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Form **990**Department of the Treasury
Internal Revenue Service**EXTENSION GRANTED TO FEBRUARY 15, 2012**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No. 1545-0047

2010Open to Public
Inspection

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

A For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011****B** Check if
applicable

- ☐ Address
change
- ☐ Name
change
- ☐ Initial
return
- ☐ Termin-
ated
- ☐ Amended
return
- ☐ Applica-
tion
pending

C Name of organization**BELLEVUE COLLEGE FOUNDATION**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

3000 LANDERHOLM CIRCLE S.E.

Room/suite

City or town, state or country, and ZIP + 4

BELLEVUE, WA 98007-6484**F** Name and address of principal officer **AL DUNNELL****3000 LANDERHOLM CIRCLE SE, BELLEVUE, WA 980****D** Employer identification number**91-1051671****E** Telephone number**(425) 564-5074****G** Gross receipts \$**2,975,722.****H(a)** Is this a group return

for affiliates?

☐ Yes☒ No**H(b)** Are all affiliates included?☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.BELLEVUECOLLEGE.EDU/FOUNDATION****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1978** **M** State of legal domicile: **WA****Part I Summary****1** Briefly describe the organization's mission or most significant activities: **SUPPORTS BELLEVUE COLLEGE, ITS FACULTY AND ITS STUDENTS. (SEE FULL DESCRIPTION IN SCHEDULE O.)****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets**3** Number of voting members of the governing body (Part VI, line 1a)**3****32****4** Number of independent voting members of the governing body (Part VI, line 1b)**4****32****5** Total number of individuals employed in calendar year 2010 (Part V, line 2a)**5****0****6** Total number of volunteers (estimate if necessary)**6****0****7a** Total unrelated business revenue from Part VIII, column (C), line 12**7a****0.****b** Net unrelated business taxable income from Form 990-T, line 34**7b****0.****8** Contributions and grants (Part VIII, line 1h)**Prior Year****2,072,993.****Current Year****2,653,722.****9** Program service revenue (Part VIII, line 2g)**0.****25,752.****10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**77,563.****147,202.****11** Other revenue (Part VIII, column (A), lines 5-8d, 8c, 9c, 10c, and 11e)**24,600.****0.****12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**2,175,156.****2,826,676.****13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**376,304.****682,037.****14** Benefits paid to or for members (Part IX, column (A), line 4)**0.****0.****15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**186,323.****235,351.****16a** Professional fundraising fees (Part IX, column (A), line 11e)**55,335.****12,300.****b** Total fundraising expenses (Part IX, column (B), line 25)**252,320.****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**242,176.****281,624.****18** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)**860,138.****1,211,312.****19** Revenue less expenses. Subtract line 18 from line 12**1,315,018.****1,615,364.****20** Total assets (Part X, line 16)**Beginning of Current Year****4,781,012.****End of Year****6,317,997.****21** Total liabilities (Part X, line 26)**31,291.****142,772.****22** Net assets or fund balances. Subtract line 21 from line 20**4,749,721.****6,175,225.****Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

Date

AL DUNNELL, TREASURER

Type or print name and title

Paid

Print/Type preparer's name

ROB KLEE

Preparer's signature

Date

Check
if
self-employed

PTIN

Preparer
Use OnlyFirm's name ▶ **SMITH BUNDAY BERMAN BRITTON, P.S.**

Firm's EIN ▶

Firm's address ▶ **11808 NORTHUP WAY, SUITE 240**Phone no. **(425) 827-8255****BELLEVUE, WA 98005-1959**

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

☒ Yes☐ No

032001 02-22-11

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**SCANNED FEB 15 2012
Activities & Governance
Revenue

Expenses

Net Assets or
Fund Balances

25

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐

- 1 Briefly describe the organization's mission

THE MISSION OF THE BELLEVUE COLLEGE FOUNDATION IS TO RAISE FUNDS TO SUPPORT QUALITY EDUCATION AND LEARNING OPPORTUNITIES FOR ALL BELLEVUE COLLEGE STUDENTS.

