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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

Open to Public Inspection

| A Fo                           | r the     | 2010 calendar year, or tax year beginning 07-01-20  | 10 and ending 06-30-20:                  | 11               |                          |                     |                        |  |  |  |  |
|--------------------------------|-----------|---|--|------------------|--------------------------|---------------------|------------------------|--|--|--|--|
| <b>B</b> Ch                    | eck ıf a  | pplicable C Name of organization Elmhurst College   |  |                  | D Employ                 | er identifi         | ication number         |  |  |  |  |
| ☐ Add                          | dress ch  | nange  Doing Business As  |  |                  | 36-21                    | 59145               |                        |  |  |  |  |
| ∏ Na                           | me cha    | nge   |  |                  | E Telepho                | ne numbe            | er                     |  |  |  |  |
| ┌ Init                         | tial retu | rn Number and street (or P O box if mail is not deliv   | vered to street address)                 | Room/suite       | (630)                    | 517-301             | 2                      |  |  |  |  |
| Г Те                           | mınate    | d 190 Prospect Avenue   |  |                  |                          |                     |                        |  |  |  |  |
| ┌ Am                           | ended     |   |  |                  | <b>G</b> Gross re        | ceipts \$ 15        | 0,924,781              |  |  |  |  |
| Г <sub>Арі</sub>               | olication | Elmhurst, IL 601263296<br>n pending   |  |                  |                          |                     |                        |  |  |  |  |
|                                |           | <b>F</b> Name and address of principal office   | r  | H(a) Isthisa     | group roturn for         | affiliator 2        | Voc V No               |  |  |  |  |
|                                |           | Denise P Jones  |  | in(d) is tills a | group recurrior          | aiiiiates ,         | res i No               |  |  |  |  |
|                                |           | 190 Prospect Avenue<br>Elmhurst,IL 601263296  |  | H(b) Are all a   | affiliates inclu         | ded?                | ┌ Yes ┌ No             |  |  |  |  |
|                                |           | ·   |  |                  |                          |                     | instructions)          |  |  |  |  |
| <b>I</b> Ta                    | x-exen    | npt status  | 4947(a)(1) or 527                        | H(c) Group       | exemption                | n number            | •                      |  |  |  |  |
| J W                            | ebsite    | e: ► www elmhurst edu   |  |                  |                          |                     |                        |  |  |  |  |
| V For                          | m of or   | ganization 🔽 Corporation 🗀 Trust 🗀 Association 🗀 Other 🕨  |  | L Year of form   | nation 1043              | M State             | e of legal domicile IL |  |  |  |  |
|                                | rt I      | Summary   |  | L fear or for    | nation 1942              | M State             | or legal doffficile IL |  |  |  |  |
|                                |           | Briefly describe the organization's mission or most s   | uanificant activities                    |                  |                          |                     |                        |  |  |  |  |
|                                |           | Elmhurst College works with passion and commitme  | -  | len knowledge, a | and enrich               | culture th          | ırough                 |  |  |  |  |
| ደ                              | ] 1       | pedagogical innovation, scholarship and creative ex   | pression                                 |                  |                          |                     |                        |  |  |  |  |
| Governance                     | -         |   |  |                  |                          |                     |                        |  |  |  |  |
| Ē<br>ē                         |           |   |  |                  |                          |                     |                        |  |  |  |  |
| 5                              | 2         | Check this box 🔭 if the organization discontinued   | its operations or disposed               | of more than 25  | 5% of its no             | et assets           |                        |  |  |  |  |
|                                | 3         | Number of voting members of the governing body (P   | art VI, line 1a)                         | •                |                          | 3                   | 36                     |  |  |  |  |
| <u>&amp;</u>                   | 4         | Number of independent voting members of the gover   | ning body (Part VI, line 1t              | )                |                          | 4                   | 35                     |  |  |  |  |
| Activities &                   | 5         | Total number of individuals employed in calendar ye   | ar 2010 (Part V , line 2a)               |                  |                          | 5                   | 1,944                  |  |  |  |  |
| যু                             | 6         | Total number of volunteers (estimate if necessary)  |  |                  |                          | 6                   | 382                    |  |  |  |  |
|                                | 1         | Total unrelated business revenue from Part VIII, co   |  |                  | 7                        | 'a                  | 177,364                |  |  |  |  |
|                                | Ь         | Net unrelated business taxable income from Form 9   | 90-T, line 34                            |                  |                          | 'b                  |                        |  |  |  |  |
|                                |           |   |  | Prior            | Year                     | _                   | Current Year           |  |  |  |  |
| a)                             | 8         | Contributions and grants (Part VIII, line 1h)   |  | •                | 3,729,26<br>89,636,74    | _                   | 6,114,548              |  |  |  |  |
| Revenue                        | 9         | , , ,   | ram service revenue (Part VIII, line 2g) |                  |                          |                     | 95,780,680             |  |  |  |  |
| ₽ĕ                             | 10<br>11  | Investment income (Part VIII, column (A), lines   |  | •                | 1,976,68                 | _                   | 10,487,699             |  |  |  |  |
|                                | 12        | Other revenue (Part VIII, column (A), lines 5, 6d<br>Total revenue—add lines 8 through 11 (must equa                      |  | ne               | 956,54                   | <u> </u>            | 941,729                |  |  |  |  |
|                                | 12        | 12)   |  |                  | 96,299,22                | 9                   | 113,324,656            |  |  |  |  |
|                                | 13        | Grants and similar amounts paid (Part IX, column  | (A), lines 1-3)                          |                  | 32,864,01                | 1                   | 36,685,131             |  |  |  |  |
|                                | 14        | Benefits paid to or for members (Part IX, column (  |  | 0                | 0                        |                     |                        |  |  |  |  |
| ø                              | 15        | Salaries, other compensation, employee benefits   | (Part IX, column (A), lines              |                  | 40,344,83                | 6                   | 42,735,605             |  |  |  |  |
| 38e                            | 16a       | 10) Professional fundraising fees (Part IX, column (A)  | line 11e)                                |                  | +0,5++,05                | 0                   | 0                      |  |  |  |  |
| Expenses                       | ь         | Total fundraising expenses (Part IX, column (D), line 25) *2  |  |                  |                          | +                   |                        |  |  |  |  |
| Ð                              | 17        | Other expenses (Part IX, column (D), line 25)   |  |                  | 26,215,66                | 6                   | 27,763,355             |  |  |  |  |
|                                | 18        | Total expenses Add lines 13-17 (must equal Pa   |  |                  | 99,424,51                | _                   | 107,184,091            |  |  |  |  |
|                                | 19        | Revenue less expenses Subtract line 18 from line  |  |                  | -3,125,28                |                     | 6,140,565              |  |  |  |  |
| <u>አ ወ</u>                     |           |   |  | Beginning        | of Current               |                     |                        |  |  |  |  |
| 9 66<br>0 0 0 0                |           |   |  |                  | ear                      | '                   | End of Year            |  |  |  |  |
| 45.50<br>10.00<br>10.00        | 20        | Total assets (Part X, line 16)  |  | 71,968,13        | _                        | 185,814,231         |                        |  |  |  |  |
| Net Assets or<br>Fund Balances | 21        | Total liabilities (Part X, line 26)   |  |                  | 81,678,66                |                     | 81,015,398             |  |  |  |  |
|                                | 22        | Net assets or fund balances Subtract line 21 from   | n line 20                                |                  | 90,289,47                | 7                   | 104,798,833            |  |  |  |  |
|                                | rt II     | Signature Block   |  |                  |                          |                     | hast of my             |  |  |  |  |
| know                           |           | Ities of perjury, I declare that I have examined this retur<br>and belief, it is true, correct, and complete. Declaration |  |                  |                          |                     |                        |  |  |  |  |
| W                              | .wyc.     |   |  |                  |                          |                     |                        |  |  |  |  |
|                                |           | *****   |  | 201              | .2-04-30                 |                     |                        |  |  |  |  |
| Sigr                           | 1         | Signature of officer  | 2012 04 30                               |                  |                          |                     |                        |  |  |  |  |
| Her                            |           | KENNE P BRISTOL CHAIR, TRUSTEES   |  |                  |                          |                     |                        |  |  |  |  |
|                                |           | Type or print name and title  |  |                  |                          |                     |                        |  |  |  |  |
|                                |           | Print/Type preparer's name DAN ROMANO Preparer's signal   | ture DAN ROMANO                          |                  | heck if self-<br>mployed | PTIN                |                        |  |  |  |  |
| Paid                           |           | Firm's name F GRANT THORNTON LLP  |  |                  | /                        | Firm's              | Firm's EIN             |  |  |  |  |
| Prep                           |           | Firm's address 175 W JACKSON BLVD STE 2000  |  |                  |                          |                     |                        |  |  |  |  |
| Use (                          | Only      |   |  |                  |                          | Phone<br>0200       | e no 🕨 (312) 856-      |  |  |  |  |
| May                            | the IR    | CHICAGO, IL 60604  S discuss this return with the preparer shown above  | ? (see instructions)                     |                  |                          | ── <del>─</del> ▼ Y | es $\Gamma$ No         |  |  |  |  |

| Form       | 990 (2010)  |  |  |                               |                                | Page <b>2</b>   |
|------------|---|--|--|-------------------------------|--------------------------------|---|
| Par        |   | i <b>t of Program Serv</b><br>nedule O contains a res                        | -  |                               |                                |   |
| 1          | Briefly describe th                               | e organization's missio  | n  |                               |                                |   |
| MEA<br>COM | NINGFUL AND ETH<br>MITMENT, WE FOS                | ICAL WORK IN A MUL   | TICULTURAL, G<br>ADEN KNOWLED                | LOBAL SOCIETY WO              | RKING TOGETHER WI              | NALLY AND TO PREPARE FOR<br>TH PASSION AND<br>AGOGICAL INNOVATION,  |
| 2          | the prior Form 990                                | n undertake any signific<br>or 990-EZ?                                       |  |                               |                                | √ Yes √ No  |
|            |   | hese new services on S   |  |                               |                                |   |
| 3          | =   | n cease conducting, or   | _  | =                             | lucts, any program             | ┌ Yes ┌ No  |
|            | If "Yes," describe t                              | hese changes on Sched  | dule O                                       |                               |                                |   |
| 4          | Section 501(c)(3)                                 | pt purpose achievemen<br>and 501(c)(4) organiza<br>rs, the total expenses, a | tions and section                            | n 4947(a)(1) trusts are       | required to report the         |   |
| 4a         | (Code   | ) (Expenses \$   | 23,662,786                                   | including grants of \$        | 0 ) (Revenue                   | \$ 95,488,795 )   |
|            | education, the human<br>professional and gradi    |  | nces, business admin<br>ne Elmhurst Learning | istration, nursing, and from  | jazz studies to exercise scien | al and interdisciplinary majors in<br>ce We also offer a range of<br>young adults with learning,                    |
|            | (Code   | ) (Expenses \$   | 6,954,933                                    | ıncludıng grants of \$        | 0 ) (Revenue                   | \$ 0)   |
|            |   | advanced services for instruc  |  |                               |                                | oort The A C Buehler library provides<br>cess throughout Also included is our                                       |
| 4c         | (Code   | ) (Expenses \$   | 10,597,226                                   | ıncludıng grants of \$        | 0 ) (Revenue                   | \$ 291,885)   |
|            | at Elmhurst is active a<br>Union, Habitat for Hui | and creative allowing student  | s to get involved in eers and Allies), H A   | diverse areas including stude | ent government, 'The Leader    | ness center, and athletics Student life<br>' student newspaper, Black Student<br>WRSE Radio Station, and many other |
| 4d         | Other program se                                  | rvices (Describe in Sc   | hedule O )                                   |                               |                                |   |
|            | (Expenses \$                                      | ·  | cluding grants of                            | \$ 36,685,13                  | 31 ) (Revenue \$               | 0)  |
| 4e         | Total program ser                                 | vice expenses►\$   | 77,900,076                                   | i                             |                                |   |

|     |   |     | 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   |     | Νο  |
| 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? If "Yes," complete Schedule C, Part II  | 4   | Yes |     |
| 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   |     |     |
| 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   |     | Νο  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2   | 8   | Yes |     |
| 9   | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9   |     | No  |
| 10  | Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-<br>endowments? 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 |     |
| Ь   | 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 |     | No  |
|     | 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 | Yes |     |
| 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 |     | Νο  |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E   | 13  | Yes |     |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a |     | No  |
| Ь   | 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> "Yes," complete Schedule F, Parts I and IV              | 14b |     | No  |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, 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  |     | N o |
| 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  |     | N o |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H   | 20a |     | Νο  |
| Ь   | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> 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  |                 | Νο     |
| 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 |                 | Νo     |
| c   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c |                 | Νο     |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d |                 | Νo     |
| 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  |                 | Νο     |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III        | 27  | Yes             |        |
| 28  | Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)   |     |                 |        |
| 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 |                 | No     |
| 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  |                 | No     |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I   | 33  |                 | No     |
| 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  |                 | No     |
| 35  | Is any related organization a controlled entity within the meaning of section 512(b)(13)?   | 35  |                 | No     |
| 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             |        |
|     |   | F   | orm <b>99</b> 0 | (2010) |

| Form 990 ( | 2010)   |
|------------|---|
| Part V     | Statements Regarding Other IRS Filings and Tax Compliance |

| u. | Check if Schedule O contains a response to any question in this Part V   |     |     |      |
|----|--|-----|-----|------|
|    | <u> </u>   |     | Yes | No   |
|    | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  |     |     |      |
|    | <b>1a</b> 4,693  |     |     |      |
| )  | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0  |     |     |      |
|    | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable  |     |     |      |
|    | gaming (gambling) winnings to prize winners?   | 1c  | Yes |      |
|    | 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   |     |     |      |
|    | return   |     |     |      |
| ,  | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   | 2b  | Yes |      |
|    | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  |     | 103 |      |
|    | Did the organization have unrelated business gross income of \$1,000 or more during the  |     |     |      |
|    | year <sup>,</sup>  | 3a  | Yes |      |
|    | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   | 3b  | Yes |      |
|    | 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  |     | Νo   |
|    | If "Yes," enter the name of the foreign country 🕒  |     |     |      |
|    | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  |     |     |      |
|    | Was the organization a party to a prohibited tay shelter transaction at any time during the tay year?  | 5a  |     | N c  |
|    | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                    |     |     | N C  |
|    |  | 5b  |     | 14 ( |
|    | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c  |     |      |
|    | 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   |
|    | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | 6b  |     |      |
|    | Organizations that may receive deductible contributions under section 170(c).  |     |     |      |
|    | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | 7a  | Yes |      |
|    | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b  | Yes |      |
|    | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to   | 7c  |     | No   |
|    | If "Yes," indicate the number of Forms 8282 filed during the year  |     |     |      |
|    | <u> </u>   |     |     |      |
|    | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e  |     | No   |
|    | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7f  |     | N c  |
|    | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as   |     |     |      |
|    | required?  | 7g  |     |      |
|    | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a  | 7h  |     |      |
|    | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did   |     |     |      |
|    | the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?   | 8   |     |      |
|    | Sponsoring organizations maintaining donor advised funds.  |     |     |      |
|    | Did the organization make any taxable distributions under section 4966?  | 9a  |     |      |
|    | Did the organization make a distribution to a donor, donor advisor, or related person?   | 9b  |     |      |
|    | 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   |     |     |      |
|    | facilities   |     |     |      |
|    | Section 501(c)(12) organizations. Enter  |     |     |      |
|    | Gross income from members or shareholders  |     |     |      |
|    | Gross income from other sources (Do not net amounts due or paid to other sources 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 |     |      |
|    | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |     |     |      |
|    | Section 501(c)(29) qualified nonprofit health insurance issuers.   |     |     |      |
|    | Is the organization licensed to issue qualified health plans in more than one state?   | 42- |     |      |
|    | <b>Note.</b> See the instructions for additional information the organization must report on Schedule O  | 13a |     |      |
| į  | 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  |     |     |      |
|    | Enter the amount of reserves on hand 13c   |     |     |      |
|    | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a |     | Νo   |
|    | If "Voc " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schodule O  |     |     |      |

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

| Se  | ection A. Governing Body and Management  |     |     |    |
|-----|--|-----|-----|----|
|     |  |     | Yes | No |
|     |  |     |     |    |
| 1a  | Enter the number of voting members of the governing body 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   |     | No |
| 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   |     | Νο |
| 6   | Does the organization have members or stockholders?  | 6   |     | Νo |
| 7a  | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  | 7a  |     | No |
| b   | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  | 7b  |     | Νo |
| 8   | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following   |     |     |    |
| а   | The governing body?  | 8a  | Yes |    |
| b   | Each committee with authority to act on behalf of the governing body?  | 8b  | Yes |    |
| 9   | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O   | 9   |     | Νο |
|     | ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)  |     |     |    |
|     |  |     | Yes | No |
|     | Does the organization have local chapters, branches, or affiliates?  | 10a |     | Νo |
| 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 |     |    |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?   | 11a | Yes |    |
| b   | 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 |    |
| b   | 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 )  |     |     |    |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16a |     | Νο |
| b   | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b |     |    |
| Se  | ection C. Disclosure   | 100 |     |    |
| 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 V Upon request   |     |     |    |

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 DENISE P JONES 190 PROSPECT AVENUE

Elmhurst, IL 601263296 (630) 617-3012

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

Check if Schedule O contains a response to any question in this Part VII . . . . . . . . . . . . . . . . .

