed property Enter		•				21				
22 Total. Add amounts fr			and 20 in colum	nn (g), and line	e 21 Enter here	- -				
		urn Partnerships and S				22	5,988,924			
23 For assets shown abo portion of the basis at			nt year, enter the	e 23						

Part V

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

		z+a, $z+b$, cc														
Section A—Depre	ciation a	<u>nd Other Ir</u>	<u>ıforma</u>	tion (C	aution	: See	the i	<u>nstru</u>	ctic	ons for I	imits i	for pa	sseng _'	<u>er au</u>	<u>tomot</u>	oiles. 🕽
24a Do you have evider	ice to support i	the business/inv	estment u	ise claimed	d? ┌Yes	Гио			24b	If "Yes,"	s the ev	dence	written?	$\Gamma_{Y\epsilon}$	ᇙᄃᇄ	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		I (hiisiness/investment i			ı	(f) (g) Recovery Method/ period Convention			(h) Depreciation/ deduction			(i) Elected section 179 cost		
25Special depreciation allo	•		rty placed	ın service o	during the	tax year	and u	ısed m	ore t	han 25						
26 Property used more	than 50%	n a qualified l	business	use						· ·						
		%							Т					\top		
		%												\perp		
37 Dramarty used EON		%														
27 Property used 50%	or less in a	quanned bus	mess us	e	1			l	S	/L -	Т			$\overline{}$		
		%							_	/L -				1		
		%							S	/L -				그		
28 Add amounts in co	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on Iir	ne 21,	page	1	•	28						
29 Add amounts in co	olumn (ı), lın	e 26 Enterhe	ere and c	n line 7,	page 1					•		29				
				—Infor												
Complete this section If you provided vehicles to														se vehic	les	
· ·					a)	T	b)			c)		1)	(e	_		f)
30 Total business/inv year (do not include			ing the	Vehi	cle 1	Vehi	cle 2	<u> </u>	e hi	icle 3	Vehi	cle 4	Vehic	cle 5	Vehi	icle 6
31 Total commuting r	miles driven	during the ye	ar .													
32 Total other persor	nal(noncomm	nuting) miles (driven													
33 Total miles driven during the year Add lines 30 through 32																
34 Was the vehicle a		ersonal use		Yes	No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		by a more th	an 5%													
36 Is another vehicle	available fo	r personal us	e? .													
Section Answer these question 5% owners or related	ns to determ	•	et an exc												not mo	re thar
37 Do you maintain a	written polic	y statement	that prob	nibits all	personal	use of	vehi	cles,	nclu	udıng cor	nmutın	g, by y	our	Y	es	No
employees? .						•	٠	•	•			•	•			
38 Do you maintain a employees? See the																
39 Do you treat all us	e of vehicles	s by employee	es as pei	sonal us	e? .											
40 Do you provide movehicles, and retain				oyees, ol	otain info	rmatio	n fror	m you	ren	nployees	about	the us	e of the	e 🗀		
41 Do you meet the re				• • automobi	e demor	• nstratio	n us	e? (Se	e ir	nstructio	ns)					
Note: If your answ	er to 37, 38	, 39, 40, or 4	1 is "Ye:	s," do not	t comple	te Sect	ion B	3 for t	ne c	overed v	ehicles	5				
Part VI Amo	rtization															
(a)		(b) Date		(c A morti			((d) (e) Code A mortizatio			-	ion (f)				
Description of c	osts	amortizatior begins	י	amo				ection		perio perce				his ye		
42 A mortization of co	sts that beg	ıns durıng yo	ur 2010	tax year	(see inst	tructio	ns)			-						
43 A mortization of co	sts that beg	an before you	r 2010 t	ax year							43					
	_	-									—					

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

44