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

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

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

If "Yes," describe these changes on Schedule O.

- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

- 4a (Code:) (Expenses \$
- 525,967.
- including grants of \$
- 514,144.
-) (Revenue \$
- 25,752.
-)

BELLEVUE COLLEGE FOUNDATION ("BCF") PROVIDED 376 GRANTS TO BELLEVUE COLLEGE AND TO A WIDE RANGE OF ITS PROGRAMS, ACTIVITIES AND DEPARTMENTS TO ENABLE INNOVATIONS, ENHANCEMENTS AND EXCELLENCE THAT WOULD NOT HAVE BEEN POSSIBLE RELYING SOLELY ON DIMINISHING STATE FUNDING AND ON TUITION PAID BY STUDENTS. AMONG THESE GRANTS WERE 22 COMPETITIVE AWARDS OFFERED BY BCF TO FACULTY WHO DEVELOPED PROPOSALS FOR SPECIFIC NEW PROGRAMS, FOR CURRICULUM ENHANCEMENTS AND FOR NEW OR ENHANCED INSTRUCTIONAL RESOURCES. PROGRAM REVENUE REFLECTS 680 INTERNATIONAL STUDENTS ENROLLED AT BELLEVUE COLLEGE UNDER A SHARED FUNDING AGREEMENT BETWEEN BCF AND THE COLLEGE.

- 4b (Code:) (Expenses \$
- 165,116.
- including grants of \$
- 161,404.
-) (Revenue \$)

THE BELLEVUE COLLEGE FOUNDATION ("BCF") AWARDED SCHOLARSHIPS TO NEEDY, DESERVING AND CAPABLE STUDENTS TO ENABLE THEM TO ATTEND BELLEVUE COLLEGE, TO EXCEL IN THEIR STUDIES OR TO CONTINUE THEIR STUDIES WHEN FACED WITH UNEXPECTED FINANCIAL CRISES. TUITION, FEES AND/OR BOOK EXPENSE SCHOLARSHIPS WERE AWARDED TO 97 INDIVIDUAL STUDENTS MAKING IT POSSIBLE FOR THEM TO PURSUE DEGREES. ADDITIONALLY, 66 YOUNG FAMILIES OR SINGLE-PARENT BELLEVUE COLLEGE STUDENTS WERE AWARDED CHILDCARE SCHOLARSHIPS PROVIDING CARE FOR YOUNG CHILDREN TO ENABLE THE PARENTS TO ATTEND CLASSES. EMERGENCY AID WAS EXTENDED TO 175 STUDENTS TO MAKE IT POSSIBLE FOR THEM TO CONTINUE THEIR STUDIES WHEN FACED WITH SUDDEN, UNEXPECTED CIRCUMSTANCES THAT WOULD OTHERWISE LIKELY HAVE CAUSED THEM TO ABANDON THEIR EDUCATIONS.

- 4c (Code:) (Expenses \$
- 6,638.
- including grants of \$
- 6,489.
-) (Revenue \$)

BELLEVUE COLLEGE FOUNDATION ("BCF") ENCOURAGES, RECOGNIZES AND REWARDS THE CREATIVE LEADERSHIP, CARE FOR STUDENTS, AND DRIVE FOR EXCEPTIONAL ACCOMPLISHMENTS EMBODIED IN THE FULL-TIME AND PART-TIME FACULTY, THE STAFF AND THE ADMINISTRATORS OF BELLEVUE COLLEGE. DURING THIS YEAR 6 INDIVIDUALS, NOMINATED BY THEIR PEERS AND THEIR STUDENTS, WERE RECOGNIZED WITH BCF'S "MARGIN OF EXCELLENCE" AWARDS FOR THEIR EXCEPTIONAL AND INSPIRATIONAL DEDICATION AND SERVICE TO STUDENTS, TO STUDENT SUCCESS AND TO BELLEVUE COLLEGE.