#### 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)<br>Name and Title               | (B)<br>A verage<br>hours  | (C) Position (check all that apply)                  |          |         |              |  |      | ( <b>D)</b><br>Reportable<br>compensation    | <b>(E)</b><br>Reportable<br>compensation              | <b>(F)</b><br>Estimated<br>amount of other                               |
|                                     | per week (describe hours for related organizations in Schedule O) | Institutional Trustee Individual trustee or director |          | Officei | Key employee | Former Highest compensated employee Key employee |      | from the<br>organization (W-<br>2/1099-MISC) | from related<br>organizations<br>(W- 2/1099-<br>MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |
| See Additional Data Table           |   |  |          |         |              |  |      |  |   |  |
| -                                   |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  | <u> </u> |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |
|                                     |   |  |          |         |              |  |      |  |   |  |

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

|       | ( <b>A)</b><br>Name and Title  | (B)<br>A verage<br>hours  | erage Position (check all Reportable Re | erage Position (check all Reportable Repo |          | <b>(E)</b><br>Reportable<br>compensatio | n                            | (F)<br>Estima<br>amount o | ated   |   |   |   |                      |
|-------|--|---|---|---|----------|---|------------------------------|---------------------------|--|---|---|---|----------------------|
|       |  | per week (describe hours for related organizations in Schedule O) | Individual trustee<br>or director       | Institutional Trustee                     | ı        | Key employee                            | Highest compensated employee | Former                    | from the<br>organization (W-<br>2/1099-MISC) | from related<br>organization<br>(W- 2/1099<br>MISC) | s | compens<br>from t<br>organizati<br>relati<br>organiza | the<br>ion and<br>ed |
| See A | Additional Data Table  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   |   |                      |
| 1b    | Sub-Total  | <u> </u>  | <u> </u>                                | <u> </u>                                  | <u> </u> | <u> </u>                                | <u> </u>                     | <u> </u>                  |  |   |   |   |                      |
| c     | Total from continuation shee   |   |   |   |          |   | <b> -</b>                    |                           |  |   |   |   |                      |
| d     | Total (add lines 1b and 1c) .  |   |   |   |          |   |                              | ►                         | 1,359,168                                    |   | 0 | ;   | 318,267              |
| 2     | Total number of individuals (in<br>\$100,000 in reportable comp                    | _   |   |   |          | ted                                     | above                        | ) who                     | received more tha                            | n   | • |   |                      |
|       |  |   |   |   |          |   |                              |                           |  |   |   | Yes   | No                   |
| 3     | Did the organization list any <b>f</b> ood on line 1a? <i>If</i> "Yes," complete 5 |   |   |   |          |   |                              |                           | or highest compens                           | ated employee                                       | 3 |   | No                   |
| 4     | For any individual listed on lin   | e 1a, is the sum o  | f report                                | able                                      | com      | oens                                    | ation                        | and                       | other compensation                           | from the  |   |   |                      |

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

#### **Section B. Independent Contractors**

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

| (A)   | (B)                     | (C)          |
|---|-------------------------|--------------|
| Name and business address   | Description of services | Compensation |
| ChartwellsCompass Group<br>PO Box 91337<br>CHICAGO, IL 60693                                | Food Service Mgmt       | 3,516,949    |
| Pitney Bowes Management<br>47 Park Place<br>APPLETON, WI 54915                              | Service Management      | 622,718      |
| Datatel<br>4375 Fair Lakes Court<br>FAIRFAX, VA 22033                                       | Software Management     | 322,176      |
| Sandbox Studio<br>3435 North Sheffield Avenue<br>CHICAGO, IL 60657                          | Marketing Consultant    | 297,444      |
| Wight Company<br>2500 N Frontage Road<br>DARIEN, IL 60561                                   | Architectural Servic    | 255,220      |
| 2 Total number of independent contractors (including but not limited to those listed above) | who received more than  |              |

| Form 9   | •   | *   | ue .                             |               |                      |   | Pa                                      | ge <b>9</b>   |
|--|-----|---|----------------------------------|---------------|----------------------|---|---|---|
|  |     |   |                                  |               | (A)<br>Total revenue | (B)<br>Related<br>or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| nts<br>nts   | 1a  | Federated campaigns   | 1a                               |               |                      |   |   |   |
| Contributions, gifts, grants and other similar amounts | ь   | Membership dues   | . 1b                             |               |                      |   |   |   |
| s, ç<br>am   | С   | Fundraising events  | 1c                               | 44,074        |                      |   |   |   |
| gift<br>ar   | d   | Related organizations   | . 1d                             |               |                      |   |   |   |
| im.  |     | Government grants (contributions)   |                                  | 1,334,414     |                      |   |   |   |
| tíor<br>er s   |     | All other contributions, gifts, grants  |                                  | 4,736,060     |                      |   | <br>                                    | <br>  |
| iðu<br>Fr  | _   | sımılar amounts not ıncluded above  | e                                |               |                      |   |   |   |
| dit  | g   | Noncash contributions included in li  | nes 1a-1f \$                     | 312,955       |                      |   |   |   |
| လူမှ   | h   | Total. Add lines 1a-1f  |                                  |               | 6,114,548            |   |   |   |
| le   |     |   |                                  | Business Code |                      |   |   |   |
| Program Serwice Revenue                                | 2a  | STUDENT TUITION AND FEES  |                                  | 812900        | 90 125 092           | 00 135 003  |   |   |
| æ  | ь   | RESIDENCE HALLS   |                                  | 721000        |                      | 89,125,082<br>6,220,520                               | 14,068                                  |   |
| 160  | c   | COMMUNITY EDUCATION   |                                  | 812900        | 40,149               |   | 11,000                                  |   |
| Xer.   | d   | OTHER ATHLETIC, ARTS & CULTUR   | Е                                | 812900        | 307,032              | 307,032   |   |   |
| <u>:</u>   | e   | GRANT AND LOAN ADMINISTRATIO  | N FEES                           | 812900        | 73,829               | 73,829  |   |   |
| ×gr8   | f   | All other program service re  | venue                            |               |                      |   |   |   |
| Ě  | g   | Total. Add lines 2a-2f  |                                  |               | 95,780,680           |   |   |   |
|  | 3   | Investment income (includir   | ıg dıvıdends, ınterest           |               |                      |   |   |   |
|  |     | and other similar amounts)  |                                  |               | 1,525,523            |   |   | 1,525,523   |
|  | -   | Income from investment of tax-ex  | • •                              |               | 0                    |   |   |   |
|  | 5   | Royalties   |                                  |               | 3,385                |   |   | 3,385   |
|  |     | _   | (ı) Real                         | (II) Personal |                      |   |   |   |
|  |     | Gross Rents<br>Less rental  |                                  |               |                      |   |   |   |
|  | _   | expenses  |                                  |               |                      |   |   |   |
|  | c   | Rental income<br>or (loss)  |                                  |               |                      |   |   |   |
|  | d   | Net rental income or (loss)   |                                  | •             |                      |   |   |   |
|  |     |   | (ı) Securities                   | (II) O ther   |                      |   |   |   |
|  | 7a  | Gross amount<br>from sales of<br>assets other<br>than inventory                   | 46,530,309                       |               |                      |   |   |   |
|  | ь   | Less cost or  | 37,568,133                       |               |                      |   |   |   |
|  |     | other basis and sales expenses  |                                  |               |                      |   |   |   |
|  |     | Gain or (loss)  | 8,962,176                        |               | 0.062.476            |   | 26.452                                  | 0.026.022   |
|  |     | Net gain or (loss)  |                                  |               | 8,962,176            |   | 36,153                                  | 8,926,023   |
| Other Revenue  | oa  | Gross income from fundraisi (not including \$ 44,074 of contributions reported on | line 1c)                         |               |                      |   |   |   |
| ι.<br>C  |     | See Part IV, line 18  | a                                | 47,517        |                      |   |   |   |
| ihe.   | ь   | Less direct expenses .  |                                  | 31,992        |                      |   |   |   |
| 5  |     | Net income or (loss) from fu  |                                  | 31,532        | 15,525               |   |   | 15,525  |
|  |     |   | ctivities See Part IV, line 19 . | a             |                      |   |   |   |
|  | b   | Less direct expenses .  |                                  | b             |                      |   |   |   |
|  | С   | Net income or (loss) from ga  | ming activities                  |               | 0                    |   |   |   |
|  | 10a | Gross sales of inventory, les<br>returns and allowances                           | s                                |               |                      |   |   |   |
|  |     | returns and anowances   | а                                |               |                      |   |   |   |
|  | b   | Less cost of goods sold .   | . b                              |               |                      |   |   |   |
|  |     | Net income or (loss) from sa  |                                  |               | 0                    |   |   |   |
|  |     | Miscellaneous Revenue   |                                  | Business Code |                      |   |   |   |
|  | 11a | OUTSIDE PRINTING  |                                  | 561000        | 2,453                |   | 2,453                                   |   |
|  | b   | FOOD SERVICE  |                                  | 722320        | 254,711              |   | 41,518                                  | 213,193   |
|  | c   | OUTSIDE CONFERENCE A  | N D                              | 900099        | 153,401              |   | 67,884                                  | 85,517  |
|  |     | FACILITIES RENTALS  |                                  |               | 512,254              |   | 15,288                                  | 496,966   |
|  |     | All other revenue   |                                  |               | 512,254              |   | 13,288                                  | 770,700   |
|  | e   | • <b>Total.</b> Add lines 11a–11d   |                                  |               | 922,819              |   |   |   |
|  | 12  | Total revenue. See Instructi  | ons                              |               | 113,324,656          | 95,766,612  | 177,364                                 | 11,266,132  |
|  |     |   |                                  |               |                      |   | rm <b>990</b> (20                       |   |

|  | 990 (2010)   |                    |                              |                                     | Page <b>10</b>                    |  |  |  |
|--|--|--------------------|------------------------------|-------------------------------------|-----------------------------------|--|--|--|
| Part   | t IX Statement of Functional Expenses  |                    |                              |                                     |                                   |  |  |  |
| Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). |  |                    |                              |                                     |                                   |  |  |  |
| Do no  | ot include amounts reported on lines 6b,<br>b, 9b, and 10b of Part VIII.   | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | ( <b>D</b> ) Fundraising expenses |  |  |  |
| 1  | Grants and other assistance to governments and organizations in the U S See Part IV, line 21   | 0                  |                              | успени ехрепосо                     | САРСПЭСЭ                          |  |  |  |
| 2  | Grants and other assistance to individuals in the U.S. See Part IV, line 22  | 36,685,131         | 36,685,131                   |                                     |                                   |  |  |  |
| 3  | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16   | 0                  |                              |                                     |                                   |  |  |  |
| 4  | Benefits paid to or for members  |                    |                              |                                     |                                   |  |  |  |
| 5  | Compensation of current officers, directors, trustees, and key employees   | 977,546            | 537,457                      | 224,846                             | 215,243                           |  |  |  |
| 6  | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  |                    | 1,077                        |                                     |                                   |  |  |  |
| 7  | Other salaries and wages   | 31,422,926         | 22,862,695                   | 7,460,627                           | 1,099,604                         |  |  |  |
| 8  | Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  | 1,715,543          | 1,254,592                    | 397,960                             | 62,991                            |  |  |  |
| 9  | Other employee benefits  | 6,393,977          | 4,662,756                    | 1,487,673                           | 243,548                           |  |  |  |
| 10   | Payroll taxes  | 2,224,536          | 1,607,026                    | 539,026                             | 78,484                            |  |  |  |
| а  | Fees for services (non-employees) Management   | 689,297            | 69,492                       | 603,168                             | 16,637                            |  |  |  |
| ь  | Legal  | 170,124            |                              | 170,124                             |                                   |  |  |  |
| с  | Accounting   | 120,263            |                              | 120,263                             |                                   |  |  |  |
| d  | Lobbying   | 18,259             |                              | 18,259                              |                                   |  |  |  |
| e  | Professional fundraising services See Part IV, line 17   | 0                  |                              |                                     |                                   |  |  |  |
| f  | Investment management fees   | 147,062            |                              | 147,062                             |                                   |  |  |  |
| g  | Other  | 4,584,137          | 1,276,958                    | 3,253,053                           | 54,126                            |  |  |  |
| 12   | Advertising and promotion  | 687,304            | 117,195                      | 569,439                             | 670                               |  |  |  |
| 13   | Office expenses  | 2,907,867          | 1,688,884                    | 901,413                             | 317,570                           |  |  |  |
| 14   | Information technology   | 1,019,749          | 350,590                      | 626,114                             | 43,045                            |  |  |  |
| 15   | Royalties  | 4,279              | 4,279                        |                                     |                                   |  |  |  |
| 16   | Occupancy  | 4,055,145          | 755,016                      | 3,293,837                           | 6,292                             |  |  |  |
| 17   | Travel   | 2,461,830          | 1,836,105                    | 509,598                             | 116,127                           |  |  |  |
| 18   | Payments of travel or entertainment expenses for any federal, state, or local public officials   | 0                  |                              |                                     |                                   |  |  |  |
| 19   | Conferences, conventions, and meetings   | 0                  |                              |                                     |                                   |  |  |  |
| 20   | Interest   | 2,250,055          | 701,783                      | 1,548,272                           |                                   |  |  |  |
| 21   | Payments to affiliates   | 0                  |                              |                                     |                                   |  |  |  |
| 22   | Depreciation, depletion, and amortization  | 4,070,559          | 2,578,292                    | 1,402,308                           | 89,959                            |  |  |  |
| 23   | Insurance  | 441,484            | 54,493                       | 386,991                             |                                   |  |  |  |
| 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  | DEBT SERVICE FEES  | 780,065            |                              | 780,065                             |                                   |  |  |  |
| Ь  | EQUIPMENT RENTAL/MAINTENANCE   | 686,431            | 163,374                      | 522,094                             | 963                               |  |  |  |
| С  | LIBRARY BOOKS & PERIODICALS  | 434,215            | 415,174                      | 19,041                              |                                   |  |  |  |
| d  | COMMISSIONS & BANK CHARGES   | 382,443            | 268                          | 382,175                             |                                   |  |  |  |
| e  | NON-CAPITAL EQUIPMENT  | 296,945            | 128,867                      | 166,189                             | 1,889                             |  |  |  |
| f  | All other expenses   | 1,555,842          | 148,572                      | 1,366,978                           | 40,292                            |  |  |  |
| 25   | Total functional expenses. Add lines 1 through 24f   | 107,184,091        | 77,900,076                   | 26,896,575                          | 2,387,440                         |  |  |  |
| 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 | ·                  |                              |                                     |                                   |  |  |  |
|  |  |                    |                              |                                     |                                   |  |  |  |