- 4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

- 4e Total program service expenses
- 697,721.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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 United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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 United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Form 990 (2010)

Part IV Checklist of Required Schedules (continued)

	Yes	No
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 X	
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 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 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	X
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 through 24d and complete Schedule K. If "No," go to line 25	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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	X
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	X
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	X
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	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c 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	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
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	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
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 X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
a 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 X	
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	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38 X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	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		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Form 990 (2010)

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

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

☒**Section 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	1a	32
b Enter the number of voting members included in line 1a, above, who are independent	1b	32
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	X
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	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
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	X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X
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	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
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	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
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	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **WA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **PAUL FEAVEL AT BELLEVUE COLLEGE - (425) 564-2386**
3000 LANDERHOLM CIRCLE SE, BELLEVUE, WA 98007

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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. 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 organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PETER ADLER BOARD MEMBER	2.00	X						0.	0.	0.
ROBERT MCKENNA BOARD MEMBER	2.00	X						0.	0.	0.
PAUL SWEGLE SECRETARY	2.00	X		X				0.	0.	0.
JOHN STUART CALHOUN TREASURER	4.00	X		X				0.	0.	0.
DALE KING PRESIDENT	4.00	X		X				0.	0.	0.
LAURA CELIS BOARD MEMBER	2.00	X						0.	0.	0.
JIM CHESEMORE BOARD MEMBER	2.00	X						0.	0.	0.
MIKE HUMPHRIES BOARD MEMBER	2.00	X						0.	0.	0.
SOPHIE HAGER HUME BOARD MEMBER	2.00	X						0.	0.	0.
CAROL TAYLOR BOARD MEMBER	2.00	X						0.	0.	0.
BOB ALEXANDER BOARD MEMBER	2.00	X						0.	0.	0.
SHIV BATRA BOARD MEMBER	2.00	X						0.	0.	0.
CHRISTINE BENSON BOARD MEMBER	2.00	X						0.	0.	0.
SARAH LANGTON BOARD MEMBER	2.00	X						0.	0.	0.
LOUISE COOLEY BOARD MEMBER	2.00	X						0.	0.	0.
COURTNEY COURTER BOARD MEMBER	2.00	X						0.	0.	0.
DON GRANT BOARD MEMBER	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
AL DUNNELL BOARD MEMBER	2.00	X						0.	0.	0.
MICHAEL KALIAN BOARD MEMBER	2.00	X						0.	0.	0.
BILL KENT PRESIDENT - ELECT	4.00	X		X				0.	0.	0.
STEVE LITZOW BOARD MEMBER	2.00	X						0.	0.	0.
CYRUS HABIB BOARD MEMBER	2.00	X						0.	0.	0.
CISCO MALPARTIDA SMITH BOARD MEMBER	2.00	X						0.	0.	0.
AMY HEDIN BOARD MEMBER	2.00	X						0.	0.	0.
ANGELA LEPLEY BOARD MEMBER	2.00	X						0.	0.	0.
STAN ROSEN BOARD MEMBER	2.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	142,952.	11,303.
d Total (add lines 1b and 1c)								0.	142,952.	11,303.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
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		X

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. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2010)

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
FAITH ROLAND BOARD MEMBER	2.00	X						0.	0.	0.
JOLANNE STANTON BOARD MEMBER	2.00	X						0.	0.	0.
RUDIGER (RUDY) WOLF BOARD MEMBER	2.00	X						0.	0.	0.
STACIE WYSS-SCHOENBORN BOARD MEMBER	2.00	X						0.	0.	0.
CARMEN AGUIAR BOARD MEMBER	2.00	X						0.	0.	0.
ROBIN NELSON BOARD MEMBER, SCHOLARSHIP CHAIR	4.00	X						0.	0.	0.
SAM CHUGHTAI BOARD MEMBER	2.00	X						0.	0.	0.
JIM COUGHLIN BOARD MEMBER	2.00	X						0.	0.	0.
RAMESH RAO BOARD MEMBER	2.00	X						0.	0.	0.
VICKI ORRICO EX-OFFICIO (NON VOTING)	1.00	X						0.	0.	0.
GAYNOR HILLS EXECUTIVE DIRECTOR	20.00			X				0.	95,816.	6,434.
SUSAN KINGSBURY-COMEAU FOUNDATION BUSINESS MANAGER	20.00			X				0.	47,136.	4,869.
Total to Part VII, Section A, line 1c									142,952.	11,303.