| Pa            | rt X | Balance Sheet   |             |             |                          |            |                           |  |
|---------------|------|---|-------------|-------------|--------------------------|------------|---------------------------|--|
|               |      |   |             |             | (A)<br>Beginning of year |            | <b>(B)</b><br>End of year |  |
|               | 1    | Cash—non-interest-bearing   |             |             | 1,173,319                | 1          | 4,449,937                 |  |
|               | 2    | Savings and temporary cash investments  |             |             | 7,969,635                | 2          | 12,461,837                |  |
|               | 3    | Pledges and grants receivable, net  |             |             | 701,255                  | 3          | 1,652,936                 |  |
|               | 4    | Accounts receivable, net  |             |             | 763,002                  | 4          | 815,488                   |  |
|               | 5    | Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of  |             |             |                          |            |                           |  |
|               |      | Schedule L  |             |             | 5                        |            |                           |  |
|               | 6    | Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ , and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions) |             |             |                          |            |                           |  |
| ÷             |      | Schedule L  |             |             |                          | 6          |                           |  |
| Assets        | 7    | Notes and loans receivable, net   |             |             | 1,989,646                | 7          | 1,921,305                 |  |
| ₹             | 8    | Inventories for sale or use   |             |             | 104,376                  | 8          | 109,650                   |  |
|               | 9    | Prepaid expenses and deferred charges   |             |             | 2,249,283                | 9          | 2,000,379                 |  |
|               | 10a  | Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>  | 10a         | 134,565,868 |                          |            |                           |  |
|               | ь    | Less accumulated depreciation   | 10b         | 62,325,046  | 73,795,232               | 10c        | 72,240,822                |  |
|               | 11   | Investments—publicly traded securities  |             | 11          |                          |            |                           |  |
|               | 12   | Investments—other securities See Part IV, line 11   | 78,268,077  | 12          | 85,484,464               |            |                           |  |
|               | 13   | Investments—program-related See Part IV, line 11  |             | 13          |                          |            |                           |  |
|               | 14   | Intangible assets   |             |             |                          | 14         |                           |  |
|               | 15   | Other assets See Part IV, line 11   |             | 4,954,314   | 15                       | 4,677,413  |                           |  |
|               | 16   | Total assets. Add lines 1 through 15 (must equal line 34) .   |             |             | 171,968,139              | 16         | 185,814,231               |  |
|               | 17   | Accounts payable and accrued expenses .   |             |             | 5,841,350                | 17         | 6,690,363                 |  |
|               | 18   | Grants payable  |             |             |                          | 18         |                           |  |
|               | 19   | Deferred revenue  |             |             | 948,481                  | 19         | 958,028                   |  |
|               | 20   | Tax-exempt bond liabilities   |             | 57,000,000  | 20                       | 56,900,000 |                           |  |
| es            | 21   | Escrow or custodial account liability Complete Part IV of Schedu  |             |             |                          | 21         | _                         |  |
| bilities      | 22   | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified  |             |             |                          |            |                           |  |
| E.i.          |      | persons Complete Part II of Schedule L  |             |             |                          | 22         |                           |  |
|               | 23   | Secured mortgages and notes payable to unrelated third parties  |             | •           | 5,000,000                | 23         | 5,000,000                 |  |
|               | 24   | Unsecured notes and loans payable to unrelated third parties  |             |             |                          | 24         |                           |  |
|               | 25   | Other liabilities Complete Part X of Schedule D   |             |             | 12,888,831               | 25         | 11,467,007                |  |
|               | 26   | Total liabilities. Add lines 17 through 25  |             |             | 81,678,662               | 26         | 81,015,398                |  |
|               |      | Organizations that follow SFAS 117, check here ▶ 🔽 and com  | olet e l    | ines 27     |                          |            |                           |  |
| ġ             |      | through 29, and lines 33 and 34.  |             |             |                          |            |                           |  |
| <u>a</u>      | 27   | Unrestricted net assets   |             |             | 53,979,352               | 27         | 61,305,554                |  |
| Fund Balances | 28   | Temporarily restricted net assets   |             |             | 15,141,802               | 28         | 20,211,310                |  |
| Ξ             | 29   | Permanently restricted net assets   |             | 21,168,323  | 29                       | 23,281,969 |                           |  |
| Ξ             |      | Organizations that do not follow SFAS 117, check here 🕨 🦵 as  | nd con      | ıplet e     |                          |            |                           |  |
| 5             |      | lines 30 through 34.  |             |             |                          |            |                           |  |
|               | 30   | Capital stock or trust principal, or current funds  | •           |             |                          | 30         |                           |  |
| Assets        | 31   | Paid-in or capital surplus, or land, building or equipment fund   |             |             |                          | 31         |                           |  |
|               | 32   | Retained earnings, endowment, accumulated income, or other for  | ınds        |             |                          | 32         |                           |  |
| Net           | 33   | Total net assets or fund balances   |             |             | 90,289,477               | 33         | 104,798,833               |  |
| _             | 34   | Total liabilities and net assets/fund balances  | 171,968,139 | 34          | 185,814,231              |            |                           |  |

| 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        |    | 113,3 | 324,656 |
| 2   | Total expenses (must equal Part IX, column (A), line 25)  | 2        |    | 107,1 | 184,091 |
| 3   | Revenue less expenses Subtract line 2 from line 1   | 3        |    | 6,1   | 140,565 |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4        |    | 90,2  | 289,477 |
| 5   | Other changes in net assets or fund balances (explain in Schedule O)  | 5        |    | 8,3   | 368,791 |
| 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        |    | 104,7 | 798,833 |
| Pai | rt XII Financial Statements and Reporting   |          |    |       |         |
|     | Check if Schedule O contains a response to any question in this Part XII  |          |    | ୮     |         |
|     |   |          |    | Yes   | No      |
| 1   | Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O   |          |    |       |         |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?   |          | 2a |       | No      |
| ь   | 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 t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O |          | 2c | Yes   |         |
| d   | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis  | ssued    |    |       |         |
| 3a  | ,   | <b>.</b> | 3a | Yes   |         |
| b   | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits   | equired  | 3b | Yes   |         |

## OMB No 1545-0047

Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Elmhurst College

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

**Public Charity Status and Public Support** 

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

**Employer identification number** 

36-2169145

| Part I                                | Reason for Pu  | blic Charity Stat  | tus (All org  | ganızatıon   | s must com                              | plete this                     | part.) See ır                       | nstruction  | าร         |                             |
|---------------------------------------|--|--|---|--|---|--------------------------------|-------------------------------------|-------------|------------|-----------------------------|
| he organiza                           | ation is not a privat  | te foundation becaus   | eıtıs (Forl   | lınes 1 thro   | ugh 11, chec                            | k only one l                   | oox)                                |             |            |                             |
| 1 / ·                                 | A church, conventi   | on of churches, or as  | sociation of  | fchurches  | described in <b>s</b>                   | ection 170                     | (b)(1)(A)(i).                       |             |            |                             |
| 2 🔽                                   | A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E)   |  |   |  |   |                                |                                     |             |            |                             |
| з Г                                   | A hospital or a coo  | perative hospital ser  | vice organiz  | zatıon desc  | rıbed ın <b>secti</b>                   | on 170(b)(1                    | .)(A)(iii).                         |             |            |                             |
|                                       | A medical research<br>hospital's name, ci  | h organization operat<br>ity, and state                              | ed ın conjun  | oction with a  | a hospital des                          | cribed in <b>s</b> e           | ection 170(b)(                      | 1)(A)(iii)  | .Enter the |                             |
| 5   7                                 | An organization op   | erated for the benefit   | of a college  | e or univers   | ity owned or o                          | perated by                     | a government                        | al unit de  | scribed in |                             |
| ;                                     | section 170(b)(1)(A)(iv). (Complete Part II)   |  |   |  |   |                                |                                     |             |            |                             |
| 6                                     | A federal, state, or   | local government or  | government  | tal unıt des   | cribed in <b>sect</b>                   | ion 170(b)(                    | 1)(A)(v).                           |             |            |                             |
|                                       | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II )   |  |   |  |   |                                |                                     |             |            |                             |
| _                                     |  |  | -   | <b>A</b> \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) |   | т \                            |                                     |             |            |                             |
|                                       | •  | described in <b>section</b>  |   |  | ·                                       | •                              |                                     |             |            |                             |
|                                       | _  | at normally receives   |   |  |   |                                |                                     |             | -          | 055                         |
|                                       |  | rities related to its ex<br>oss investment incor                     |   |  |   |                                |                                     |             |            |                             |
|                                       | • • • • •  |  |   |  |   | •                              |                                     | tax) IIOIII | Dusillesse | 5                           |
| _                                     |  | ganization after June  |   |  |   |                                |                                     |             |            |                             |
|                                       |  | ganızed and operated   |   |  |   |                                |                                     |             |            | 6                           |
| 1                                     | 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 <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h  a |  |   |  |   |                                |                                     |             |            |                             |
| f :                                   | section 509(a)(2)<br>If the organization<br>check this box   | on managers and oth<br>received a written de<br>2006, has the organi | etermination  | from the II  | RS that it is a                         | Type I, Ty                     | pe II or Type l                     |             | ,          | , ,                         |
|                                       | ·  | rectly or indirectly co  | ·   |  | _                                       | persons de                     | scribed in (ii)                     | _           | Ye         | S No                        |
| ;                                     | and (III) below, the   | governing body of th   | e the suppor  | rted organiz   | zation?                                 |                                |                                     | 1           | 1g(i)      |                             |
| 1                                     | (ii) a famıly membe  | er of a person describ   | oed in (i) abo  | ove?   |   |                                |                                     | 11          | lg(ii)     |                             |
|                                       | (iii) a 35% control  | lled entity of a persor  | n described i   | ın (ı) or (ıı)   | above?                                  |                                |                                     | 11          | .g(iii)    |                             |
| <b>h</b>                              | Provide the following  | ng information about   | the supporte  | ed organıza  | tion(s)                                 |                                |                                     |             |            |                             |
| (i)<br>Name o<br>support<br>organizat | ne of <b>(ii)</b> (described on orted EIN lines 1-9 above  |  | (iv)  Is the organization in col (i) listed in your governing document? |  | (v) Did you no organiza col (i) o suppo | otify the<br>tion in<br>f your | n in organizati<br>our col (i) orga |             | Am         | (vii)<br>lount of<br>upport |
| instructions)) Yes No Yes No Yes No   |  |  |   |  |   |                                |                                     |             |            |                             |
|                                       |  |  |   |  |   |                                |                                     |             |            |                             |
|                                       |  |  |   |  |   |                                |                                     |             |            |                             |
|                                       |  |  |   |  |   |                                |                                     |             |            |                             |
|                                       |  |  |   |  |   | 1                              |                                     | 1           | 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 the 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>(b)</b> 2007    | (c) 2008            | ( <b>d)</b> 2009     | <b>(e)</b> 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>(b)</b> 2007    | <b>(c)</b> 2008     | ( <b>d)</b> 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 <b>stop here</b>                               | _                   | r                  |                     | •                    | . , . , -         | <b>▶</b> ┌॔    |
|          |   |                     |                    |                     |                      |                   |                |
| 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                |                |
|          |   |                     |                    |                     |                      |                   | <del> </del>   |
| 16a      | <b>33 1/3% support test—2010.</b> If the                          |                     |                    |                     | line 14 is 33 1/3%   | or more, chec     |                |
|          | and <b>stop here.</b> The organization qua                        | •                   |                    |                     |                      | 2.2.4.204         | <b>▶</b> [     |
| b        | 33 1/3% support test—2009. If the                                 |                     |                    |                     | oa, and line 15 is : | 1/3% or mor کد    | . <del>-</del> |
| 17-      | box and <b>stop here.</b> The organization                        |                     |                    |                     | 12 16 1C             | handler - 4.4     | ▶              |
| r/a      | 10%-facts-and-circumstances test-                                 |                     |                    |                     |                      |                   | ın.            |
|          | is 10% or more, and if the organization made                      |                     |                    | •                   |                      |                   |                |
|          | in Part IV how the organization mee                               | is the facts and    | circumstances"     | test ine organiz    | acion quanifies as   | a publicly supp   | orted<br>F     |
| <b>L</b> | 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 | ETY<br>▶ ¯     |
| 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 |                   | <b>▶</b> □     |

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                                |    |  |
|    |  |    |  |
| S  | ection D. Computation of Investment Income Percentage  |    |  |
| 17 | Investment income percentage for <b>2010</b> (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        | <b>Supplemental Information.</b> 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

DLN: 93493122008212

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Political Campaign and Lobbying Activities** For Organizations Exempt From Income Tax Under section 501(c) and section 527

> ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

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

| • Se | ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Fart III ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete | Part II-E | 3 Doi       | not co  | mplete Pari  |      |
|------|--|-----------|-------------|---------|--------------|------|
|      | e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Par<br>ction 501(c)(4), (5), or (6) organizations Complete Part III  | rt V, lir | ie 35a      | a (Pro  | oxy Tax), tl | hen  |
|      | me of the organization hurst College   | mploye    | eridei      | ntıfıca | ition numb   | er   |
| LIII |  | 6-216     | 9145        |         |              |      |
| Par  | t I-A Complete if the organization is exempt under section 501(c) or is a se   | ection    | 1 527       | 7 org   | janizatio    | n.   |
| 1    | Provide a description of the organization's direct and indirect political campaign activities in Part  | IV        |             |         |              |      |
| 2    | Political expenditures   | ı         | -           | \$      |              |      |
| 3    | Volunteer hours  |           |             |         |              |      |
| Par  | t I-B Complete if the organization is exempt under section 501(c)(3).  |           |             |         |              |      |
| 1    | Enter the amount of any excise tax incurred by the organization under section 4955   |           | •           | \$      |              |      |
| 2    | Enter the amount of any excise tax incurred by organization managers under section 4955  |           | •           | \$      |              |      |
| 3    | If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  |           |             |         | ☐ Yes        | ┌ No |
| 4a   | Was a correction made?   |           |             |         | ☐ Yes        | ☐ No |
| b    | If "Yes," describe in Part IV  |           |             |         |              |      |
| Par  | t I-C Complete if the organization is exempt under section 501(c) except s   | ectio     | n 50        | 1(c)    | (3).         |      |
| 1    | Enter the amount directly expended by the filing organization for section 527 exempt function act  | ıvıtıes   | •           | \$      |              |      |
| 2    | Enter the amount of the filing organization's funds contributed to other organizations for section 5 exempt funtion activities   | 27        | <b>•</b>    | \$      |              |      |
| 3    | Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1   | 7 b       | <b> -</b> - | \$      |              |      |
| 4    | Did the filing organization file Form 1120-POL for this year?  |           |             |         | ☐ Yes        | ┌ No |
| 5    | Enter the names, addresses and employer identification number (EIN) of all section 527 political   | organiz   | zation      | s to w  | hich the fil | ling |

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

| Sc         | hedule C (Form 990 or 990-EZ) 2010  |   |                      |                        |              |   | Page <b>2</b>                            |
|------------|---|---|----------------------|------------------------|--------------|---|--|
| P          | art II-A Complete if the organization under section 501(h)).                                  | is ex                                       | cempt under          | section 501(c          | )(3) and fi  | led Form 5768                                 |  |
| A<br>B     | Check   If the filing organization belongs to a Check   If the filing organization checked bo |   |                      | " provisions apply     | /            |   |  |
|            | Limits on Lobbying E<br>(The term "expenditures" means a                                      |   |                      | )                      |              | <b>(a)</b> Filing<br>Organization's<br>Totals | <b>(b)</b> Affiliated<br>Group<br>Totals |
| <u>1</u> a | Total lobbying expenditures to influence public o   | pinion                                      | (grass roots lob     | oyıng)                 |              |   |  |
| b          | Total lobbying expenditures to influence a legisl   | atıve b                                     | ody (direct lobby    | ıng)                   |              |   |  |
| c          | Total lobbying expenditures (add lines 1a and 1   | b)  |                      |                        |              |   |  |
| d          | Other exempt purpose expenditures   |   |                      |                        |              |   |  |
| е          | Total exempt purpose expenditures (add lines 1  | c and :                                     | Ld)                  |                        |              |   |  |
| f          | Lobbying nontaxable amount Enter the amount columns   | from th                                     | e following table    | ın both                |              |   |  |
|            | If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:            |   |                      |                        |              |   |  |
|            | Not over \$500,000  | over \$500,000 20% of the amount on line 1e |                      |                        |              |   |  |
|            | Over \$500,000 but not over \$1,000,000   | \$100                                       | ,000 plus 15% of the | excess over \$500,00   | 0            |   |  |
|            | Over \$1,000,000 but not over \$1,500,000   | \$175                                       | ,000 plus 10% of the | excess over \$1,000,0  | 000          |   |  |
|            | Over \$1,500,000 but not over \$17,000,000  | \$225                                       | ,000 plus 5% of the  | excess over \$1,500,00 | 00           |   |  |
|            | Over \$17,000,000   | \$1,00                                      | 00,000               |                        |              |   |  |
|            | Grassroots nontaxable amount (enter 25% of lir  | ne 1 f)                                     |                      |                        |              |   |  |
| _          | Subtract line 1g from line 1a If zero or less, ent  | -   |                      |                        |              |   |  |
| i          | Subtract line 1f from line 1c If zero or less, ente   | er - 0 -                                    |                      |                        |              |   |  |
| j          | If there is an amount other than zero on either li<br>section 4911 tax for this year?         | ne 1h d                                     | or line 11, did the  | organization file F    | orm 4720 rep | orting  | ┌ Yes ┌ No                               |
|            | 4-Year Av<br>(Some organizations that made a<br>columns below. See t                          | secti                                       | on 501(h) ele        |                        | havè to co   |   | ne five                                  |
|            | Lobbying Exp  | endit                                       | ures During 4        | l-Year Averag          | jing Period  |   |  |
|            | Calendar year (or fiscal year   |   |                      |                        |              |   |  |

|    | Lobbying Expenditures During 4-Year Averaging Period       |                 |                 |                 |                 |                  |  |  |
|----|--|-----------------|-----------------|-----------------|-----------------|------------------|--|--|
|    | Calendar year (or fiscal year<br>beginning in)             | <b>(a)</b> 2007 | <b>(b)</b> 2008 | <b>(c)</b> 2009 | <b>(d)</b> 2010 | <b>(e)</b> Total |  |  |
| 2a | Lobbying non-taxable amount                                |                 |                 |                 |                 |                  |  |  |
| b  | Lobbying ceiling amount<br>(150% of line 2a, column(e))    |                 |                 |                 |                 |                  |  |  |
| С  | Total lobbying expenditures                                |                 |                 |                 |                 |                  |  |  |
| d  | Grassroots non-taxable amount                              |                 |                 |                 |                 |                  |  |  |
| e  | Grassroots ceiling amount<br>(150% of line 2d, column (e)) |                 |                 |                 |                 |                  |  |  |
| f  | Grassroots lobbying expenditures                           |                 |                 |                 |                 |                  |  |  |

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

|     |  | (a)   |                 | (b)       |  |
|-----|--|-------|-----------------|-----------|--|
|     |  | Yes   | No              | A mount   |  |
| 1   | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of |       |                 |           |  |
| а   | Volunteers?  | Yes   |                 |           |  |
| b   | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?   | Yes   |                 |           |  |
| c   | Media advertisements?  |       | Νo              |           |  |
| d   | Mailings to members, legislators, or the public?   |       | Νo              |           |  |
| е   | Publications, or published or broadcast statements?  |       | Νo              |           |  |
| f   | Grants to other organizations for lobbying purposes?   |       | Νo              |           |  |
| g   | Direct contact with legislators, their staffs, government officials, or a legislative body?  | Yes   |                 | 18,259    |  |
| h   | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |       | Νo              |           |  |
| i   | Other activities? If "Yes," describe in Part IV  |       | Νo              |           |  |
| j   | Total lines 1c through 1i  |       | •               | 18,259    |  |
| 2a  | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |       | Νo              |           |  |
| ь   | If "Yes," enter the amount of any tax incurred under section 4912  |       |                 |           |  |
| c   | If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |       |                 |           |  |
| d   | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   |       |                 |           |  |
| Dar | $\star$ TU-A. Complete if the organization is example under section $E01(c)(A)$ section  | 501/c | \/ <b>E</b> \_0 | r section |  |

#### the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).

|   |  |   | Yes | No |
|---|--|---|-----|----|
| L | Were substantially all (90% or more) dues received nondeductible by members?                     | 1 |     |    |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                | 2 |     |    |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 |     |    |

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

| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  |    |  |
|---|--|----|--|
| а | Current year   | 2a |  |
| b | Carryover from last year   | 2b |  |
| c | Total  | 2c |  |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  | 3  |  |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4  |  |
| 5 | Taxable amount of lobbying and political expenditures (see instructions)   | 5  |  |

#### Part IV Supplemental Information

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

| Ident if ier        | Return Reference | Explanation  |
|---------------------|------------------|--|
| Lobbying Activities |                  | The college incurred \$18,259 in costs related to lobbying at the local, state and federal levels in fiscal year 2010/11 Elmhurst College contacts legislators, members of the legislative staff, as well as various departments, and state and local executive agencies Elmhurst's lobby efforts support higher education policy and funding issues Elmhurst contacted officials with regard to the following issues -Continuation of Map Grant funding -Requesting funding for Science Center renovation and addition -Student's attended Student Lobby Day in Springfield, Illinois |

1

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493122008212

OMB No 1545-0047

Inspection

Open to Public

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

**Supplemental Financial Statements** 

► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** Elmhurst College 36-2169145 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the

|  |  | (a) Donor advised funds  | (E                           | ) Funds and other accounts                       |
|--|--|--|------------------------------|--|
| Total number   | at end of year   |  |                              |  |
| Aggregate co   | ntributions to (during year)   |  |                              |  |
| Aggregate gr   | ants from (during year)  |  |                              |  |
| Aggregate va   | lue at end of year   |  |                              |  |
|  | nization inform all donors and donor adv<br>organization's property, subject to the  |  |                              | ed Yes I   |
| used only for  | nization inform all grantees, donors, and<br>charitable purposes and not for the be<br>opermissible private benefit                    |  | •                            | purpose <b>Yes I</b>                             |
| rt III Cons  | servation Easements. Complete  | ıf the organızatıon answered "                                     | 'Yes" to Form                | 990, Part IV, line 7.                            |
| Preserva<br>Protecti   | f conservation easements held by the of<br>ation of land for public use (e g , recreat<br>on of natural habitat<br>ation of open space | tion or pleasure)  |                              | ally importantly land area<br>historic structure |
| •  | es 2a-2d if the organization held a qua<br>the last day of the tax year  | lified conservation contribution in th                             | he form of a cor             | nservation                                       |
|  |  |  |                              | Held at the End of the Year                      |
| Total numbe  | r of conservation easements  |  | 2a                           |  |
| Total acreag   | e restricted by conservation easement  | s  | 2b                           |  |
| Number of co   | onservation easements on a certified hi  | storic structure included in (a)                                   | 2c                           |  |
| Number of co   | onservation easements included in (c) a  | acquired after 8/17/06   | 2d                           |  |
| the taxable y  | enservation easements modified, transf<br>rear -<br>rates where property subject to conserv  |  |                              |  |
|  | anization have a written policy regardir<br>of the conservation easements it holds   |  | on, handling of v            | violations, and Yes I                            |
| Staff and vol  | unteer hours devoted to monitoring, ins  | pecting and enforcing conservation                                 | easements du                 | ring the year ►                                  |
| A mount of ex  | penses incurred in monitoring, inspect   | ıng, and enforcıng conservatıon eas                                | ements during                | the year ► \$                                    |
|  | onservation easement reported on line<br>((i) and 170(h)(4)(B)(ii)?  | 2(d) above satisfy the requirements                                | s of section                 | Г Yes  |
| balance shee   | describe how the organization reports of<br>et, and include, if applicable, the text of<br>tion's accounting for conservation ease     | the footnote to the organization's fi                              |                              |  |
| <b>rt IIII Orga</b><br>Com   | nizations Maintaining Collection of the organization answered  | ons of Art, Historical Treason<br>"Yes" to Form 990, Part IV, line | ur <b>es, or Oth</b><br>e 8. | er Similar Assets.                               |
| art, historica   | zation elected, as permitted under SFA!<br>I treasures, or other similar assets heli<br>art XIV, the text of the footnote to its fi    | d for public exhibition, education or                              | research in furt             |  |
| _  | zation elected, as permitted under SFAS<br>asures, or other similar assets held for<br>ollowing amounts relating to these item         | public exhibition, education, or res                               |                              | · · · · · · · · · · · · · · · · · · ·            |
|  |  |  |                              |  |
| provide the f  | s included in Form 990, Part VIII, line  |  |                              | <b>►</b> \$                                      |
| provide the f  | s included in Form 990, Part VIII, line included in Form 990, Part X   |  |                              | ►\$<br>►\$                                       |
| provide the f  (i) Revenues  (ii) Assets in  If the organiz                | ,  | 1<br>torical treasures, or other similar as                        | ssets for financ             | <b>-</b> \$                                      |
| provide the f  (i) Revenues  (ii) Assets in  If the organiz  following amo | ncluded in Form 990, Part X<br>zation received or held works of art, his   | 1<br>torical treasures, or other similar as                        | ssets for financ             | <b>-</b> \$                                      |

| ar     | <b>Titl</b> Organizations Maintaining Co  | illections of Art             | , His   | torical 1               | <u> Freas</u> | ures, or O                  | the     | <u>r Similar Ass</u>         | sets (co         | ontinued,  |
|--------|---|-------------------------------|---------|-------------------------|---------------|-----------------------------|---------|------------------------------|------------------|------------|
| 3      | Using the organization's accession and othe items (check all that apply)                        | r records, check an           | y of th | ne following            | g that a      | re a significa              | ant u   | se of its collecti           | on               |            |
| а      | ▼ Public exhibition   |                               | d       | <b>▼</b> Loa            | norex         | change progr                | ams     |                              |                  |            |
| b      | Scholarly research  | e Cother                      |         |                         |               |                             |         |                              |                  |            |
| c      | ✓ Preservation for future generations   |                               |         |                         |               |                             |         |                              |                  |            |
| ı      | Provide a description of the organization's co<br>Part XIV                                      | ollections and expla          | ın hov  | w they furt             | her the       | organization                | ı's e>  | cempt purpose ir             | 1                |            |
| 5      | During the year, did the organization solicit of assets to be sold to raise funds rather than t |                               |         | •                       |               |                             |         |                              | √ Yes            | ┌ No       |
| Pai    | t IV Escrow and Custodial Arrang  |                               |         |                         |               | n answere                   | d "Y    | es" to Form 9'               | 90,              |            |
|        | Part IV, line 9, or reported an an  |                               | •       |                         |               |                             |         |                              |                  |            |
| .a     | Is the organization an agent, trustee, custod included on Form 990, Part X?                     | lian or other interme         | ediary  | for contrib             | butions       | or other ass                | ets     |                              | Yes              | ┌ No       |
| b      | If "Yes," explain the arrangement in Part XI  | √ and complete the            | follow  | ıng table               |               | _                           |         |                              |                  |            |
|        |   |                               |         |                         |               | -                           |         | Am                           | ount             |            |
| с      | Beginning balance   |                               |         |                         |               | -                           | 1c      |                              |                  |            |
| d      | Additions during the year   |                               |         |                         |               | -                           | 1d      |                              |                  |            |
| е      | Distributions during the year   |                               |         |                         |               | -                           | 1e      |                              |                  |            |
| f      | Ending balance  |                               |         |                         |               | L                           | 1f      |                              |                  |            |
| а      | Did the organization include an amount on Fo  | orm 990, Part X, line         | e 21?   |                         |               |                             |         | Γ                            | Yes              | ┌ No       |
|        | If "Yes," explain the arrangement in Part XI\   |                               |         |                         |               |                             |         |                              |                  |            |
| °a     | rt V Endowment Funds. Complete  |                               |         |                         |               |                             |         |                              | (a) Four V       | 'aara Daal |
| а      | Beginning of year balance   | (a)Current Year<br>81,374,087 | (D      | Prior Year<br>76,740,8  |               | Two Years Bacl<br>105,168,5 | _       | 1)Three Years Back           | (e)Four Y        | ears bac   |
| a<br>b | Contributions   | 1,842,319                     |         | 1,680,3                 | _             | 1,369,6                     | -       |                              |                  |            |
| c      | Investment earnings or losses   | 15,531,159                    |         | 5,289,8                 | _             | -26,700,0                   | -       |                              |                  |            |
| d      | Grants or scholarships  | 828,528                       |         | 670,0                   | _             | 409,6                       | -       |                              |                  |            |
| e      | Other expenditures for facilities   | 1,791,752                     |         | 1,666,8                 | 377           | 2,687,5                     | 96      |                              |                  |            |
|        | and programs  |                               |         |                         |               |                             | $\perp$ |                              |                  |            |
| f      | Administrative expenses   |                               |         |                         |               |                             | $\perp$ |                              |                  |            |
| g      | End of year balance   | 96,127,285                    |         | 81,374,0                | 087           | 76,740,8                    | 71      |                              |                  |            |
|        | Provide the estimated percentage of the yea   | r end balance held a          | as      |                         |               |                             |         |                              |                  |            |
| а      | Board designated or quasi-endowment 🕨   | 60 258 %                      |         |                         |               |                             |         |                              |                  |            |
| Ь      | Permanent endowment 🕨 23 596 %  |                               |         |                         |               |                             |         |                              |                  |            |
| c      | Term endowment ► 16 146 %   |                               |         |                         |               |                             |         |                              |                  |            |
| a      | Are there endowment funds not in the posse  | ssion of the organiza         | ation 1 | that are he             | eld and       | admınıstere                 | d for   | the                          |                  |            |
|        | organization by  (i) unrelated organizations  |                               |         |                         |               |                             |         | 30/                          | Yes Yes          | No         |
|        |   |                               |         | • •                     |               |                             | •       | 3a(i                         |                  | No         |
| ь      | (ii) related organizations  |                               |         | <br>Schedule R          | ?             |                             | ٠.      | 3b                           | ' <del>'  </del> | 110        |
|        | Describe in Part XIV the intended uses of th  | ·                             |         |                         | -             |                             | -       |                              |                  |            |
| aī     | t VI Investments—Land, Buildings  |                               |         |                         | 990, I        | Part X, line                | 10.     |                              |                  |            |
|        | Description of investment   |                               |         | (a) Cost of basis (inve | or other      | (b)Cost or of               | ther    | (c) Accumulated depreciation | ( <b>d</b> ) Bo  | ok value   |
| a      | Land  |                               |         | 1                       |               | 3,036                       | ,281    |                              |                  | 3,036,28   |
| ь      | Buildings   |                               |         |                         |               | 98,801                      | ,639    | 40,336,105                   | 5                | 8,465,53   |
| c      | Leasehold improvements  |                               |         |                         |               |                             |         |                              |                  | -          |
| d      | Equipment   |                               |         |                         |               | 17,703                      | ,355    | 15,243,371                   |                  | 2,459,98   |
| e      | Other   |                               |         |                         |               | 15,024                      | ,593    | 6,745,570                    |                  | 8,279,023  |