Part V Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,653,722.			
	g	Noncash contributions included in lines 1a-1f \$		17,881.			
	h	Total. Add lines 1a-1f		2,653,722.			
Program Service Revenue	2 a	INTERNT'L STUDENT SERV	Business Code 561000	25,752.	25,752.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		25,752.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		144,508.		
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6 a		Gross Rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7 a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 151,740.				
b		Less. cost or other basis and sales expenses	149,046.				
c		Gain or (loss)	2,694.				
d		Net gain or (loss)		2,694.		2,694.	
8 a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
b		Less: direct expenses	b				
c		Net income or (loss) from fundraising events					
9 a		Gross income from gaming activities. See Part IV, line 19	a				
b		Less. direct expenses	b				
c		Net income or (loss) from gaming activities					
10 a		Gross sales of inventory, less returns and allowances	a				
b	Less. cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		2,826,676.	25,752.	0.	147,202.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	514,144.	514,144.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	167,893.	167,893.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	57,529.	1,930.	42,088.	13,511.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	140,046.		86,425.	53,621.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,992.		577.	3,415.
9 Other employee benefits	22,454.		12,567.	9,887.
10 Payroll taxes	11,330.		5,718.	5,612.
11 Fees for services (non-employees):				
a Management				
b Legal	15,984.	11,229.	3,875.	880.
c Accounting	22,049.		22,049.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	12,300.			12,300.
f Investment management fees	18,117.		18,117.	
g Other				
12 Advertising and promotion	4,038.			4,038.
13 Office expenses	40,644.	2,525.	15,935.	22,184.
14 Information technology				
15 Royalties				
16 Occupancy	525.			525.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	5,036.		5,036.	
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.)				
a MEALS (DONORS AND ADMIN	98,360.		6,885.	91,475.
b BAD DEBT EXPENSE (PLEDG	38,866.		38,866.	
c DONOR RECOGNITION WALL	27,374.			27,374.
d DONOR RECOGNITION GIFTS	5,960.			5,960.
e MISCELLANEOUS	4,671.		3,133.	1,538.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	1,211,312.	697,721.	261,271.	252,320.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	229,096.	1	101,998.
	2 Savings and temporary cash investments	313,647.	2	309,611.
	3 Pledges and grants receivable, net	660,075.	3	426,169.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	15,690.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	3,578,194.	11	3,961,314.
	12 Investments - other securities. See Part IV, line 11.		12	
	13 Investments - program-related. See Part IV, line 11.		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11.	0.	15	1,503,215.
16 Total assets. Add lines 1 through 15 (must equal line 34).	4,781,012.	16	6,317,997.	
Liabilities	17 Accounts payable and accrued expenses	16,464.	17	37,295.
	18 Grants payable	14,827.	18	30,477.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D.	0.	25	75,000.
	26 Total liabilities. Add lines 17 through 25.	31,291.	26	142,772.
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		247,608.	27	312,115.
28 Temporarily restricted net assets		2,604,529.	28	2,429,554.
29 Permanently restricted net assets		1,897,584.	29	3,433,556.
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		4,749,721.	33	6,175,225.
34 Total liabilities and net assets/fund balances		4,781,012.	34	6,317,997.

Form 990 (2010)

Part XI Reconciliation of Net Assets

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	2,826,676.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,211,312.
3	Revenue less expenses Subtract line 2 from line 1	3	1,615,364.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,749,721.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-189,860.
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	6,175,225.