72,240,822

| Part VII Investments—Other Securities. See   | Form 990, Part X, line 12<br>T |  |
|--|--------------------------------|--|
| <ul><li>(a) Description of security or category<br/>(including name of security)</li></ul> | ( <b>b)</b> Book value         | (c) Method of valuation Cost or end-of-year market value |
| (1)Financial derivatives   |                                | ,  |
| (2)Closely-held equity interests   |                                |  |
| (3)0 ther  |                                |  |
| (A) COMMINGLED FUNDS   | 54,550,050                     |  |
| (B) COMMODITIES FUND   | 3,667,001                      |  |
|  |                                |  |
| (C) LIMITED PARTNERSHIPS   | 27,267,413                     |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
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|  |                                |  |
|  |                                |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 12)                         | , ,                            |  |
| Part VIII Investments—Program Related. See   | Form 990, Part X, line 1       |  |
| (a) Description of investment type   | (b) Book value                 | (c) Method of valuation Cost or end-of-year market value |
|  |                                | Cost of end-of-year market value                         |
|  |                                |  |
|  |                                |  |
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|  |                                |  |
|  |                                |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 13)                         |                                |  |
| Part IX Other Assets. See Form 990, Part X, lin  |                                | T  |
| (a) Descrip  | tion                           | (b) Book value   |
|  |                                |  |
|  |                                |  |
|  |                                |  |
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|  |                                |  |
|  |                                |  |
| 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   | 0                              |  |
| STUDENT LOAN ADVANCES FROM US GOVT   | 1,767,361                      |  |
| LIFE INCOME AGREEMENTS PAYABLE   | 297,830                        |  |
| OTHER LIABILITIES  | 1,468,806                      |  |
| INTEREST RATE SWAP AGREEMENT   | 6,617,110                      |  |
| ASSET RETIREMENT OBLIGATION  | 1,315,900                      |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) 🕨                      | 11,467,007                     |  |

|                  | ule D (Form 990) 2010   |   |  |   | Page <b>4</b>   |
|------------------|---|---|--|---|---|
| Par<br>1         | <b>Total revenue (Form 990, Part</b>                                      |   | orm 990 to Financial Stateme   | nts<br>1  | 113,324,656   |
| 2                | Total expenses (Form 990, Par   |   |  | 2   | 107,184,091   |
| 3                | Excess or (deficit) for the year  |   |  | 3   | 6,140,565   |
| 4                | Net unrealized gains (losses) o   |   |  | 4   | 6,142,248   |
| 5<br>6           | Donated services and use of fa<br>Investment expenses                     | icilities   |  | 6   |   |
| 7                | Prior period adjustments  |   |  | 7   |   |
| 8                | Other (Describe in Part XIV)  |   |  | 8   | 2,226,543   |
| 9                | Total adjustments (net) Add I   |   |  | 9   | 8,368,791   |
| 10<br>Part       | , , ,   | per financial statements Combine l  | nes 3 and 9  al Statements With Revenue  | 10<br>ner Re  | 14,509,356  |
| 1                |   | er support per audited financial state  |  | 1   | 84,010,624  |
| 2                |   | ut not on Form 990, Part VIII, line 1   | 1 1  |   |   |
| a                | Net unrealized gains on inves   |   | <b>2a</b> 6,142,248  |   |   |
| b<br>c           | Donated services and use of f<br>Recoveries of prior year grant           |   | . 2b 2c  | -   |   |
| d                | Other (Describe in Part XIV)  |   | <b>2d</b> 2,307,015  | 1   |   |
| e                | Add lines <b>2a</b> through <b>2d</b> .                                   |   |  | 2e  | 8,449,263   |
| 3                |   |   |  | 3   | 75,561,361  |
| 4<br>a           |   | 00, Part VIII, line 12, but not on line<br>luded on Form 990, Part VIII, line 7 | 1 1  |   |   |
| b                | Other (Describe in Part XIV)  |   | . 4b 37,616,233  | 1 1   |   |
| c                | Add lines 4a and 4b   |   |  | 4c  | 37,763,295  |
| 5                |   | d 4c. (This should equal Form 990, F  |  | 5   | 113,324,656   |
| Part<br>1        | Total expenses and losses pe  |   | ial Statements With Expense  | s per   | 69,501,268  |
| _                | statements  |   |  | 1   |   |
| 2                |   | it not on Form 990, Part IX, line 25  | 20   |   |   |
| a<br>b           | Donated services and use of f<br>Prior year adjustments                   |   | 2a<br>2b   | -   |   |
| c                | Other losses  |   | 2c   |   |   |
| d                | Other (Describe in Part XIV)  |   | <b>2d</b> 80,472   | !   |   |
| e                | Add lines 2a through 2d   |   |  | 2e  | 80,472  |
| 3<br>4           | Subtract line <b>2e</b> from line <b>1</b> .  Amounts included on Form 99 | 0, Part IX, line 25, but not on line <b>1</b> :                                 |  | 3   | 69,420,796  |
| а                |   | uded on Form 990, Part VIII, line 71  | 1 1  | :   |   |
| b                | Other (Describe in Part XIV)  |   | <b>4b</b> 37,616,233   | 3   |   |
| _ <b>с</b><br>_  | Add lines 4a and 4b   |   |  | 4c  | 37,763,295  |
| 5<br>Par         | t XIV Supplemental In   |   | Part I, line 18 )  | 5   | 107,184,091   |
|                  |   |   | 3, 5, and 9, Part III, lines 1a and 4, F<br>XIII, lines 2d and 4b Also complete  |   |   |
|                  | tional information  | 1   | T  |   |   |
|                  | Ident if ier  | Return Reference  | Explanat   |   |   |
| Finan            | cial Statement Footnote   | Schedule D, Part III, Line 1a   | Purchases of library books and wor<br>unrestricted expenses The Collegi<br>of library books or works of art as a<br>such items received as gifts   | e does r  | not capitalize the cost   |
| Descr<br>Collec  | ription of O rganization's<br>ctions                                      | Schedule D, Part III, Line 4  | The African collections, profession portrait collections of paintings, draphotographs, and sculptures are magaculty and staff and outside consti   | awıngs,<br>ade ava<br>tuents  | lithographs,<br>illable to students,<br>for their educational   |
| Intend           | ded Uses of Endowment Funds   | Schedule D, Part V, Line 4  | value, for lectures and pleasures of The purpose of the endowment is to mission over the long term. Accord objectives of the endowment are to long-term real purchasing power of a stable source of financial support operating budget per policy set by provide ongoing financial support if awards, faculty chairs, lectureship, specified purposes in accordance v investment policies and donor agre   | suppo<br>ingly, the<br>a) pre<br>the fun<br>for the<br>the boa<br>in the for<br>book fu   | rt the College and its he primary investment serve and increase ds' principal b) provide college's annual rd of trustees c) rm of scholarships, unds and other Board of Trustees'           |
| Liabili<br>(A SC | ty for Uncertain Tax Position<br>740)                                     | Schedule D, Part X, Line 2  | FINANCIAL STATEMENT FOOT NACCOUNTING PRONOUNCEMEN TAXES IN JULY 2006, THE FASB INTERPRETATION NO 48, "ACCUNCERTAINTY IN INCOME TAXE OF FASB NO 109" ("FIN 48") FIN SFAS NO 109, "ACCOUNTING FOR ESTABLISHES THE CRITERION TO POSITION HAS TO MEET FOR SOME BENEFITS OF THAT POSITION TO COLLEGE'S FINANCIAL STATEM FOR YEARS BEGINNING ON OR AMANAGEMENT HAS DETERMINE UNCERTAIN TAX POSITIONS AS COLLEGE HAS ADOPTED THE PREFFECTIVE JULY 1, 2007 | OTE N T RELA ISSUEI OUNTI S - AN N 48, W OR INC HAT A OME OF O BE R ENTS   NFTER I O THEF | - NEW ATED TO INCOME D FASB NG FOR INTERPRETATION HICH CLARIFIES OME TAXES," N INDIVIDUAL TAX R ALL OF THE ECOGNIZED IN THE FIN 48 IS EFFECTIVE DECEMBER 15, 2006 RE ARE NO NE 30, 2011 THE |
| Suppl            | emental Description - Other   | Schedule D, Part XI, Line 8   | Change in Fair Value of Beneficial 1<br>440,942 Change in Interest Rate 5<br>1,785,601 Total \$ 2  | wap A   | greement \$   |
| Suppl            | emental Description - Other   | Schedule D, Part XII, Line 2d   | Special Events Fundraising expens<br>Change in Fair Value of Beneficial I<br>440,942 Housing Rental Allocation<br>48,480 Change in Interest Rate Sv  | es<br>nterest<br>n nettec<br>vap Agr  | \$ 31,992<br>t in Trusts \$<br>d in 990 \$<br>reement \$  |
| Suppl            | emental Description - O ther  | Schedule D, Part XII, Line 4b   | 1,785,601 Total \$ 2,31 Scholarships and Grants netted ag Audited Financial Statements 36,685,131 Outside Printing & For Audited Financial Statements 150,497 Outside Conferences & F netted in Audited Financial Statem 39,250 Annuity Liability payments 5,863 Write-off of Fair V Alue of Be Trusts   | ainst Ti<br>od Serv<br>acilities<br>ents<br>/liabilit<br>neficial                         | uition and Fees in \$ ice revenue netted in \$ s Rental Revenue \$ y adjustments \$   |
| Suppl            | emental Description - Other   | Schedule D, Part XIII, Line 2d  | Total \$ 37,616,233  Special Events Fundraising expens Rental Allocation netted in 990 \$ 80,472   |   | \$ 31,992 Housing<br>) Total \$   |
| Suppl            | emental Description - Other   | Schedule D, Part XIII, Line 4b  | Scholarships and Grants netted ag Audited Financial Statements 36,685,131 Outside Printing & For Audited Financial Statements 150,497 Outside Conference & Fain Audited Financial Statements 39,250 Annuity Liability payments adjustments \$5,863 Write Beneficial Interest in Trusts - Total \$ 37,616,233   | od Serv<br>cilities<br>/liabilit  | \$ ice revenue netted in \$ rental revenue netted \$ y  |

▶ Attach to Form 990 or Form 990-EZ.

## OMB No 1545-0047

2010

2010

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Schools

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

Open to Public Inspection

Name of the organization Elmhurst College Employer identification number

|        | 36-21   | 69145                  |     |    |
|--------|---|------------------------|-----|----|
| aı     | t I   |                        | YES | NO |
| L      | Does the organization have a racially nondiscriminatory policy toward students by statement in its char<br>other governing instrument, or in a resolution of its governing body?  | rter, bylaws,          | Yes |    |
| 2      | Does the organization include a statement of its racially nondiscriminatory policy toward students in all brochures, catalogues, and other written communications with the public dealing with student admission programs, and scholarships?  |                        | Yes |    |
| 3      | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast me the period of solicitation for students, or during the registration period if it has no solicitation program, if that makes the policy known to all parts of the general community it serves? If "Yes," please describe please explain. If you need more space use Part II. | edia during<br>n a way | Yes |    |
|        |   |                        | res |    |
| ļ<br>_ | Does the organization maintain the following?   |                        |     |    |
|        | Records indicating the racial composition of the student body, faculty, and administrative staff?   | 4a                     | Yes |    |
|        | Records documenting that scholarships and other financial assistance are awarded on a racially nondis basis?  | 4b                     | Yes |    |
| С      | Copies of all catalogues, brochures, announcements, and other written communications to the public de with student admissions, programs, and scholarships?  | aling 4c               | Yes |    |
| d      | Copies of all material used by the organization or on its behalf to solicit contributions?  | 4d                     | Yes |    |
| a      | Does the organization discriminate by race in any way with respect to Students' rights or privileges?   | 5a                     |     | No |
| b      | Admissions policies?  | 5b                     |     | Νo |
| С      | Employment of faculty or administrative staff?  | 5c                     |     | Νo |
| d      | Scholarships or other financial assistance?   | <u>5d</u>              |     | Νo |
| e      | Educational policies?   | 5e                     |     | Νo |
| f      | Use of facilities?  | 5f                     |     | Νo |
| g      | Athletic programs?  | <u>5g</u>              |     | Νo |
| h      | Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II   | 5h                     |     | No |
| 6a     | Does the organization receive any financial aid or assistance from a governmental agency?   | 6a                     | Yes |    |
| b      | Has the organization's right to such aid ever been revoked or suspended?  | 6b                     |     | Νo |
| 7      | If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization certify that it has complied with the applicable requirements of sections 4 01 thro   | ough 4 05              |     |    |

of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

#### 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)

| ldentifier   | Return<br>Reference            | Explanation  |
|--|--------------------------------|--|
| Publication of Racially<br>Nondiscriminatory<br>Policy | Schedule E,<br>Part I, Line 3  | Elmhurst College policy is that of non-discrimination of the public served by the institution and with respect to the college personnel. Advertisements, publications, brochures, applications for admission, etc., contain a statement to the effect that the college complies with the federal non-discrimination regulations, and thereby does not discriminate on the basis of race, gender, religion, color, national origin, age, sexual orientation, or handicap disability |
| Government<br>Assistance                               | Schedule E,<br>Part I, Line 6a | The College receives governmental financial aid, grants and assistance from the us department of education, the national institutes of health, the Illinois board of higher education, the Illinois arts council, the Illinois department of commerce and economic opportunity, and the city of Elmhurst   |

Schedule E (Form 990 or 990-EZ) 2010

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OMB No 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **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

| N | ame  | of the | organizatio |
|---|------|--------|-------------|
| E | lmhu | rct Co | llogo       |

**Employer identification number** 

| inmurst Conege   |   |                           |  |                                      | 3  | 36-2169145   |  |                  |  |  |
|--|---|---------------------------|--|--------------------------------------|--|--------------|--|------------------|--|--|
| Part I Fundraising Act   | t <b>ivities.</b> Complete                    | e if the c                | organizal  | tion answered "Yes"                  | to Form 9  | 990, Part IV | , line 17.   |                  |  |  |
| <b>a</b> Mail solicitations <b>b</b> Internet and e-mail so  |   | through a                 |  |                                      |  |              |  |                  |  |  |
| c   Phone solicitations d   In-person solicitations  2a Did the organization have a or key employees listed in b If "Yes," list the ten highes | a written or oral agre<br>Form 990, Part VII) | ) or entity               | ın conne   | ction with professional              | ers, directo<br>fundraising  | services?    | <b>T</b> Yes   | Γ <sub>N</sub> α |  |  |
| to be compensated at leas  |   |                           |  |                                      |  |              |  |                  |  |  |
| (i) Name and address of<br>ındıvıdual<br>or entity (fundraiser)  | (ii) Activity                                 | fundrais<br>custo<br>cont | Did<br>ser have<br>ody or<br>trol of<br>outions? | (iv) Gross receipts<br>from activity | (v) A mount paid to<br>(or retained by)<br>fundraiser listed in<br>col (i) |              | (vi) A mount paid to<br>(or retained by)<br>organization |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
|  |   |                           |  |                                      |  |              |  |                  |  |  |
| Tatal  |   |                           | <b>I</b>   |                                      |  |              |  |                  |  |  |

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

| <b>Part II</b> Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. |      |   |  |   |                                     |  |  |  |  |  |
|---|------|---|--|---|-------------------------------------|--|--|--|--|--|
|   |      |   | (a) Event #1  Golf Outing (event type) | (b) Event #2  Hab for Human (event type)                | (c) O ther Events  9 (total number) | (d) Total Events<br>(Add col (a) through<br>col (c)) |  |  |  |  |
| EVE   | 1    | Gross receipts  | 26,513                                 | 41,045  | 24,033                              | 91,591   |  |  |  |  |
| Revenue   | 2    | Less Charitable contributions   | 11,883                                 | 19,685  | 12,506                              | 44,074   |  |  |  |  |
|   | 3    | Gross income (line 1 minus line 2)  | 14,630                                 | 21,360  | 11,527                              | 47,517   |  |  |  |  |
|   | 4    | Cash prizes   | 409                                    | 300   |                                     | 709  |  |  |  |  |
| မှာ   | 5    | Non-cash prizes   | 4,915                                  |   |                                     | 4,915  |  |  |  |  |
| Expenses  | 6    | Rent/facility costs   |  |   |                                     |  |  |  |  |  |
|   | 7    | Food and beverages  | 13,929                                 |   | 2,041                               | 15,970   |  |  |  |  |
| Direct  | 8    | Entertainment   |  |   |                                     |  |  |  |  |  |
| Δ   | 9    | Other direct expenses .   | 570                                    | 1,389   | 8,439                               | 10,398   |  |  |  |  |
|   | 10   | Direct expense summary Add line   | es 4 through 9 ın column               | (d)   | •                                   | 31,992   |  |  |  |  |
|   | 11   | Net income summary Combine lii  |  |   |                                     | 15,525   |  |  |  |  |
| Par   | t II | <b>Gaming.</b> 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) Bingo                              | <b>(b)</b> Pull tabs/Instant<br>bingo/progressive bingo | (c) O ther gaming                   | (d) Total gaming<br>(Add col (a) through<br>col (c)) |  |  |  |  |
|   | 1    | Gross revenue   |  |   |                                     |  |  |  |  |  |
| Ses   | 2    | Cash prizes   |  |   |                                     |  |  |  |  |  |
| Expenses  | 3    | Non-cash prizes   |  |   |                                     |  |  |  |  |  |
|   | 4    | Rent/facility costs   |  |   |                                     |  |  |  |  |  |
| Direct  | 5    | Other direct expenses   |  |   |                                     |  |  |  |  |  |
|   | 6    | Volunteer labor   | Γ Yes %<br>Γ No                        | ┌ Yes % ┌ No  | Г Yes %<br>Г No                     |  |  |  |  |  |
|   | 7    | Direct expense summary Add lines  | s 2 through 5 in column (              | d)  | •                                   |  |  |  |  |  |
|   | 8    | Net gaming income summary Com   | bine lines 1 and 7 in colu             | mn (d)  | <u> </u>                            |  |  |  |  |  |
| 9<br>a<br>b   | Is t | er the state(s) in which the organizathe organization licensed to operate | gaming activities in each              |   |                                     | · Fyes Fno   |  |  |  |  |
| 10a<br>b  |      | re any of the organization's gaming l<br>Yes," Explain                    |  |   | the tax year?                       | Tyes TNo   |  |  |  |  |

| 11  | Does the organization operate ga        | aming activities with nonmembers?  |   | <b>Г</b> үе     | s $\Gamma_{No}$ |
|-----|---|--|---|-----------------|-----------------|
| 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 <sub>Yе</sub> | s $\Gamma_{No}$ |
| 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 <b>&gt;</b> \$ and the            |                 |                 |
| c   | If "Yes," enter name and address        | 5  |   |                 |                 |
|     | Name 🟲                                  |  |   |                 |                 |
|     | Address 🟲                               |  |   |                 |                 |
| 16  | Gaming manager information              |  |   |                 |                 |
|     | Name 🟲                                  |  |   |                 |                 |
|     | Gaming manager compensation l           | <b>*</b> \$  |   |                 |                 |
|     | Description of services provided        | <b>&gt;</b>  |   |                 |                 |
|     | 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 |   |  | r responses to question on Schedul      | e G (see        |                 |
|     | Identifier                              | ReturnReference  | Explanation                             |                 |                 |