Part XII Financial Statements and Reporting

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

☒

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

BELLEVUE COLLEGE FOUNDATION

Employer identification number

91-1051671

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

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

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 ☒ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h ☐ Provide the following information about the supported organization(s).

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	593,978.	636,752.	691,260.	862,569.	934,141.	3718700.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	593,978.	636,752.	691,260.	862,569.	934,141.	3718700.
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)						81,185.
6 Public support. Subtract line 5 from line 4						3637515.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	593,978.	636,752.	691,260.	862,569.	934,141.	3718700.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	158,971.	181,042.	104,153.	109,859.	144,508.	698,533.
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)			10,748.	24,600.		35,348.
11 Total support. Add lines 7 through 10						4452581.
12 Gross receipts from related activities, etc. (see instructions)					12	25,752.
13 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	81.69	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	81.48	%
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2010

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 in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

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

b 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. ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MANAGEMENT FEES

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

BELLEVUE COLLEGE FOUNDATION

Employer identification number

91-1051671

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

a ☐ Public exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Other _____c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,897,584.	1,861,134.	1,849,954.		
b Contributions	1,535,972.	36,450.	11,180.		
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	3,433,556.	1,897,584.	1,861,134.		

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

0.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) FUNDS HELD IN TRUST BY UNRELATED OUTSIDE ORGANIZATIONS	1,503,215.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	1,503,215.

Part X Other Liabilities. See Form 990, Part X, line 25

1.	(a) Description of liability	(b) Amount
(1)	Federal income taxes	
(2)	REFUNDABLE ADVANCE RELATED TO	
(3)	CONTINGENT PLEDGE	75,000.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶		75,000.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,826,676.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,211,312.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,615,364.
4	Net unrealized gains (losses) on investments	4	386,531.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-191,298.
9	Total adjustments (net) Add lines 4 through 8	9	195,233.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	1,810,597.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	3,210,843.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	386,531.
b	Donated services and use of facilities	2b	166,351.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	22,582.
e	Add lines 2a through 2d	2e	575,464.
3	Subtract line 2e from line 1	3	2,635,379.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	191,297.
c	Add lines 4a and 4b	4c	191,297.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,826,676.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,400,246.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	166,351.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	22,583.
e	Add lines 2a through 2d	2e	188,934.
3	Subtract line 2e from line 1	3	1,211,312.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,211,312.

Part XIV Supplemental Information

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

PART V, LINE 4: THE PURPOSE OF THE ENDOWMENT FUNDS IS TO PROVIDE

CURRENT INCOME FOR THE PURPOSES OF FUNDING SCHOLARSHIPS AND OTHER PROGRAM ACTIVITIES.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

SECTION 481(A) ADJUSTMENT - YEAR 2 -189,859.

OTHER -1,439.

TOTAL TO SCHEDULE D, PART XI, LINE 8 -191,298.

Part XIV Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INTERNALLY GENERATED CUSTODIAL FEES REMOVED FROM EXPENSES 22,582.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SECTION 481(A) ADJUSTMENT - CHANGE IN ACCOUNTING FROM CASH

TO ACCRUAL 189,859.

OTHER 1,438.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 191,297.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

INTERNALLY GENERATED CUSTODIAL FEES REMOVED FROM EXPENSES 22,582.

OTHER 1.

TOTAL TO SCHEDULE D, PART XIII, LINE 2D 22,583.

Name of the organization

Employer identification number
91-1051671

BELLEVEUE COLLEGE FOUNDATION

Part I	General Information on Grants and Assistance
--------	--

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any
----------------	--

Organization	Amount	Comments
U.S. Department of Justice	\$5,000	Part II can be duplicated if additional space is needed

[illegible]

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

3 Enter total number of other organizations

U Enter total number of errors on Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

27

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.
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS FOR TUITION REDUCTION AND CHILDCARE SUBSIDIES	163	156,304.	0.		
SCHOLARSHIPS IN THE FORM OF EMERGENCY AID	175	5,100.	0.		
AWARDS TO BELLEVUE COLLEGE FACULTY AND STAFF	6	6,489.	0.		