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OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule I

# **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   |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|--|---|--|------------------------------|---|---|--|-------------------------------------|--|--|--|--|--|--|
| Elmhurst College   |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
| Part I General Information   | on on Grants and  | d Assistance                             |                              |   |   | •                                      |                                     |  |  |  |  |  |  |
| <ul> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organization</li> </ul> | ward the grants or as   | sıstance?                                |                              |   |   |  | ✓ Yes 🦳                             |  |  |  |  |  |  |
| Form 990, Part IV, lin   | Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. |  |                              |   |   |  |                                     |  |  |  |  |  |  |
| 1 (a) Name and address of organization or government   | (b) EIN   | (c) IRC Code<br>section<br>if applicable | (d) A mount of cash<br>grant | (e) A mount of non-<br>cash<br>assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of gra<br>or assistance |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
|  |   |  |                              |   |   |  |                                     |  |  |  |  |  |  |
| 2 Enter total number of section 5  | 01(c)(3) and govern   | ment organizations .                     |                              |   |   | <u>-</u>                               |                                     |  |  |  |  |  |  |
| 3 Enter total number of other orga   | anızatıons  |  |                              |   |   | 🕨                                      |                                     |  |  |  |  |  |  |

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

| (a)Type of grant or assistance          | ( <b>b)</b> Number of recipients | (c)A mount of<br>cash grant | (d)A mount of<br>non-cash assistance | (e)Method of valuation<br>(book,<br>FMV, appraisal, other) | (f)Description of non-cash assistance |
|---|----------------------------------|-----------------------------|--------------------------------------|--|---------------------------------------|
| (1) SEOG Federal supplemental Grant     | 1044                             | 283,619                     |                                      | N/A  | N/A                                   |
| (2) Endowed Scholarships                | 444                              | 911,327                     |                                      | N/A  | N/A                                   |
| (3) Donor Funded Scholarships           | 199                              | 161,803                     |                                      | N/A  | N/A                                   |
| (4) Institutionally Funded Scholarships | 3679                             | 35,233,842                  |                                      | N/A  | N/A                                   |
|   |                                  |                             |                                      |  |                                       |
|   |                                  |                             |                                      |  |                                       |
|   |                                  |                             |                                      |  |                                       |

**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 Monitoring<br>Use of Grant Funds Inside<br>US | Schedule I, Part I, Line 2 | The College offers a wide variety of merit and need-based scholarships and awards to matriculating students. Merit awards are given in recognition of various achievements as specified in donors' correspondence and documents, or by College policy Need-based awards are provided based on the income level, availability of awards offered elsewhere and similar standards. The College's Financial Aid Office uses various methods for the fair disbursement of grant funds within the requirements set by each grant source to monitor compliance. The College primarily makes scholarship grants that help offset tuition and other educational costs of the students, with most directly credited against the applicable student account, which assures proper use. The amount of the grant is adjusted by the Financial Aid Office, as necessary, based on any subsequent changes affecting the student's original eligibility. |

DLN: 93493122008212

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Elmhurst College

**Employer identification number** 

36-2169145

| Pa | rt I Questions Regarding Compensation  | on          |  |    |     |    |
|----|--|-------------|--|----|-----|----|
|    |  |             |  |    | Yes | Νo |
| 1a | Check the appropriate box(es) if the organization p<br>990, Part VII, Section A, line 1a Complete Part I |             | ny of the following to or for a person listed in Form<br>ride any relevant information regarding these items |    |     |    |
|    | First-class or charter travel  | 굣           | Housing allowance or residence for personal use  |    |     |    |
|    | ▼ Travel for companions  | Г           | Payments for business use of personal residence  |    |     |    |
|    | Tax idemnification and gross-up payments   | Γ           | Health or social club dues or initiation fees  |    |     |    |
|    | Discretionary spending account   | <b>▽</b>    | Personal services (e g , maid, chauffeur, chef)  |    |     |    |
| b  | If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des    |             |  | 1b | Yes |    |
| 2  | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv |             |  | 2  | Yes |    |
| 3  | Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all    |             |  |    |     |    |
|    | Compensation committee   | Γ           | Written employment contract  |    |     |    |
|    | ✓ Independent compensation consultant  | 굣           | Compensation survey or study   |    |     |    |
|    | 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 ${	t 1a}$ with respect to the filing organization   |    |     |    |
| а  | Receive a severance payment or change-of-contro  | ol paymen   | nt from the organization or a related organization?  | 4a |     | Νo |
| ь  | Participate in, or receive payment from, a supplem   | nental non  | qualified retirement plan?   | 4b |     | Νo |
| c  | Participate in, or receive payment from, an equity-  | based co    | mpensation arrangement?  | 4c |     | Νo |
|    | If "Yes" to any of lines 4a-c, list the persons and  |             |  |    |     |    |
|    | Only 501(c)(3) and 501(c)(4) organizations only n  | nust comp   | plete lines 5-9.   |    |     |    |
| 5  | For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of           | A, 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<br>compensation contingent on the net earnings of    | A, 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 payments not described in lines 5 and 6? If "Yes,"     |             |  | 7  |     | Νο |
| 8  | Were any amounts reported in Form 990, Part VII subject to the initial contract exception described      |             |  |    |     |    |
|    | in Part III  |             |  | 8  |     | Νo |
| 9  | If "Yes" to line 8, did the organization also follow t<br>section 53 4958-6(c)?                          | he rebutt   | able presumption procedure described in Regulations  | 9  |     |    |

### 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         | W-2 and/or 1099-MI  | SC compensation | (C) Retirement and             | ( <b>D)</b> Nontaxable | (E) Total of columns | (F) Compensation                                |
|------------------------|-------------|--------------------------|---|-----------------|--------------------------------|------------------------|----------------------|---|
|                        |             | (i) Base<br>compensation | (ii) Bonus & (iii) Other reportable compensation compensation |                 | other deferred<br>compensation | benefits               | (B)(ı)-(D)           | reported in prior<br>Form 990 or<br>Form 990-EZ |
| (1) Stephen Alan Ray   | (I)<br>(II) | 259,393<br>0             | 0<br>0  | 414<br>0        | 25,500<br>0                    | 79,800<br>0            | 365,107<br>0         |   |
| (2) Denise P Jones     | (I)<br>(II) | 160,874<br>0             | 0<br>0  | 1,188<br>0      | 23,232<br>0                    | 19,707<br>0            | 205,001<br>0         |   |
| (3) Alzada J Tıpton    | (I)<br>(II) | 154,137<br>0             | 0   | 180<br>0        | 7,945<br>0                     | 19,750<br>0            | 182,012<br>0         |   |
| (4) Peggy Sandgren     | (I)<br>(II) | 150,408<br>0             | 0   | 2,575<br>0      | 7,567<br>0                     | 6,852<br>0             | 167,402<br>0         |   |
| (5) James W Winters    | (I)<br>(II) | 131,634<br>0             | 0   | 748<br>0        | 9,380<br>0                     | 11,029<br>0            | 152,791<br>0         |   |
| (6) James Kulich       | (I)<br>(II) | 131,059<br>0             | 0   | 403<br>0        | 14,557<br>0                    | 9,941<br>0             | 155,960<br>0         |   |
| (7) Gary F Rold        | (ı)<br>(ıı) | 128,420<br>0             | 0   | 1,101<br>0      | 18,680<br>0                    | 31,953<br>0            | 180,154<br>0         |   |
| (8) Lawrence B Carroll | (ı)<br>(ıı) | 116,753<br>0             | 0   | 701<br>0        | 13,833<br>0                    | 23,059<br>0            | 154,346<br>0         |   |
| (9)                    |             |                          |   |                 |                                |                        |                      |   |
| ( 10 )                 |             |                          |   |                 |                                |                        |                      |   |
| (11)                   |             |                          |   |                 |                                |                        |                      |   |
| ( 12 )                 |             |                          |   |                 |                                |                        |                      |   |
| ( 13 )                 |             |                          |   |                 |                                |                        |                      |   |
| ( 14 )                 |             |                          |   |                 |                                |                        |                      |   |
| ( 15 )                 |             |                          |   |                 |                                |                        |                      |   |
| ( 16 )                 |             |                          |   |                 |                                |                        |                      |   |

#### 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<br>Reference            | Explanation   |
|--|--------------------------------|---|
| Housing<br>allowance or<br>residence for<br>personal use | ·                              | The President is being provided a house as a convenience to the College to allow him to conduct business affairs and be available 24/7 to respond to emergent situations that may arise. The residence is for personal use and to entertain trustees, employees, students, donors, and guests of the College. IRS instructions to Form 990 require that the fair market value of housing provided to employees by their employer be reported on Form 990, Part VII, Section A and Schedule J, Part II. As a condition of employment, the President of Elmhurst College is required to reside at the college owned residence at 360 Cottage. Hill Avenue in Elmhurst. The residence serves both as a personal residence as well as a venue for regular carrying on of College business. The College has determined that the value of the use of this personal residence is not considered taxable income to the President as provided for in Internal Revenue. Code Section 119. For tax year 2011, the value of the President's use of the residence is conservatively estimated to be \$56,400. During tax year 2011, the President, Stephen Alan Ray made the residence his home for the year. Schedule J, Part II, Column (D) includes \$56,400. of non-taxable income associated with the use of the residence provided by the College. |
| Travel for companions                                    | 1                              | Travel expense reimbursement for companions is only allowed for the President as per his contract. According to his contract, when Dr. Ray's spouse is required to attend an event in which Dr. Ray is representing the College on official College business, the business related travel expenses for Dr. Ray's spouse will also be reimbursed by the College, when the spouse's travel is to conduct business on behalf of the college. This contract is reviewed by the Human Resources Committee and approved by the full Board of Trustees   |
| Personal services (e g , mail, chauffer, chef)           | Schedule J,<br>Part I, Line 1a | An outside service is used as needed to maintain or to provide any other cleaning services necessary for the business function of the President's house   |

Schedule J (Form 990) 2010

DLN: 93493122008212

OMB No 1545-0047

Open to Public

**Inspection** 

Schedule K (Form 990)

Part I Bond Issues

▶ 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.

**Supplemental Information on Tax Exempt Bonds** 

Internal Revenue Service Name of the organization Elmhurst College

Department of the Treasury

Employer identification number

36-2169145

| (a) Issuer Name  | (b) Issuer EIN   | (c) CUSIP #  | (d) Date Issued   | (e) Issue P  | rice   | e (f) Description of Purpose  |                            | ( <b>g</b> ) Def           | Defeased Behal<br>Issu     |   | lfof  | f of finance    |                                       |  |  |
|--|--|--|---|--|--|---|----------------------------|----------------------------|----------------------------|---|---|-----------------|---------------------------------------|--|--|
|  |  |  |   |  |  |   |                            |                            | Yes                        | No  | Yes   | No              | Yes                                   | No   |  |
| Illinois Finance Authority   | 86-1091967   | 452001ZF0  | 05-31-2005  | 36,50  | 0 000 1  |   |                            | uthor                      |                            | Х   |   | X               | Х                                     |  |  |
| Illinois Finance Authority   | 86-1091967   | 452001Q86  | 05-31-2005  | 21,20  |  | IL Ed Facilities Author<br>07/28/99   |                            |                            | Х                          |   | Х   | Х               |                                       |  |  |
|  | 52-1297563   | 4520017G9  | 09-18-2003  | 12,000   | 0,000 B  | Building  | ıs                         |                            |                            | Х   |   | Х               |                                       | х  |  |
| Illinois Finance Authority   | 86-1091967   | 45200BW79  | 02-22-2007  | 25,00  | 0,000  | Building  | ıs & Parkır                | ng                         |                            | Х   |   | Х               |                                       | Х  |  |
|  |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
|  |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| Proceeds   |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| 1100000  |  |  |   | A  | <u> </u>   |   | В                          | ·                          | С                          |   |   | D               |                                       |  |  |
| A mount of bonds retired   |  | 100,0  | 100,000   |  |  |   |                            |                            | 100,000                    |   |   |                 |                                       |  |  |
| A mount of bonds legally defea   | ised   |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| Total proceeds of issue  |  |  |   | ;  | 36,500,0   | 000   | 2                          | 21,200,000                 |                            | 12,0  | 96,432  |                 | 26,053,56                             |  |  |
| Gross proceeds in reserve fun  | nds  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| <u> </u>   |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| Proceeds in refunding escrow   |  |  |   | ;  | 36,500,0   | 000   | 2                          | 21,200,000                 | 943,690                    |   |   |                 | 1,                                    | 964,791  |  |
| <u> </u>   |  |  |   |  | 0 0  |   | 152,196                    |                            |                            | 273,890   |   |                 |                                       |  |  |
| <u> </u>   |  |  |   |  | 52,641   |   |                            | 52,641                     |                            |   | 22,000  |                 |                                       |  |  |
| <u> </u>   | ·  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| · · · · · · · · · · · · · · · · · · ·  | ceeds  |  |   |  |  | 0   |                            | 0                          |                            | 10,9  | 47,905  |                 | 23,                                   | 694,190  |  |
| <u> </u>   |  |  |   |  | 98,6   | 697   |                            |                            |                            |   |   |                 |                                       | 98,697   |  |
|  |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
| Year of substantial completion   | n<br>  |  |   | +  |  |   |                            |                            |                            | 2006  |   |                 | 2010                                  |  |  |
| Were the bonds issued as part  | t of a current refund  | ıng ıssue?   |   | Yes  | No   |   | Yes                        | No                         | Yes                        |   | No  | Yes             |                                       | No   |  |
| Were the bonds issued as part  | t of an advance refu   | ndıng ıssue?   |   |  | Х  |   |                            | Х                          |                            |   | X   |                 |                                       | X  |  |
| Has the final allocation of prod   | ceeds been made?   |  |   | Х  |  |   | Х                          |                            | Х                          |   |   | Х               |                                       |  |  |
| Does the organization maintain adequate books and records to support the final allocation of proceeds? |  |  |   |  |  |   | Х                          |                            | Х                          |   |   | х               |                                       |  |  |
| allocation of proceeds?  |  |  |   |  |  |   |                            |                            |                            |   |   |                 |                                       |  |  |
|  | Illinois Finance Authority  Illinois Finance Authority  Illinois Educational Facilities Authority  Illinois Finance Authority  Illinois Finance Authority  Illinois Finance Authority  Illinois Finance Authority  Tall Proceeds  Amount of bonds retired Amount of bonds legally defeat Total proceeds of issue  Gross proceeds in reserve fur Capitalized interest from proceeds in refunding escrow Issuance costs from proceeds Credit enhancement from proceeds Credit enhancement from proceeds Capital expenditures from proceeds Other unspent proceeds Year of substantial completion  Were the bonds issued as par Has the final allocation of proceeds Does the organization maintain | Illinois Finance Authority 86-1091967  Illinois Finance Authority 86-1091967  Illinois Educational Facilities 52-1297563  Illinois Finance Authority 86-1091967  Illinois Finance Authority 86-1091967  Illinois Finance Authority 86-1091967  Amount of bonds retired Amount of bonds legally defeased Total proceeds of issue Gross proceeds in reserve funds  Capitalized interest from proceeds  Proceeds in refunding escrow  Issuance costs from proceeds  Credit enhancement from proceeds  Capital expenditures from proceeds  Other spent proceeds  Other unspent proceeds  Year of substantial completion  Were the bonds issued as part of a current refund Were the bonds issued as part of an advance reful Has the final allocation of proceeds been made?  Does the organization maintain adequate books as | Illinois Finance Authority 86-1091967 452001ZF0  Illinois Finance Authority 86-1091967 452001Q86  Illinois Educational Facilities Authority 52-1297563 4520017G9  Illinois Finance Authority 86-1091967 45200BW79  Illinois Finance Authority 86-1091967 45200BW79  TILL Proceeds  A mount of bonds retired Amount of bonds legally defeased Total proceeds of issue Gross proceeds in reserve funds  Capitalized interest from proceeds  Proceeds in refunding escrow  Issuance costs from proceeds  Credit enhancement from proceeds  Working capital expenditures from proceeds  Capital expenditures from proceeds  Other spent proceeds  Other unspent proceeds  Year of substantial completion  Were the bonds issued as part of a current refunding issue?  Were the bonds issued as part of an advance refunding issue?  Has the final allocation of proceeds been made?  Does the organization maintain adequate books and records to supp | Illinois Finance Authority 86-1091967 452001ZF0 05-31-2005  Illinois Finance Authority 86-1091967 452001Q86 05-31-2005  Illinois Educational Facilities Authority 52-1297563 4520017G9 09-18-2003  Illinois Finance Authority 86-1091967 45200BW79 02-22-2007  Illinois Finance Authority 86-1091967 45200BW79 02-18-2003  Illinois Finance Authority 86-1091967 45200BW79 09-18-2003  Illinois Finance Authority 86-1091967 452001QBW79 09-18-2003  Illinois Finance Authority 86-1091967 452001QBW79 09-18-2003  Illinois Finance Authority 86-1091967 452001QBW79 09-18-2003  Illinois Finance Authority 86-1091967 452001QBW 99-18-2003  Illinois Finance Authority 86-1091967 452001Q | Illinois Finance Authority 86-1091967 4520012F0 05-31-2005 36,50  Illinois Finance Authority 86-1091967 452001Q86 05-31-2005 21,20  Illinois Educational Facilities Authority 52-1297563 4520017G9 09-18-2003 12,00  Illinois Finance Authority 86-1091967 452008W79 02-22-2007 25,000  Illinois Finance Authority 86-1091967 90-10918 90-109 | Illinois Finance Authority 86-1091967 452001ZF0 05-31-2005 36,500,000 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Illinois Finance Authority | Illinois Finance Authority | Illinois Finance Authority | Thinois Finance Authority   86-1091967   4520012F0   05-31-2005   36,500,000   IL Ed Facilities Author 07/28/99   1 | No.   No. | (a) Issuer Name | No   No   No   No   No   No   No   No | (a) Issuer Name (b) Issuer EIN (c) CUSIP e (d) Date Issue PIN: (e) Issuer PIN: (f) Description of Purpose (g) Destate (p) Issuer PIN: (p) Description of Purpose (g) Destate (p) Issuer PIN: (p) Description of Purpose (g) Destate (p) Issuer PIN: (p) Description of Purpose (g) Description of P |  |