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

SCHEDULE I, PART I, LINE 2: RECIPIENTS OF GRANTS FROM THE BELLEVUE COLLEGE

FOUNDATION ARE REQUIRED TO FILE REPORTS SUMMARIZING HOW FUNDS WERE USED AND EVALUATING THE PROJECT UPON COMPLETION. FOR MAJOR GRANTS, BCF STAFF, INCLUDING THE EXECUTIVE DIRECTOR, VERIFY THE ACTIVITY IN A VARIETY OF WAYS, INCLUDING, BUT NOT LIMITED TO VISITING THE PROGRAM, TOURING THE FACILITY, EXAMINING THE EQUIPMENT OR WITNESSING THE USE OF THE GRANT MONEY, AND ATTENDING THE EVENTS RELATED TO THE USE OF FUNDS.

PART III, ASSISTANCE TO INDIVIDUALS: SCHOLARSHIP AWARDS ARE REMITTED

Part IV Supplemental Information

TO BELLEVUE COLLEGE WITH FUNDS DEPOSITED INTO THE RECIPIENT'S ON-CAMPUS ACCOUNT. STUDENT RECIPIENTS CAN ONLY ACCESS THEIR ACCOUNT TO PAY FOR TUITION, BOOKS, COLLEGE FEES AND, IF SPECIFICALLY PROVIDED, CHILDCARE SUBSIDIES. ANY FUNDS NOT EXPENDED FOR THESE PURPOSES ARE RETURNED TO BCF. ADDITIONALLY, EMERGENCY FUNDS IN INCREMENTS OF \$25-\$100 MAY BE PAID DIRECTLY TO STUDENTS BASED ON NEED FOR SHORT TERM FOOD, TRANSPORTATION OR HOUSING. PAYMENTS ARE MADE IN THE FORM OF GIFT CARDS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BELLEVUE COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING BELLEVUE COLLEGE PROGRAMS, ACTIVITIES AND DEPARTMENTS TO ENABLE INNOVATIONS, ENHANCEMENTS AND EXCELLENCE.

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 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010
Open to Public
Inspection

Name of the organization

BELLEVUE COLLEGE FOUNDATION

Employer identification number
91-1051671

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BELLEVUE COLLEGE FOUNDATION ("BCF") WORKS IN TANDEM WITH BELLEVUE COLLEGE TO GENERATE FUNDS FOR THE SCHOOL, SHARING STAFF AND FACILITIES WITH THE COLLEGE. BCF COMPLETED A MULTI-YEAR FUNDRAISING CAMPAIGN WITH THE COLLEGE AS OF 6/30/11. DUE TO REGULATORY REQUIREMENTS MUCH OF THIS FUNDING HAS OR WILL BYPASS BCF AND BE PAID DIRECTLY TO THE COLLEGE. THE FOUNDATION ADMINISTERS DONOR RESTRICTED FUNDS FOR THE BENEFIT OF VARIOUS DEPARTMENTS AND PROGRAMS OF BELLEVUE COLLEGE, FOR STUDENT SCHOLARSHIPS AND FOR FACULTY EXCELLENCE.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 DRAFT IS REVIEWED AND APPROVED BY THE FINANCE COMMITTEE. UPON APPROVAL, FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR COMMENT AND QUESTIONS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ALL OFFICERS, BOARD MEMBERS AND BOARD COMMITTEE MEMBERS, EXECUTIVE EMPLOYEES AND ANY OTHER MANAGER OR SUPERVISOR IDENTIFIED BY THE BOARD OF DIRECTORS ("BOD") OR BOARD PRESIDENT AS EXERCISING SUBSTANTIAL INFLUENCE OVER THE OPERATIONS OF THE BELLEVUE COLLEGE FOUNDATION ("BCF") ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE ("COI") ON AN ANNUAL BASIS. NEW BOARD MEMBERS ARE ASKED TO IMMEDIATELY SUBMIT THEIR COI FORMS. BCF REVIEWS AND RETAINS THE COMPLETED COI FORMS AND INVESTIGATES IDENTIFIED CONFLICTS. THE BCF EXECUTIVE DIRECTOR INVESTIGATES AND DISCLOSES TO THE BOD ALL CONFLICTS OF INTEREST REPORTED UNDER THIS POLICY. THE BOD EVALUATES DISCLOSURES AND MATERIAL FACTS RELATING TO THE TRANSACTION OR ARRANGEMENT GIVING RISE TO THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Name of the organization

BELLEVUE COLLEGE FOUNDATION

Employer identification number

91-1051671

POTENTIAL CONFLICT OF INTEREST TO DETERMINE WHETHER AN ACTUAL CONFLICT OF INTEREST EXISTS AND TO DEVELOP ALTERNATIVES TO REMOVE ANY CONFLICT FROM A TRANSACTION OR ARRANGEMENT. AN INDIVIDUAL WHO HAS AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST SHALL NOT BE PRESENT FOR THIS DISCUSSION UNLESS REQUIRED TO MAKE A PRESENTATION, PROVIDE ADDITIONAL FACTS OR ANSWER QUESTIONS. RESOLUTION TO A DISCLOSED CONFLICT WILL BE BASED ON THE SPECIFIC FACTS AND CIRCUMSTANCES OF THE SITUATION AND MAY INCLUDE SUSPENSION FROM VOTING OR PARTICIPATING IN DECISIONS WITH REGARD TO THE CONFLICT TRANSACTION. EVERY BOARD MEETING AGENDA INCLUDES A WRITTEN STATEMENT ASKING BOARD MEMBERS TO INFORM BCF OF ANY CHANGES WHICH MAY PRESENT A POTENTIAL CONFLICT OF INTEREST AND TO SUBMIT UPDATED COI FORMS TO DOCUMENT THE CHANGES SO THEY MAY BE EVALUATED.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE EXECUTIVE DIRECTOR AND OTHER OFFICERS OF BELLEVUE COLLEGE FOUNDATION ("BCF") IS SET AND REVISED NOT BY BCF BUT BY THE TRUSTEES OF BELLEVUE COLLEGE, A SEPARATE BUT FINANCIALLY INTERRELATED PUBLIC AGENCY. THE EXECUTIVE DIRECTOR AND OTHER STAFF OF BCF ARE EMPLOYEES OF BELLEVUE COLLEGE ("THE COLLEGE") AND PERFORM VARYING PERCENTAGES OF THEIR WORK FOR THE COLLEGE. BCF REIMBURSES THE COLLEGE FOR THE PORTION OF THESE EMPLOYEES' TIME SPENT ON BCF WORK BUT DOES NOT SEPARATELY PROVIDE COMPENSATION DIRECTLY TO THE INDIVIDUALS. THE COLLEGE TRUSTEES BASE THEIR APPROVAL OF COMPENSATION ON SURVEYS OF THE RESPONSIBILITIES, DUTIES AND COMPENSATION OF PERSONS IN COMPARABLE POSITIONS INSIDE AND OUTSIDE THE SYSTEM OF WASHINGTON STATE COMMUNITY AND TECHNICAL COLLEGES, WASHINGTON STATE EMPLOYEES AS A WHOLE, AND THE BROADER SPECTRUM OF SIMILAR POSITIONS IN THE SEATTLE METROPOLITAN AREA. THIS PERIODIC SURVEY IS CONDUCTED BY A PROFESSIONAL FIRM SPECIALIZING IN THE AREA OF COMPENSATION REVIEWS. MEETINGS OF THE TRUSTEES ARE OPEN TO THE

Name of the organization

BELLEVUE COLLEGE FOUNDATION

Employer identification number

91-1051671

PUBLIC AND MINUTES ARE KEPT OF ALL ACTIONS.

FORM 990, PART VI, SECTION C, LINE 19: ALL APPLICABLE TAX FORMS - FORMS 1023 AND 990 ARE AVAILABLE UPON REQUEST IN OUR OFFICES DURING NORMAL BUSINESS HOURS. IN ADDITION, THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE FOR REVIEW UPON REQUEST IN OUR OFFICE DURING NORMAL BUSINESS HOURS. SOME OR ALL OF THESE DOCUMENTS MAY ALSO BE AVAILABLE AT OUR WEBSITE AT WWW.BELLEVUECOLLEGE.EDU/FOUNDATION.

FORM 990, PAGE 12, PART XI, QUESTION 5

CHANGE IN ACCOUNTING FROM CASH TO ACCRUAL

BELLEVUE COLLEGE FOUNDATION APPLIED FOR AND RECEIVED APPROVAL FROM THE DEPARTMENT OF THE TREASURY UNDER THE AUTOMATIC CHANGE REQUEST PROCEDURES TO CHANGE ITS METHOD OF ACCOUNTING FROM CASH TO ACCRUAL EFFECTIVE 7/1/09. ACCORDINGLY, THE RESULTING CHANGE IS BEING REPORTED OVER A FOUR YEAR PERIOD FROM 6/30/2010-6/30/2013.

FORM 990, PAGE 11, PART XII, LINE 2C

AUDIT OVERSIGHT AND SELECTION OF INDEPENDENT ACCOUNTANT:

THE PROCESS HAS NOT SUBSTANTIALLY CHANGED FROM THE PRIOR YEAR. THE FINANCE COMMITTEE ANNUALLY APPOINTS THE INDEPENDENT ACCOUNTING FIRM WHICH IS TO PERFORM THE AUDIT, MEETS WITH THE AUDITORS AND APPROVES THE AUDITED FINANCIAL STATEMENTS ANNUALLY. AT BOARD DECISION THE BOARD OF DIRECTORS MAY ALSO MEET WITH THE AUDITORS AND REVIEWS THE AUDITED FINANCIAL STATEMENTS.

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

[illegible]

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

[illegible]

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
GRANTS AND FACULTY AND STAFF RECOGNITION					
(1) AWARDS TO BELLEVUE COLLEGE	B	514,144.	AUTHORIZED CASH DISTRIBUTIONS		
(2) BELLEVUE COLLEGE	B	161,404.	AUTHORIZED CASH DISTRIBUTIONS		
(3) AWARDS TO BELLEVUE COLLEGE FACULTY & STAFF	B	6,489.	ACTUAL AMOUNT PAID TO COLLEGE		
(4) SALARIES, PAYROLL TAXES & BENEFITS FOR SHARED EMPLOYEES TO BELLEVUE COLLEGE	N	120,510.	UNREIMBURSED PORTION		
(5) SALARIES, PAYROLL TAXES & BENEFITS FOR SHARED EMPLOYEES TO BELLEVUE COLLEGE	N	235,351.	ACTUAL AMOUNT PAID TO COLLEGE		
(6) SHARED FACILITY COSTS OF INDETERMINABLE VALUE - BELLEVUE COLLEGE	M	0.	NOT DETERMINABLE		

Part VII Supplemental Information

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization	Employer identification number
	BELLEVUE COLLEGE FOUNDATION	91-1051671
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. 3000 LANDERHOLM CIRCLE S.E.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BELLEVUE, WA 98007-6484	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PAUL FEAVEL AT BELLEVUE COLLEGE

- The books are in the care of ► **3000 LANDERHOLM CIRCLE SE - BELLEVUE, WA 98007**
Telephone No ► **(425) 564-2386** FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year _____ or
- ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)