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

No

Χ

Yes

No

Χ

Χ

Yes

Yes

Yes

No

No

Part III Private Business Use (Continued)

|    |  | Α   |     | ı       | В       |     | C  | ı   | )  |
|----|--|-----|-----|---------|---------|-----|----|-----|----|
|    |  | 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       |         |     |    |     |    |
| b  | Are there any research agreements that may result in private business use of bond-financed property?   |     | Х   |         | х       |     |    |     |    |
| c  | 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   | х   |         |         |     |    |     |    |
| 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 %     |     |    |     |    |
| 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 % |     | 0 841 % |         |     |    |     |    |
| 6  | Total of lines 4 and 5   |     | 0 % |         | 0 841 % |     |    |     |    |
| 7  | Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?  | Х   |     | Х       |         |     |    |     |    |

Part IV Arbitrage

|    |  | Α                  |    | В   |    | 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? |                    | Х  |     | ×  |     | х  |      | ×  |
| 2  | Is the bond issue a variable rate issue?   | X                  |    | X   |    | X   |    | X    |    |
| 3a | Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?                                     |                    | х  |     | ×  |     | ×  | x    |    |
| ь  | Name of provider   | Bank of America NA |    |     |    |     |    |      |    |
| С  | Term of hedge  | 34 9               |    |     |    |     |    | 34 9 |    |
| 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  |      | Х  |
| ь  | 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  |      | х  |
| 6  | Did the bond issue qualify for an exception to rebate?   | х                  |    | ×   |    |     | x  |      | x  |

#### 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 |  |  |  |  |
|--------------|------------------|-------------|--|--|--|--|
|              |                  |             |  |  |  |  |
|              |                  |             |  |  |  |  |
|              |                  |             |  |  |  |  |

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As Filed Data -

DLN: 93493122008212

**Employer identification number** 

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Name of the organization

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

| Elmhur  | rst College                                    |             |           |                   |             |                     |   | 3               | 6-21691    | 45         |            |              |            |
|---|--|-------------|-----------|-------------------|-------------|---------------------|---|-----------------|------------|------------|------------|--------------|------------|
| Part  | Excess Benefit Train Complete if the organizat |             |           |                   |             |                     |   | organi          | zations    | only).     | 40h        |              |            |
|   |  |             |           | res on For        | m 990, i    | art IV, line 25a c  | or∠50,                                    | or Form         | 990-62,    | Part V, I  |            | orrecte      | 42<br>     |
| 1   | (a) Name of disq                               | ualıfıec    | l person  |                   |             | <b>(b)</b> Desc     | ription                                   | of trans        | action     |            | Yes        |              | <u>u</u> - |
|   |  |             |           |                   |             |                     |   |                 |            |            |            | <del> </del> |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            | _            |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   | Inter the amount of tax impos                  | ed on t     | he organ  | nization man      | _           |                     |   |                 | year unde  | r<br>- +   |            |              |            |
|   | ection 4958                                    |             |           |                   |             |                     |   |                 | [          | ·          |            |              | _          |
| 3 -   | Enter the amount of tax, if any                | , on iiii   | e Z, abo  | ve, reimburs      | sea by th   | e organization .    |   |                 |            | · \$       |            |              | _          |
| Part  |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   | Complete if the organi                         | zation a    | ans we re | d "Yes" on F      | orm 990     | ), Part IV, line 26 | , or Fori                                 | n 990-l         | T .        | , line 38  | a          |              |            |
|   |  |             | oan to    |                   |             |                     | (6)                                       | ľn              | (f)        | /ad        | (a)\//rit  | (g)Written   |            |
| (a) Na  | ame of interested person and                   | 1           | om the    | ( <b>c</b> )0 rig |             | (d)Balance due      | (e) In Approve<br>e due default? by board |                 |            | 1          |            |              |            |
|   | purpose  | organ       | ızatıon?  | principal a       | amount      | . ,                 |   | 1               | committee? |            |            |              |            |
|   |  | То          | From      |                   |             |                     | Yes                                       | No              | Yes        | No         | Yes        | No           |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            | 1            |            |
|   |  |             |           |                   |             |                     |   |                 |            | +          |            | +            | _          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |
| Total   |  | <del></del> | · .       |                   | <b>▶</b> \$ |                     |   |                 |            | 1          |            | 1            |            |
| Part 1  |  |             |           |                   | ested I     | Persons.            |   |                 |            |            |            |              | _          |
|   | Complete If the orga                           | nızatı      | on ansv   | wered "Yes        | " on Fo     | rm 990, Part IV     | /, line 2                                 | 27.             |            |            |            |              |            |
|   | (a) Name of interested pers                    | on          | (         |                   |             | een interested per  | rson                                      | ( <b>c)</b> A n | nount of g | rant or ty | ype of ass | stance       |            |
| (1) NA  |  |             | N/A       |                   | ia the or   | ganızatıon          |   |                 |            |            |            | 27,00        | _          |
| (1) NA<br>(2) NA                                      |  |             | N/A       |                   |             |                     |   |                 |            |            |            | 14,60        |            |
| <u>(~ / IV /                                     </u> |  |             | 117       | •                 |             |                     | +   |                 |            |            |            | 1 +,00       | Ť          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              |            |
|   |  |             |           |                   |             |                     |   |                 |            |            |            |              | _          |

### 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 organization | ii alisweled les dii  | i Olili 330, Falt IV, III  | ie 20a, 20b, 0i 20c.          |                             |         |
|-------------------------------|---|----------------------------|-------------------------------|-----------------------------|---------|
| (a) Name of Interested person | <b>(b)</b> Relationship<br>between interested<br>person and the | (c) A mount of transaction | (d) Description of transactio | (e) Sha<br>organız<br>reven | atıon's |
|                               | organization  |                            |                               | Yes                         | No      |
|                               |   |                            |                               |                             |         |
|                               |   |                            |                               |                             |         |
|                               |   |                            |                               |                             |         |
|                               |   |                            |                               |                             |         |
|                               |   |                            |                               |                             |         |
|                               |   |                            |                               |                             |         |

### Part V Supplemental Information

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

| Ident if ier                                     | Return Reference   | Explanation   |
|--|--------------------|---|
| Form 990, Schedule L, Part III, Lines<br>1 and 2 | Interested Persons | Although there may be recipients who are related to persons having an interest in the college, such recipients are selected on an equal, objectively determinable basis with other recipients All students receiving scholarships and fellowships are judged worthy by the college's assessment on the basis of academic achievement, financial need and other similar standards. Any scholarship committee member who has a relationship with any potential recipient of scholarship money is not included in the selection process for that particular candidate. |

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. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service Name of the organization Elmhurst College

**Employer identification number** 

|      |  |                               |  |  | 36-2169145                                 |     |           |     |
|------|--|-------------------------------|--|--|--|-----|-----------|-----|
| Pa   | rt I Types of Property                                       |                               |  |  |  |     |           |     |
|      |  | (a)<br>Check if<br>applicable | (b)<br>Number of Contributions or items<br>contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line | (d)<br>Method of determining of<br>amounts |     | contribut | ion |
| 1    | Art—Works of art   |                               |  |  |  |     |           |     |
| 2    | Art—Historical treasures                                     |                               |  |  |  |     |           |     |
| 3    | Art—Fractional interests                                     |                               |  |  |  |     |           |     |
| 4    | Books and publications                                       |                               |  |  |  |     |           |     |
|      | Clothing and household                                       |                               |  |  |  |     |           |     |
| good |  | Х                             |  | 88,147   | donor valuation                            |     |           |     |
| 6    | Cars and other vehicles .                                    |                               |  |  |  |     |           |     |
| 7    | Boats and planes   |                               |  |  |  |     |           |     |
| 8    | Intellectual property  |                               |  |  |  |     |           |     |
| 9    | Securities—Publicly traded                                   | Х                             | 21   | 191,945  | Cost/Selling Price                         |     |           |     |
| 10   | Securities—Closely held stock                                |                               |  |  |  |     |           |     |
| 11   | Securities—Partnership,<br>LLC, or trust interests .         |                               |  |  |  |     |           |     |
| 12   | Securities—Miscellaneous                                     |                               |  |  |  |     |           |     |
| 13   | Qualified conservation contribution—Historic structures      |                               |  |  |  |     |           |     |
| 14   | Q ualified conservation contribution—Other                   |                               |  |  |  |     |           |     |
| 15   | Real estate—Residential .                                    |                               |  |  |  |     |           |     |
| 16   | Real estate—Commercial                                       |                               |  |  |  |     |           |     |
| 17   | Real estate—Other  |                               |  |  |  |     |           |     |
|      | Collectibles   |                               |  |  |  |     |           |     |
| 19   | Food inventory   | Х                             | 3  | 30,080   | Cost/Selling Price                         |     |           |     |
|      | Drugs and medical supplies                                   |                               |  | ,  | , ,  |     |           |     |
|      | Taxidermy  |                               |  |  |  |     |           |     |
|      | Historical artifacts   |                               |  |  |  |     |           |     |
| 23   | Scientific specimens   |                               |  |  |  |     |           |     |
| 24   | Archeological artifacts                                      |                               |  |  |  |     |           |     |
| 25   | Other ► ( Printing )   | Х                             | 1  | 2,783  | Cost/Selling Price                         |     |           |     |
| 26   | O ther ▶()   |                               |  |  |  |     |           |     |
| 27   | O ther ▶()   |                               |  |  |  |     |           |     |
|      | Other ► ()   |                               |  |  |  |     |           |     |
| 29   | Number of Forms 8283 received by                             | y the org                     | anızatıon durıng the tax yea                           | ar for contributions   |  |     |           |     |
|      | for which the organization complete                          | ed Form 8                     | 3283, Part IV, Donee Ackn                              | owledgement  | 29   |     |           | 0   |
|      |  |                               |  |  |  |     | Yes       | No  |
| 30a  | During the year, did the organization                        | n receiv                      | e by contribution any prope                            | rty reported in Part I, lines  | 1-28 that it                               |     |           |     |
|      | must hold for at least three years f                         | rom the o                     | late of the initial contribution                       | on, and which is not require   | d to be used                               |     |           |     |
|      | for exempt purposes for the entire                           | holdıng p                     | eriod?   |  |  | 30a |           | No  |
|      | If "Yes," describe the arrangement                           |                               |  |  |  |     | .         |     |
| 31   | Does the organization have a gift a                          | cceptano                      | e policy that requires the r                           | review of any non-standard   | contributions?                             | 31  | Yes       |     |
| 32a  | Does the organization hire or use t contributions?           | hırd partı<br>• • •           | es or related organizations                            | to solicit, process, or sell   | non-cash                                   | 32a | Yes       |     |
| Ь    | If "Yes," describe in Part II                                |                               |  |  |  |     |           |     |
| 33   | If the organization did not report re<br>describe in Part II | venues i                      | n column (c) for a type of p                           | roperty for which column (a  | ) is checked,                              |     |           |     |

### 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  |
|--|------------------|--|
| Use of Third Party   | , , , ,          | All stock donation, unless otherwide stipulated by the donor, are sold as soon as possible after receipt by third party vendor UBS financial services, inc |
| Noncash Property Contributed for<br>Which No Revenues Reported | , , ,            | The college does not capitalize the cost of library books or works of art as assets, nor does it assign a value to such items received as gifts            |

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493122008212

III E O

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

2010

Open to Public
Inspection

| Elmhurst College | Employer identification number |
|------------------|--------------------------------|
|                  | 36-2169145                     |
|                  |                                |
|                  |                                |

| ldentifier                                       | Return<br>Reference   | Explanation   |
|--|-----------------------|---|
| Other Program Services (Scholarships and Grants) | Form 990,<br>Part III | SCHOLARSHIPS AND GRANTS - WE ASSIST OUR STUDENTS WITH A COMPREHENSIVE RANGE OF FINANCIAL AID PROGRAMS THESE INCLUDE MERIT-BASED SCHOLARSHIPS, NEED-BASED GRANTS AND LOANS, AND PART-TIME CAMPUS EMPLOYMENT APPROXIMATELY 86% OF THE STUDENTS WHO ENTERED COLLEGE IN THE FALL RECEIVED FINANCIAL AID |

| ldentifier                    | Return<br>Reference            | Explanation  |
|-------------------------------|--------------------------------|--|
| Form 990<br>Review<br>Process | Form 990, Part<br>VI, Line 11b | The final Form 990 and its various schedules were reviewed by the Key Officers of the organization prior to making it available to the Board of Trustees. After the Key Officers reviewed the form it was distributed to the Audit Committee of the Trustees at their Spring meeting. Identified necessary changes were incorporated following the board review process and a final copy of the filing was made available to all members of the board of trustees prior to filing. |

| ldentifier                        | Return<br>Reference               | Explanation   |
|-----------------------------------|-----------------------------------|---|
| Conflict of<br>Interest<br>Policy | Form 990,<br>Part VI, Line<br>12c | Conflict of interest forms are sent to Trustees, Officers, Key Employees (as applicable) and others for completion The completed forms are returned to and reviewed by the Board Audit Committee Chair. The Audit Committee Chair together with the Audit Committee is responsible for administration of this policy. Matters of concern are brought to the Chair of the Board of Trustees or the President Approval of compensation transactions and other transactions covered by the policy are done through a review composed entirely of individuals who do not have any conflict of interest with respect to the arrangement or transaction at hand. Persons determined to have a conflict of interest are prohibited from participating in the governing body's deliberations and decisions in transactions which may relate to the conflict. They rely upon independent comparability data or valuations prior to making a determination. Matters related to compensation rely on external expertise in higher education. |

| ldentifier                        | Return<br>Reference               | Explanation  |
|-----------------------------------|-----------------------------------|--|
| Compensation<br>Review<br>Process | Form 990,<br>Part VI, Line<br>15a | The President's salary is reviewed annually and determined by a process established by the Board of Trustees The process begins with obtaining data from the College and University Professional Association for Human Resources (CUPA-HR) annual Salary Survey, periodically the Yaffe & Company Executive Compensation Survey, and the form 990 tax returns of comparable institutions are also reviewed. These surveys as well as the economic condition of Elmhurst College and other information concerning higher education are analyzed by the Human Resources Committee of the Board of Trustees with the assistance of the Vice President for Finance and Administration and periodically with input from an external consultant. The Human Resources Committee performs an annual formal evaluation process of the President in executive session. Performed in fiscal year 2011, every three years the committee performs an extensive evaluation involving various faculty, staff, students and external constituents. The Human Resources Committee recommends the salary revision to the full Board of Trustees who provides the final approval. Minutes of the Human Resources Committee document the determinations made during executive session. Top management's (Vice Presidents and Deans) salaries are reviewed annually by a process similar to all other employees. The President performs a formal evaluation. Using the CUPA-HR annual Salary Survey, the annual performance evaluation and the financial constraints of the College, the President then determines the salary revisions which are reviewed by the Human Resources. Committee of the Board of Trustees. All other key employee salaries are reviewed annually by a similar process as the top management. Formal performance evaluations are performed by the supervisor of each key employee with recommendations for salary revisions provided to the top management employee over that area of responsibility. The evaluations and recommendations together with the comparison to the CUPA-HR annual Salary Survey and the prese |

| ldentifier  | Return<br>Reference              | Explanation   |
|---|----------------------------------|---|
| How Documents<br>are Made<br>Available to the<br>Public | Form 990,<br>Part VI, Line<br>19 | The governing documents and financial statements of the college are available upon request, and financial statements are provided to various State Agencies, US Department of Education, various banks and others per agreement. In addition, the Annual Form 990 Information Return and 990-T Tax Return and all related documents and schedules are available to the public upon request. The conflict of interest policy is sent annually to all members of the Board of Trustees, Officers, Key Employees and other identified employees. |

| ldentifier   | Return<br>Reference          | Explana  | ation  |
|--|------------------------------|--|--|
| Other Changes in Net<br>Assets or Fund<br>Balances | Form 990, Part<br>XI, Line 5 | Net Unrealized gains(losses) on investment interest in trusts \$ 440,942 Change in interest rat Total \$ 8,368,791 | \$ 6,142,248 Change in fair value of beneficial e sw ap agreement \$ 1,785,601 |

| ldentifier  | Return<br>Reference       | Explanation  |
|---|---------------------------|--|
| SUPPLEMENTAL<br>INFORMATION<br>ON TAX-EXEMPT<br>BONDS | SCHEDULE<br>K, PART I-III | PART I Information for Part I comes from the tax agreement and Form 8038 for each issue. The issuer EIN on the Forms 8038 of each of the 2005 transactions is the EIN for the Illinois Educational Facilities Authority (the issuer of the original 1998 and 1999 Bonds which were treated for Federal tax purposes as being currently refunded by the 2005 bonds.) Although the 2005 Bonds still bear the name of the Illinois Educational Facilities Authority, the EIN of the Illinois Finance Authority should be used for Schedule K and is listed on the attached draft of Schedule K. The college will amend and file Forms 8038 to include the Illinois Finance Authority EIN for each of the 2005 Bonds to be consistent with Schedule K. The description of purpose for each issue is listed in Section 2.1 of the tax agreement executed by the college in connection with each issue. Additional information for the 2005 issues comes from paragraph 1 on page 1 of the tax agreement for each of those 2005 issues (containing information on the reissuance of the 1999 Bonds and the 1998 Bonds, respectively), Section 2.1 of the tax agreements for the 1999 Bonds and the 1998 Bonds (the description of the projects financed by such bonds) and the fourth paragraph of the Certificate Regarding the Financed Properties and Expenditure of Funds, executed by the college in connection with the issuance of the 1999 Bonds (which contains the name and description of the 1991 Bonds refunded by the 1999 Bonds. The amount of each of the 2005 issues benefitting the college (as included in the description of purposes) comes from Schedule A to each of the Forms 8038 submitted in connection with the 2005 issues. PART II Information for Part II, Columns B and C comes from the Form 8038 for such issues. Information for Part II, Columns B and C comes from the Form 8038 for such issues Information for Part II, Column D comes from the rebate report prepared by Chapman and Cutler LLP for the 2003 Bonds PART III The information in Part III comes from the College Potential pri |

| ldentifier                             | Return<br>Reference                      | Explanation   |
|--|--|---|
| DESCRIPTION OF TAX EXEMPT BOND PURPOSE | SCHEDULE K,<br>PART I, COL<br>(F) LINE A | THE BONDS AND THE 1998 BONDS (DEFINED BELOW) WERE ISSUED IN THE AMOUNT OF \$36,500,000 TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS ELMHURST COLLEGE BENEFITTED FROM \$15,000,000 OF THE PROCEEDS OF THE BONDS THE ISSUER OF THE BONDS CHANGED THE MANDATORY TENDER PROVISIONS OF THE INDENTURE GOVERNING PREVIOUSLY ISSUED BONDS (THE "1998 BONDS") THEREBY RESULTING IN THE VARIABLE RATE DEMAND REVENUE BONDS, SERIES 1998 (ACVCULTURAL POOLED FINANCING PROGRAM) ORIGINALLY ISSUED BY THE ILLINOIS EDUCATIONAL FACILITIES AUTHORITY ON MARCH 25, 1998 AS BEING ASSUMED TO BE REISSUED AND CURRENTLY REFUNDED FOR FEDERAL INCOME TAX PURPOSES ON MAY 31, 2005 THE PORTION OF THE PROCEEDS OF THE 1998 BONDS WHICH WERE BORROWED BY ELMHURST COLLEGE WERE USED TO FINANCE, REFINANCE AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES |

| ldentifier                             | Return<br>Reference                          | Explanation   |
|--|--|---|
| DESCRIPTION OF TAX EXEMPT BOND PURPOSE | SCHEDULE<br>K, PART I,<br>COL (F),<br>LINE B | THE BONDS AND THE 1999 BONDS (DEFINED BELOW) WERE ISSUED IN THE AMOUNT OF \$21,200,000 TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS ELMHURST COLLEGE BENEFITTED FROM \$5,000,000 OF THE PROCEEDS OF THE BONDS THE ISSUER OF THE BONDS CHANGED THE MANDATORY TENDER PROVISIONS OF THE INDENTURE GOVERNING PREVIOUSLY ISSUED BONDS (THE "1999 BONDS") THEREBY RESULTING IN THE VARIABLE RATE DEMAND REVENUE BONDS, SERIES 1999 (ACVCULTURAL POOLED FINANCING PROGRAM) ORIGINALLY ISSUED BY THE ILLINOIS EDUCATIONAL FACILITIES AUTHORITY ON JULY 28, 1999 AS BEING ASSUMED TO BE REISSUED AND CURRENTLY REFUNDED FOR FEDERAL INCOME TAX PURPOSES ON MAY 31 2005 THE PORTION OF THE PROCEEDS OF THE 1999 BONDS WHICH WERE BORROWED BY ELMHURST COLLEGE WERE USED TO (I) FINANCE, REFINANCE, AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES, AND (II) REFUNDED THE OUTSTANDING ILLINOIS EDUCATIONAL FACILITIES AUTHORITY REVENUE BONDS, ELMHURST COLLEGE SERIES 1991 WHICH WERE ISSUED ON MAY 16, 1991 AND FINANCED THE COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING, IMPROVING AND REMODELING OF EDUCATIONAL FACILITIES |

| ldentifier                                   | Return<br>Reference                       | Explanation   |
|--|---|---|
| DESCRIPTION OF<br>TAX EXEMPT BOND<br>PURPOSE | SCHEDULE K,<br>PART I, COL<br>(F), LINE C | THE BONDS WERE ISSUED TO (I) FINANCE, REFINANCE, AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT OR EQUIPPING OF EDUCATIONAL FACILITIES, AND (II) REFINANCE TAXABLE DEBT THAT ORIGINALLY FINANCED A PORTION OF THE COSTS OF A SPRINKLER SYSTEM IN RESIDENCE HALLS ACCORDINGLY, A PORTION OF THIS ISSUE CURRENTLY REFUNDED TAXABLE DEBT OF ELMHURST COLLEGE FOR FEDERAL TAX PURPOSES |

| ldentifier                                   | Return<br>Reference                       | Explanation   |
|--|---|---|
| DESCRIPTION OF<br>TAX EXEMPT BOND<br>PURPOSE | SCHEDULE K,<br>PART I, COL (F),<br>LINE D | THE BONDS WERE ISSUED TO (I) FINANCE, REFINANCE OR REIMBURSE THE COSTS OF ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES, AND (II) REFINANCE TAXABLE DEBT THAT ORIGINALLY FINANCED EDUCATIONAL FACILITIES ACCORDINGLY, A PORTION OF THIS ISSUE CURRENTLY REFUNDED TAXABLE DEBT OF ELMHURST COLLEGE FOR FEDERAL TAX PURPOSES |

| ldentifier              | Return Reference                         | Explanation   |
|-------------------------|--|---|
| PRIVATE<br>BUSINESS USE | SCHEDULE K, PART<br>III, COL (D), LINE 6 | ELMHURST COLLEGE IS CALCULATING PRIVATE BUSINESS USE ON AN ANNUAL AND CUMULATIVE BASIS TO ENSURE THAT PRIVATE BUSINESS USE OF FINANCED PROPERTY WILL NOT EXCEED PERMISSIBLE AMOUNTS OF PRIVATE BUSINESS USE |

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

| (A)<br>Name and Title                                 | (B)<br>Average<br>hours | Posi<br>t                         | ((<br>tion (<br>hat a | che     | )            |                              |        | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E)<br>Reportable<br>compensation                     | <b>(F)</b><br>Estimated<br>amount of other                               |
|---|-------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
|   | per<br>week             | Individual trustee<br>or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former |  | from related<br>organizations<br>(W- 2/1099-<br>MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |
| Virginia Prochaska<br>Trustee                         | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Jean E Sander<br>Trustee                              | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Rudolf G Schade Jr<br>Trustee                         | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Dr Homer H Schmitz<br>Trustee                         | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Eva W Tameling<br>Trustee                             | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Rhonda Thomas<br>Trustee                              | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| John R Tritt<br>Trustee                               | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Thomas N Tyrrell<br>Trustee                           | 2 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Rev Robert O Ullman<br>Trustee                        | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Russell G Weigand<br>Trustee                          | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| James S Yerbic<br>Trustee                             | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| William C Campbell<br>TRUSTEE(Last Day 10/31/2010)    | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| William J McCarter<br>TRUSTEE(Last day 04/21/2011)    | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Harold E Pendexter Jr<br>TRUSTEE(Last Day 01/27/2011) | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| John W Terrill Jr<br>TRUSTEE(LAST DAY 12/31/2010)     | 0 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Stephen Alan Ray<br>President                         | 60 0                    |                                   |                       | x       |              |                              |        | 259,807  | 0   | 102,327  |
| Denise P Jones<br>Sr V P for Finance & Admin          | 60 0                    |                                   |                       | х       |              |                              |        | 162,062  | 0   | 41,967   |
| Alzada J Tipton<br>VP for Academinc Affairs           | 60 0                    |                                   |                       |         | х            |                              |        | 154,317  | 0   | 24,572   |
| Peggy Sandgren<br>VP for Development/Alumnı           | 60 0                    |                                   |                       |         | х            |                              |        | 152,983  | 0   | 13,497   |
| James W Winters<br>VP for Communication/Pub Rel       | 60 0                    |                                   |                       |         |              | х                            |        | 132,382  | 0   | 19,545   |
| James Kulich<br>VP & Chief Information Officer        | 60 0                    |                                   |                       |         |              | х                            |        | 131,462  | 0   | 23,583   |
| Gary F Rold<br>Dean of Admissions                     | 60 0                    |                                   |                       |         |              | х                            |        | 129,521  | 0   | 49,781   |
| Ellen-Marie Bonner<br>Exec Director of Development    | 60 0                    |                                   |                       |         |              | х                            |        | 119,180  | 0   | 6,829  |
| Lawrence B Carroll<br>Exec Director of CPE            | 60 0                    |                                   |                       |         |              | ×                            |        | 117,454  | 0   | 36,166   |

Software ID: Software Version:

EIN: 36-2169145
Name: Elmhurst College

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

| Compensated Employees, and Independent Contractors |                                |                                   |                       |         |              |                              |        |   |   |  |
|--|--------------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|---|--|
| (A)<br>Name and Title                              | (B)<br>Average<br>hours<br>per |                                   | tion (<br>that a      | che     | )            |                              |        | ( <b>D)</b><br>Reportable<br>compensation<br>from the | <b>(E)</b> Reportable compensation from related | <b>(F)</b> Estimated amount of other compensation        |
|  | week                           | Individual trustee<br>or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | organization (W-<br>2/1099-MISC)                      | organizations<br>(W- 2/1099-<br>MISC)           | from the<br>organization and<br>related<br>organizations |
| The Honorable William J Bauer<br>Trustee           | 0 0                            | ×                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Julius Wesley Becton III<br>Trustee                | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| David R Bertran<br>Trustee                         | 10                             | ×                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| William W Boyd<br>Trustee                          | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Larry A Braskamp<br>Trustee                        | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Alan J Brinkmeier<br>Trustee                       | 1 0                            | X                                 |                       |         |              |                              |        | О   | 0   | 0  |
| Kenne P Bristol<br>Chair - Truestee                | 3 0                            | Х                                 |                       | х       |              |                              |        | 0   | 0   | 0  |
| John G Cashman<br>Trustee                          | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Julie Curran<br>Trustee                            | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Sharon Reese Dalenberg<br>Trustee                  | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Joel G Herter<br>Trustee                           | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Mary Lou Higgerson<br>Trustee                      | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Fareed A Khan<br>Trustee                           | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Thomas A Kloet<br>Trustee                          | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Alfred N Koplın<br>Trustee                         | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Dr George H Langeler<br>Trustee                    | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| J Clifford Lenahan Jr<br>Trustee                   | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Dr Eugene M Lerner<br>Trustee                      | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Barbara Lucks<br>Vice Chair - Trustee              | 1 0                            | Х                                 |                       | ×       |              |                              |        | 0   | 0   | 0  |
| Ronald L Luken<br>Trustee                          | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Dr Ralph E Lundgren<br>Trustee                     | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Hugh H McLean<br>Trustee                           | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Lamell J McMorris<br>Trustee                       | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Edward J Momkus<br>Trustee                         | 1 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| Dennis J Patterson<br>Trustee                      | 0 0                            | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |