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Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

AUGSBURG COLLEGE EDUCATES STUDENTS TO BE INFORMED CITIZENS, THOUGHTFUL STEWARDS, CRITICAL THINKERS, AND RESPONSIBLE LEADERS THE AUGSBURG EXPERIENCE IS SUPPORTED BY AN ENGAGED COMMUNITY THAT IS COMMITTED TO INTENTIONAL DIVERSITY IN ITS LIFE AND WORK AN AUGSBURG EDUCATION IS DEFINED BY EXCELLENCE IN THE LIBERAL ARTS AND PROFESSIONAL STUDIES, GUIDED BY THE FAITH AND VALUES OF THE LUTHERAN CHURCH, AND SHAPED BY ITS URBAN AND GLOBAL SETTINGS

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 organization’s program service accomplishments for each of its three largest program services, as measured 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 \$ 57,213,415 including grants of \$ 25,886,238 ) (Revenue \$ 80,808,264 )

POSTSECONDARY EDUCATION SET IN A VIBRANT NEIGHBORHOOD AT THE HEART OF THE TWIN CITIES, AUGSBURG COLLEGE OFFERS MORE THAN 50 UNDERGRADUATE MAJORS AND NINE GRADUATE DEGREES TO MORE THAN 4,000 STUDENTS OF DIVERSE BACKGROUNDS THE TRADEMARK OF AN AUGSBURG EDUCATION IS ITS EMPHASIS UPON DIRECT, PERSONAL EXPERIENCE AND ITS DEEP COMMITMENTS TO EDUCATING STUDENTS AT THE INTERSECTIONS OF FAITH, LEARNING, AND SERVICE AUGSBURG IS ONE OF SIX COLLEGES AND UNIVERSITIES TO BE AWARDED THE PRESIDENTIAL AWARD IN THE 2010 PRESIDENT’S HIGHER EDUCATION COMMUNITY SERVICE HONOR ROLL FROM THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE RECOGNIZED AS ONE OF THE COUNTRY’S LEADING INSTITUTIONS FOR COMMUNITY ENGAGEMENT, AUGSBURG ALSO RANKS AMONG THE TOP PRODUCERS OF NATIONAL AND INTERNATIONAL STUDENT FELLOWSHIP AWARDEES WITH THIS PASSION FOR ACCESS AND EXCELLENCE IN THE LIBERAL ARTS AND PROFESSIONAL STUDIES, AUGSBURG IS GUIDED BY THE FAITH AND VALUES OF THE LUTHERAN CHURCH AND EDUCATES STUDENTS TO BE INFORMED CITIZENS, THOUGHTFUL STEWARDS, CRITICAL THINKERS, AND RESPONSIBLE LEADERS

4b

(Code ) (Expenses \$ 22,199,912 including grants of \$ 0 ) (Revenue \$ 1,651,718 )

ACADEMIC SUPPORT AND STUDENT SERVICESAUGSBURG COLLEGE PROVIDES INNOVATIVE PROGRAMMING AND SUPPORT SERVICES TO A DIVERSE COMMUNITY OF MORE THAN 4,000 UNDERGRADUATE AND GRADUATE LEARNERS THE GAGE CENTER FOR STUDENT SUCCESS PROVIDES ADVISING, TUTORING, AND OTHER ACADEMIC SUPPORT SERVICES TO ALL UNDERGRADUATE AND GRADUATE STUDENTS THE GAGE CENTER INCLUDES CLASS ACADEMIC SPECIALISTS WHO PROVIDE INDIVIDUALIZED ACCOMMODATIONS FOR STUDENTS WITH COGNITIVE, LEARNING, AND PHYSICAL DISABILITIES THE GAGE CENTER ALSO OFFERS SUPPORT PROGRAMS FOR FIRST-GENERATION AND LOW-INCOME STUDENTS ADDITIONALLY, AUGSBURG’S STEPUP PROGRAM, ONE OF THE NATION’S ONLY COLLEGIATE RECOVERY COMMUNITIES, SUPPORTS MORE THAN 75 STUDENTS EACH YEAR WITH COUNSELING, SUBSTANCE-FREE HOUSING, AND LEADERSHIP DEVELOPMENT FINALLY, THROUGH THE INTEGRATED SERVICES OF THE ENROLLMENT CENTER, STUDENTS AND FAMILIES CAN RECEIVE COUNSELING AND SUPPORT WITH TUITION PAYMENT PLANS, SCHOLARSHIPS, FINANCIAL AID, AND REGISTRATION

4c

(Code ) (Expenses \$ 8,740,065 including grants of \$ 0 ) (Revenue \$ 9,039,123 )

AUXILIARY SERVICESAUGSBURG COLLEGE’S RESIDENTIAL LIFE PROGRAM SEEKS TO DEVELOP RESIDENTS WHO ARE BOTH STUDENTS AND NEIGHBORS IN AN URBAN COLLEGIATE SETTING WHILE BEING GROUNDED IN LIBERAL ARTS, INTENTIONAL DIVERSITY, AND FAITH THE COLLEGE HAS FIVE RESIDENCE HALLS AND THREE DINING VENUES DURING 2011-12, AUGSBURG WAS HOME TO 1,066 STUDENTS WITH 810 STUDENTS PARTICIPATING IN THE RESIDENCE STUDENT MEAL PLANS A’VIANDS DINING SERVICE STRIVES TO PROVIDE A WIDE VARIETY OF MEALS THAT MEET NUTRITIONAL AND CULTURAL REQUIREMENTS AND EDUCATE STUDENTS ABOUT NUTRITION AND SUSTAINABLE FOOD PRACTICES A CAMPUS BOOKSTORE SERVES STUDENTS, FACULTY, STAFF, AND THE GENERAL PUBLIC, OFFERING A VARIETY OF FAIR TRADE GOODS

4d

Other program services (Describe in Schedule O )

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























4e

Total program service expenses

\$ 88,153,392

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	<b>Section 501(c)(3) organizations.</b> 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	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	Yes
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	11b	Yes
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	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	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13	Yes
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II 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, Part III and IV 	16	Yes
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

<b>Part V</b> <b>Statements Regarding Other IRS Filings and Tax Compliance</b>			
Check if Schedule O contains a response to any question in this Part V <input checked="" type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. . . . . .	1a294	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a1,997	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2bYes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3aYes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3bYes	
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 or securities account)? . . . . .	4aYes	
b	If "Yes," enter the name of the foreign country: <u>MX, GT, ES, NU, WA</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b	
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
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? . . . . .	7aYes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7bYes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	7h	
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b	
10	<b>Section 501(c)(7) organizations.</b> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter		
a	Gross income from members or shareholders . . . . .	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the aggregate amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . .	14b	

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.  
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	33		
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	No
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	No
6	Did the organization have members or stockholders? . . . . .	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .		
a	The governing body? . . . . .	8a	Yes
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . . . .	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	Yes
13	Did the organization have a written whistleblower policy? . . . . .	13	Yes
14	Did the organization have a written document retention and destruction policy? . . . . .	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? . . . . .		
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes
b	Other officers or key employees of the organization . . . . .	15b	Yes
	If "Yes," to line 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	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 <input checked="" type="checkbox"/> MN
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 made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> TAMMY MCGEE 2211 RIVERSIDE AVENUE MINNEAPOLIS, MN 55454 1351 (612) 330-1027

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

☐ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

Form **990** (2011)



## Part VII

<b>1b</b>	<b>Sub-Total . . . . .</b>	<b>▼</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>	<b>▼</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	<b>▼</b>	1,913,837	0	189,148

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 20

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

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
A'VIANDS LLC 1751 W COUNTY ROAD B SUITE 300 ROSEVILLE, MN 55113	FOOD SERVICE	2,567,404
CONTINUUM CONSTRUCTION INC 8035 COOPER AVENUE INVER GROVE HEIGHTS, MN 55076	CONSTRUCTION	517,927
MCGOUGH CONSTRUCTION INC 2737 FAIRVIEW AVENUE N ST PAUL, MN 55113	CONSTRUCTION	503,798
BWBR ARCHITECTS INC 380 SAINT PETER STREET SUITE 600 ST PAUL, MN 55102	ARCHITECTURAL DESIGN	464,441
METROPOLITAN MECHANICAL CONTRACTOR 7450 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344	CONSTRUCTION	406,241

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►26

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c	3,775				
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	3,185,719				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,609,319				
	g	Noncash contributions included in lines 1a-1f \$ 264,219						
	h	Total. Add lines 1a-1f . . . . .		11,798,813				
Program Service Revenue			Business Code					
	2a	TUITION AND FEES	611710	80,808,264	80,808,264			
	b	AUXILIARY ENTERPRISES	711210	9,039,123	9,039,123			
	c	EDUCATIONAL ACTIVITIES	611710	306,576	306,576			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		90,153,963				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		500,092		3,222	496,870	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
		807,608						
		796,690						
		10,918						
	d	Net rental income or (loss) . . . . .		10,918		10,918		
	7a	(i) Securities		(ii) Other				
		690,945						
		710,835		67,746				
		-19,890		-67,746				
	d	Net gain or (loss) . . . . .		-87,636			-87,636	
	8a	Gross income from fundraising events (not including \$ 3,775 of contributions reported on line 1c) See Part IV, line 18 . . . . .						
		a	219,675					
		b	Less direct expenses . . . . .	135,906				
	c	Net income or (loss) from fundraising events . .		83,769			83,769	
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .						
		a						
		b	Less direct expenses . . . . .					
	c	Net income or (loss) from gaming activities . .						
10a	Gross sales of inventory, less returns and allowances . . . . .							
	a							
	b	Less cost of goods sold . . . . .						
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS REVENUE		900099	1,452,860	1,345,142	107,718		
b								
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .			1,452,860				
12	Total revenue. See Instructions . . . . .			103,912,779	91,499,105	121,858	493,003	

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

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 United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	24,791,585	24,791,585		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,094,653	1,094,653		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,455,501	424,503	824,053	206,945
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	38,209,001	33,886,780	3,526,519	795,702
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,268,562	2,024,738	190,342	53,482
9	Other employee benefits	3,275,234	2,844,616	332,130	98,488
10	Payroll taxes	2,527,725	2,191,087	260,871	75,767
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	178,327	83,910	94,417	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	81,199			81,199
f	Investment management fees	67,530		67,530	
g	Other	3,942,109	3,695,388	206,385	40,336
12	Advertising and promotion	692,246	352,786	339,460	
13	Office expenses	675,295	721,655	-51,985	5,625
14	Information technology	1,336,803	962,272	371,464	3,067
15	Royalties				
16	Occupancy	5,258,581	4,551,092	707,489	
17	Travel	2,875,851	2,663,041	152,357	60,453
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,438,301	1,155,896	282,405	
20	Interest	2,249,304	1,786,231	463,073	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,097,597	3,348,453	748,797	347
23	Insurance	34,682	34,604	78	
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	DUES AND FEES	921,818	777,992	127,650	16,176
b	REFERENCE MATERIALS	585,042	543,061	39,555	2,426
c	BAD DEBT EXPENSE	298,893	151,856	30,270	116,767
d	EMPLOYEE TRAINING/RECRT	86,583	18,033	58,300	10,250
e					
f	All other expenses	54,155	49,160	4,093	902
25	Total functional expenses. Add lines 1 through 24f	98,496,577	88,153,392	8,775,253	1,567,932
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)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			6,268,140	1	8,144,042
	2	Savings and temporary cash investments . . . . .			18,865	2	926,890
	3	Pledges and grants receivable, net . . . . .			3,444,785	3	3,594,352
	4	Accounts receivable, net . . . . .			3,388,815	4	2,607,311
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			0	5	271,128
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .			5,841,651	7	5,835,846
	8	Inventories for sale or use . . . . .			64,585	8	37,523
	9	Prepaid expenses and deferred charges . . . . .			535,756	9	895,781
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a	117,229,796			
	b	Less: accumulated depreciation . . . . .	10b	49,312,555	68,758,597	10c	67,917,241
	11	Investments—publicly traded securities . . . . .			25,257,787	11	21,696,292
	12	Investments—other securities. See Part IV, line 11 . . . . .			9,821,457	12	11,937,263
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			4,640,182	15	3,589,565
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			128,040,620	16	127,453,234	
Liabilities	17	Accounts payable and accrued expenses . . . . .			9,487,878	17	9,393,698
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			2,072,822	19	2,237,439
	20	Tax-exempt bond liabilities . . . . .			34,695,000	20	32,900,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			98,252	21	371,373
	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 . . . . .			1,755,000	23	1,150,000
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .			6,686,920	25	6,302,547
	26	Total liabilities. Add lines 17 through 25 . . . . .			54,795,872	26	52,355,057
	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 . . . . .			29,769,566	27	32,819,493
28		Temporarily restricted net assets . . . . .			16,304,203	28	14,350,038
29		Permanently restricted net assets . . . . .			27,170,979	29	27,928,646
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 . . . . .			73,244,748	33	75,098,177
34		Total liabilities and net assets/fund balances . . . . .			128,040,620	34	127,453,234

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	103,912,779
2	Total expenses (must equal Part IX, column (A), line 25)	2	98,496,577
3	Revenue less expenses Subtract line 2 from line 1	3	5,416,202
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,244,748
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,562,773
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	75,098,177

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization AUGSBURG COLLEGE	Employer identification number 41-0694721
--	--

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

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

1

☐

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

2

☒

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☐

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

10

☐

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

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions )					12	
13	<b>First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

Section C. Computation of Public Support Percentage		
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a	<b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>33 1/3% support test—2010.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	<b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> 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	<b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> 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	<b>Private Foundation</b> 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"/>

Part IIIPart III

Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. 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—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		



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

Facts And Circumstances Test

Explanation

Additional Data

Software ID:

Software Version:

EIN: 41-0694721

Name: AUGSBURG COLLEGE

Form 990, Special Condition Description:

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL PRIBBENOW PRESIDENT	40 00	X		X				240,789	0	36,472
MICHAEL GOOD CHAIR	2 00	X		X				0	0	0
JODI HARPSTEAD VICE CHAIR	2 00	X		X				0	0	0
DAN ANDERSON TREASURER	2 00	X		X				0	0	0
PAUL MUELLER SECRETARY	2 00	X		X				0	0	0
ANDRA ADOLFSON BOARD MEMBER	2 00	X						0	0	0
ANN ASHTON-PIPER BOARD MEMBER	2 00	X						0	0	0
KAREN DURANT BOARD MEMBER	2 00	X						0	0	0
MATT ENTENZA BOARD MEMBER	2 00	X						0	0	0
MARK EUSTIS BOARD MEMBER	2 00	X						0	0	0
ANTHONY GENIA BOARD MEMBER	2 00	X						0	0	0
ALEXANDER GONZALEZ BOARD MEMBER	2 00	X						0	0	0
NORMAN HAGFORS BOARD MEMBER	2 00	X						0	0	0
RICHARD HARTNACK BOARD MEMBER	2 00	X						0	0	0
ROLF JACOBSON BOARD MEMBER	2 00	X						0	0	0
ERIC JOLLY BOARD MEMBER	2 00	X						0	0	0
CYNTHIA JONES BOARD MEMBER	2 00	X						0	0	0
DEAN KENNEDY BOARD MEMBER	2 00	X						0	0	0
TOBY PIPER LABELLE BOARD MEMBER	2 00	X						0	0	0
LAJUNE THOMAS LANGE BOARD MEMBER	2 00	X						0	0	0
ANDRE LEWIS BOARD MEMBER	2 00	X						0	0	0
JENNIFER MARTIN BOARD MEMBER	2 00	X						0	0	0
MARIE MCNEFF BOARD MEMBER	2 00	X						0	0	0
JEFFREY NODLAND BOARD MEMBER	2 00	X						0	0	0
LISA NOVOTNY BOARD MEMBER	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PETER ROGNESS BOARD MEMBER	2 00	X						0	0	0
PHILIP STYRLUND BOARD MEMBER	2 00	X						0	0	0
GARY TANGWALL BOARD MEMBER	2 00	X						0	0	0
DAVID TIEDE BOARD MEMBER	2 00	X						0	0	0
HAROLD USGAARD BOARD MEMBER	2 00	X						0	0	0
NORMAN WAHL BOARD MEMBER	2 00	X						0	0	0
BONNIE WALLACE BOARD MEMBER	2 00	X						0	0	0
MARK WILHELM BOARD MEMBER	2 00	X						0	0	0
TAMMY MCGEE VP FINANCE AND ADMINISTRATION AND CFO	40 00			X				157,809	0	8,805
LEIF ANDERSON VP INFORMATION TECHNOLOGY AND CIO	40 00			X				120,653	0	14,240
JULIE EDSTROM VP ENROLLMENT MANAGEMENT	40 00			X				123,581	0	14,088
BARBARA FARLEY VP ACADEMIC AFFAIRS AND DEAN OF THE COLLEGE	40 00			X				154,855	0	17,275
ANN GARVEY VP STUDENT AFFAIRS	40 00			X				103,306	0	12,827
REBECCA JOHN VP MARKETING AND COMMUNICATION	40 00			X				118,988	0	8,536
CHRISTINE SZAJ VP AND CHIEF OF STAFF	40 00			X				167,844	0	9,261
JEREMY WELLS VP INSTITUTIONAL ADVANCEMENT	40 00			X				154,340	0	20,383
MARK ENGBRETSON PHYSICS PROFESSOR	40 00					X		124,783	0	2,800
CASSIDY TITCOMB ASSISTANT VP DEVELOPMENT	40 00					X		116,139	0	2,281
THOMAS MORGAN EXECUTIVE DIRECTOR, CENTER FOR FAITH AND LEARNING	40 00					X		115,071	0	18,032
ANDREA TURNER ASSISTANT VP HUMAN RESOURCES	40 00					X		108,981	0	5,219
AMY GORT ASSISTANT VP AND DEAN OF UNDERGRADUATE	40 00					X		106,698	0	18,929

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

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)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area  
☐ Protection of natural habitat☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ 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 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, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

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

(i) Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

► \$ \_\_\_\_\_

2

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

a

Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

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

Cat No 52283D

Schedule D (Form 990) 2011

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

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	

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 . . . . .	33,268,035	28,641,054	26,221,137	33,692,462
b	Contributions . . . . .	741,606	1,307,888	426,000	577,905
c	Investment earnings or losses . . . . .	-3,039,472	4,286,424	3,754,289	-6,911,549
d	Grants or scholarships . . . . .	1,084,164	1,009,119	1,029,258	998,887
e	Other expenditures for facilities and programs . . . . .	137,110	91,473	731,114	138,794
f	Administrative expenses . . . . .	29,199	49,685		
g	End of year balance . . . . .	29,778,094	33,268,035	28,641,054	26,221,137

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 0 %

b

Permanent endowment ▶ 86 930 %

c

Term endowment ▶ 13 070 %

3a

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

(i)

unrelated organizations . . . . .

3a(i)

Yes

No

(ii)

related organizations . . . . .

3a(ii)

No

b

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

3b

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		3,530,439		3,530,439
b Buildings . . . . .		68,737,043	26,186,188	42,550,855
c Leasehold improvements . . . . .		32,711,447	16,870,336	15,841,111
d Equipment . . . . .		10,298,394	6,256,031	4,042,363
e Other . . . . .		1,952,473		1,952,473
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				67,917,241



Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	103,912,779
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	98,496,577
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	5,416,202
4	Net unrealized gains (losses) on investments			4	-3,580,842
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	18,069
9	Total adjustments (net) Add lines 4 - 8			9	-3,562,773
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9			10	1,853,429
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	75,396,520
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments . . . . .	2a	-3,580,842		
b	Donated services and use of facilities . . . . .	2b			
c	Recoveries of prior year grants . . . . .	2c			
d	Other (Describe in Part XIV) . . . . .	2d	950,665		
e	Add lines 2a through 2d . . . . .			2e	-2,630,177
3	Subtract line 2e from line 1 . . . . .			3	78,026,697
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	67,530		
b	Other (Describe in Part XIV) . . . . .	4b	25,818,552		
c	Add lines 4a and 4b . . . . .		4c		
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .			5	103,912,779

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements . . . . .	1	73,543,091	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities . . . . .	2a		
b	Prior year adjustments . . . . .	2b		
c	Other losses . . . . .	2c		
d	Other (Describe in Part XIV) . . . . .	2d	1,000,282	
e	Add lines 2a through 2d . . . . .	2e	1,000,282	
3	Subtract line 2e from line 1 . . . . .	3	72,542,809	
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	67,530	
b	Other (Describe in Part XIV) . . . . .	4b	25,886,238	
c	Add lines 4a and 4b . . . . .	4c	25,953,768	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	98,496,577	

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	FUNDS HELD IN CUSTODY FOR OTHERS RELATES TO AGENCY FUNDS THAT AUGSBURG COLLEGE HELPS TO ADMINISTER. THERE ARE APPROXIMATELY 20 AGENCIES THAT AUGSBURG COLLEGE CURRENTLY WORKS WITH IN THIS TYPE OF RELATIONSHIP.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE COLLEGE ENDOWMENT CONSISTS OF APPROXIMATELY 350 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES BASED ON DONOR RESTRICTIONS AND BOARD DESIGNATIONS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE COLLEGE HAS RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE INDICATING IT IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE AND IS SUBJECT TO FEDERAL AND STATE INCOME TAX ONLY ON NET UNRELATED BUSINESS INCOME. THE COLLEGE ENGAGES IN ACTIVITIES THAT ARE CONSIDERED UNRELATED TO ITS EXEMPT PURPOSE. THESE ACTIVITIES ARE SUBJECT TO FEDERAL AND STATE INCOME TAXES. SUCH ACTIVITIES GENERATED AN INCOME POSITION IN FISCAL 2012 AND 2011. FURTHER, THE COLLEGE HAS A NET OPERATING LOSS CARRYFORWARD AVAILABLE TO OFFSET ANY TAXABLE INCOME FROM THESE UNRELATED ACTIVITIES. ACCORDINGLY, NO FEDERAL OR STATE TAX PROVISION IS REQUIRED. THE NET OPERATING LOSSES BEGIN TO EXPIRE IN 2019. THE COLLEGE ADOPTED ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS AND FILES AS A TAX EXEMPT ORGANIZATION. NO ADJUSTMENTS TO THE FINANCIAL STATEMENTS WERE REQUIRED AS A RESULT OF THE IMPLEMENTATION OF THIS STANDARD. THE COLLEGE HAS NO CURRENT OBLIGATION FOR UNRELATED BUSINESS INCOME TAX. THE COLLEGE TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AUTHORITIES. SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, THE TAX RETURNS FOR THE YEARS 2009 THROUGH 2011 ARE SUBJECT TO REVIEW BY FEDERAL AUTHORITIES.
PART XI, LINE 8 - OTHER ADJUSTMENTS		ADJUSTMENT OF ACTUARIAL LIABILITY 61,905. CHANGE IN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES -43,836. TOTAL TO SCHEDULE D, PART XI, LINE 8 18,069.
PART XII, LINE 2D - OTHER ADJUSTMENTS		ADJUSTMENT OF ACTUARIAL LIABILITY 61,905. CHANGE IN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES -43,836. SPECIAL EVENT EXPENSES 135,906. RENTAL EXPENSES 796,690.
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS AND GRANTS 25,886,238. LOSS ON DISPOSAL OF FIXED ASSETS -67,686.
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 135,906. RENTAL EXPENSES 796,690. LOSS ON DISPOSAL OF FIXED ASSETS 67,686.
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS AND GRANTS 25,886,238.

SCHEDULE E  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Schools

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
  
41-0694721

Part I		YES	NO
<div>1</div> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II			



**Part III 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).

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE STATEMENT IS PUBLISHED AT VARIOUS TIMES THROUGHOUT THE YEAR IN REGIONAL NEWSPAPERS ANNOUNCING REGISTRATION DATES AND PROGRAMS OFFERED. THE COLLEGE FOLLOWS A NONDISCRIMINATORY POLICY REGARDING ALL PROGRAMS. ENROLLMENT OF STUDENTS IS WITHOUT DISCRIMINATION AS TO RACE, RELIGION, SEX, COLOR OR NATIONAL ORIGIN. RECRUITMENT PROCEDURES ARE DESIGNED AND CARRIED OUT TO REACH STUDENTS OF ALL RACIAL SEGMENTS IN THE GEOGRAPHICAL AREA SERVED.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES SUPPORT FROM THE STATE OF MINNESOTA AND FROM THE UNITED STATES GOVERNMENT IN CONNECTION WITH STUDENT AID PROGRAMS SUCH AS FEDERAL AND MINNESOTA COLLEGE WORK-STUDY PROGRAMS, PELL GRANTS, SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS AND PERKINS LOAN FUNDS. THE COLLEGE ALSO RECEIVES VARIOUS OTHER FEDERAL AND STATE EDUCATIONAL AND RESEARCH GRANTS OR SUBSIDIES.

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States
- 3 Activites per Region (Use Part V if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
CENTRAL AMERICA AND THE CARIBBEAN	3	8	PROGRAM SERVICES	INSTRUCTION	850,000
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INSTRUCTION	28,596
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	INSTRUCTION	31,118
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	INSTRUCTION	20,270
NORTH AMERICA	1	6	PROGRAM SERVICES	INSTRUCTION	362,708
SUB-SAHARAN AFRICA	1	8	PROGRAM SERVICES	INSTRUCTION	470,315
NORTH AMERICA	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	8,895
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	460
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ACADEMIC SUPPORT	2,000
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT SERVICES	6,645
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	GENERAL ADMINSTRATION	19,667
3a Sub-total	5	22			1,772,362
b Total from continuation sheets to Part I	0	0			28,312
c Totals (add lines 3a and 3b)	5	22			1,800,674

**1**

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities . . . . . ▶ \_\_\_\_\_

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

[illegible]

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

## Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

[illegible]

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.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
  
41-0694721

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
JOHNSON GROSSNICKLE & ASSOCIATES INC 29 SOUTH PARK BLVD  GREENWOOD, IN 46143	CAMPAIGN COUNSEL		No	0	87,199	0
Total . . . . . ▶					87,199	

3

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.

MN

Part II 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.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))	
			STEP-UP-GALA	STEP-UP GOLF	1		
			(event type)		(event type)		(total number)
1	Gross receipts	. . . .	144,034	47,050	32,366	223,450	
2	Less Charitable contributions	. . . .	3,775	0	0	3,775	
3	Gross income (line 1 minus line 2)	. . . .	140,259	47,050	32,366	219,675	
Direct Expenses	4	Cash prizes	. . . .		0	250	250
	5	Non-cash prizes	. . . .	78,819	0	0	78,819
	6	Rent/facility costs	. . . .	6,007	10,043	5,170	21,220
	7	Food and beverages	. . . .	19,614	0	4,182	23,796
	8	Entertainment	. . . .	0	0	0	
	9	Other direct expenses	. . . .	5,757	3,134	2,930	11,821
	10	Direct expense summary Add lines 4 through 9 in column (d). . . . . ▶					( 135,906 )
	11	Net income summary Combine lines 3 and 10 in column (d). . . . . ▶					83,769

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			( )
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

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

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3

Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) TUITION ASSISTANCE AND SCHOLARSHIPS	2216	24,791,585	0	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.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AUGSBURG COLLEGE OFFERS SCHOLARSHIPS AND GRANTS TO QUALIFIED STUDENTS TO HELP REDUCE THEIR OUT-OF-POCKET TUITION COSTS STUDENTS RECEIVING FINANCIAL ASSISTANCE OF THIS FORM MUST MEET SPECIFIC CRITERIA SUCH AS ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND OTHER SIMILAR STANDARDS WHETHER PUT IN PLACE BY THE COLLEGE OR BY DONORS OF RESTRICTED FUNDS

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information  
  
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047  
  
2011  
  
Open to Public Inspection

Name of the organization AUGSBURG COLLEGE	Employer identification number  41-0694721
--	--

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items <div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization  a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4a	No
		4b	No
		4c	No
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of  a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5a	No
		5b	No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of  a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6a	No
		6b	No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PAUL PRIBBENOW	(i)	236,809	0	3,980	24,844	11,628	277,261	0
	(ii)	0	0	0	0	0	0	0
(2) TAMMY MCGEE	(i)	157,200	0	609	7,905	900	166,614	0
	(ii)	0	0	0	0	0	0	0
(3) BARBARA FARLEY	(i)	153,609	0	1,246	15,856	1,419	172,130	0
	(ii)	0	0	0	0	0	0	0
(4) CHRISTINE SZAJ	(i)	166,893	0	951	8,726	535	177,105	0
	(ii)	0	0	0	0	0	0	0
(5) JEREMY WELLS	(i)	145,801	0	8,539	9,881	10,502	174,723	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	PAUL PRIBBENOW - RESIDENCE FOR PERSONAL USE - NO AMOUNT WAS REPORTED AS TAXABLE INCOME - THE HOUSE IS OWNED BY THE COLLEGE AND IS USED TO HOST COLLEGE FUNCTIONS

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.										OMB No 1545-0047		
											2011		
	Department of the Treasury Internal Revenue Service											Open to Public Inspection	
Name of the organization AUGSBURG COLLEGE										Employer identification number 41-0694721			

Part I

Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	60416HEM2	04-13-2005	6,938,389	PAY OFF SERIES 4 F-1 AND 4-W BONDS		X		X		X
B	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	60416HHR8	07-26-2006	15,644,110	CONSTRUCTION OF OREN GATEWAY CENTER		X		X		X
C	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	60416HHS6	07-26-2006	5,000,000	MULTIPLE FACILITIES		X		X		X
D	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	60416HUF9	10-13-2010	8,936,602	REFINANCE SERIES 4-Y BONDS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired			1,325,000		1,200,000		870,000	
2	Amount of bonds defeased								
3	Total proceeds of issue	6,938,389		15,644,110		5,000,000		8,936,602	
4	Gross proceeds in reserve funds	700,303		1,040,750				837,609	
5	Capitalized interest from proceeds	11,607		56,532					
6	Proceeds in refunding escrow	6,125,437						8,294,681	
7	Issuance costs from proceeds	134,952		267,315		99,000		172,187	
8	Credit enhancement from proceeds					26,500			
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds			14,336,045		4,874,500			
11	Other spent proceeds							8,294,681	
12	Other unspent proceeds								
13	Year of substantial completion	2008		2008		2008			
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
			X		X		X	X	
15	Were the bonds issued as part of an advance refunding issue?	X			X		X	X	
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		X
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
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								
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								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IV

Arbitrage

		A		B		C		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?	X		X		X		X	
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?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6	Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . . ☐ Yes ☒ No

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Part I

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

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II

Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) WILLIAM FRAME LOAN AGAINST LIFE INSURANCE POLICY		X	194,965	271,128		No	Yes		Yes	
Total . . . . . ▶	\$ 271,128									

Part III

Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) US BANCORP	RICHARD HARTNACK, BOARD MEMBER, VICE CHR/HEAD OF CONSUMER BANKING U S BANC	379,766	THE COLLEGE USES U S BANCORP FOR MULTIPLE PURPOSES U S BANCORP WAS THE FORMER HSA PROVIDER UNTIL DECEMBER, 2011 THE COLLEGE CURRENTLY MAKES PAYMENTS TO U S BANCORP FOR LEASE PAYMENTS ON THE PRESIDENT'S VEHICLE AND ALSO FOR THE OUTSTANDING HENNEPIN COUNTY LOAN OBLIGATION FOR THE ICE ARENA		No

Part V

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	28	168,282	STOCK MARKET QUOTES
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .	X	11	34,971	APPRAISAL VALUE
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( SILENT AUCTION ITEMS )	X	206	60,745	ESTIMATED FMV
26 Other ► ( GIFTS IN KIND )	X	3	221	ESTIMATED FMV
27 Other ► ( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .	29			1
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a			No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	32a	Yes		
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF ITEMS CONTRIBUTED WAS THE BASIS FOR THE ESTIMATED NUMBER OF CONTRIBUTORS EXCEPT IN THE CASE OF SECURITIES WHICH REPRESENTS THE NUMBER OF INDIVIDUALS THAT DONATED SECURITIES
THIRD PARTY USE	PART I, LINE 32B	THE COLLEGE USED A REALTOR FOR THE SALE OF PROPERTY

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.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIR AND OTHER OFFICERS, PLUS AT LEAST FOUR OTHER MEMBERS ELECTED BY THE BOARD OF REGENTS THE EXECUTIVE COMMITTEE SHALL HAVE THE AUTHORITY OF THE BOARD OF REGENTS IN THE MANAGEMENT OF THE BUSINESS OF THIS CORPORATION IN THE INTERVAL BETWEEN MEETINGS OF THE BOARD OF REGENTS, AND THE EXECUTIVE COMMITTEE SHALL AT ALL TIMES BE SUBJECT TO THE CONTROL AND DIRECTION OF THE BOARD OF REGENTS
	FORM 990, PART VI, SECTION B, LINE 11	THE DRAFT VERSION OF THE FORM 990 IS PROVIDED TO THE FINANCE COMMITTEE FOR THEIR REVIEW AND APPROVAL FOR SUBMISSION A COPY OF THE FORM 990 IS PROVIDED TO THE BOARD OF REGENTS PRIOR TO SUBMISSION
	FORM 990, PART VI, SECTION B, LINE 12C	AUGSBURG COLLEGE HAS A CONFLICT OF INTEREST POLICY THAT COVERS THE BOARD OF REGENTS AND ALSO A CONFLICT OF INTEREST POLICY INCLUDED IN THE EMPLOYEE HANDBOOK THE ENTIRE BOARD OF REGENTS IS REQUIRED TO ANNUALLY SUBMIT A SIGNED STATEMENT OF COMPLIANCE INTENDED TO ASSIST IN IDENTIFYING AND HANDLING POTENTIAL OR ACTUAL CONFLICTS OF INTEREST THAT MAY BE ENCOUNTERED BY REGENTS IN THEIR SERVICE TO AUGSBURG COLLEGE EACH INSTANCE OF A POTENTIAL CONFLICT IS THEN DISCUSSED INDIVIDUALLY WITH THAT REGENT BY THE BOARD CHAIR THIS CONVERSATION INCLUDES THE APPROPRIATE ACTION BY THE REGENT TO TAKE IF SUCH A CONFLICT OF INTEREST DOES MATERIALIZE IN THE PERFORMANCE OF HIS/HER DUTIES AS A REGENT PRIOR TO BOARD OR COMMITTEE ACTION ON A CONTRACT OF TRANSACTION INVOLVING A CONFLICT OF INTEREST, A REGENT OR COMMITTEE MEMBER HAVING A CONFLICT OF INTEREST AND WHO IS IN ATTENDANCE AT THE MEETING SHALL DISCLOSE ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST SUCH DISCLOSURE SHALL BE REFLECTED IN THE MINUTES OF THE MEETING A PERSON WHO HAS A CONFLICT OF INTEREST SHALL NOT PARTICIPATE IN OR BE PERMITTED TO HEAR THE REGENT'S OR COMMITTEE'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO QUESTIONS THE PERSON HAVING A CONFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR TRANSACTION AND SHALL NOT BE PRESENT IN THE MEETING ROOM WHEN THE VOTE IS TAKEN, UNLESS THE VOTE IS BY SECRET BALLOT SUCH PERSON'S INELIGIBILITY TO VOTE SHALL BE REFLECTED IN THE MINUTES OF THE MEETING IT IS THE COLLEGE'S INTENT TO AVOID CONFLICTS BETWEEN THE PERSONAL INTERESTS OF EMPLOYEES AND THE INTERESTS OF THE COLLEGE IN THE EVENT AN EMPLOYEE, OR THEIR FAMILY MEMBER, MAY HAVE A FINANCIAL, PERSONAL OR PROFESSIONAL INTEREST THAT COULD POTENTIALLY CREATE A CONFLICT OF INTEREST IN ANY DECISION OR TRANSACTION INVOLVING THE COLLEGE, THE EMPLOYEE MUST DISCLOSE CLEARLY AND FULLY IN WRITING TO THE APPROPRIATE DIVISION VICE PRESIDENT THE NATURE OF THE DECISION OR TRANSACTION AND THE POTENTIAL CONFLICT OF INTEREST AND REFRAIN FROM PARTICIPATING IN THE COLLEGE'S CONSIDERATION OF THE TRANSACTION OR THE PROCESSING OF THE TRANSACTION
	FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT'S COMPENSATION IS REVIEWED, AND ADJUSTED IF NECESSARY, ANNUALLY BY THE BOARD OF REGENTS EXECUTIVE COMMITTEE HUMAN RESOURCES PROVIDES SURVEY DATA FROM THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION FOR HUMAN RESOURCES TYPICALLY, THIS INFORMATION IS BASED ON APPROXIMATELY 15-20 SCHOOLS THAT COMPARE TO AUGSBURG REGARDING ENROLLMENT SIZE, ENDOWMENT, UNDERGRADUATE AND GRADUATE PROGRAMS AS WELL AS OTHER LUTHERAN COLLEGES THIS INFORMATION IS SENT TO THE EXECUTIVE COMMITTEE EACH SUMMER AND THEN THE REVIEW OCCURS DURING THE NEXT FEW MONTHS BEFORE BEING COMMUNICATED TO THE PRESIDENT IN FALL BY THE HUMAN RESOURCES DIRECTOR THIS PROCESS WAS LAST UNDERTAKEN IN SUMMER AND FALL, 2011 FOR THE PRESIDENT, P PRIBBENOW THE PRESIDENT ANNUALLY REVIEWS THE COMPENSATION FOR ALL CABINET MEMBERS HE DETERMINES THE COMPENSATION FOR DIRECT REPORTS, BUT LEAVES THE FINAL DECISION TO THE APPROPRIATE VICE PRESIDENT FOR CABINET MEMBERS THAT DO NOT REPORT DIRECTLY TO HIM HUMAN RESOURCES PROVIDES SURVEY DATA FROM THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION FOR HUMAN RESOURCES, AS WELL AS INDUSTRY SPECIFIC COMPENSATION INFORMATION FOR CERTAIN POSITIONS TYPICALLY, THIS INFORMATION IS BASED ON APPROXIMATELY 15-20 NEARBY SCHOOLS, AS WELL AS OTHER LUTHERAN COLLEGES HUMAN RESOURCES PROVIDES THIS INFORMATION TO THE PRESIDENT IN THE SPRING OF EACH YEAR AND THE REVIEW OCCURS DURING THE NEXT FEW MONTHS THE HUMAN RESOURCES DIRECTOR THEN COMMUNICATES THE COMPENSATION TO THE APPROPRIATE CABINET MEMBER AND ENSURES A PERSONNEL ACTION REQUEST FORM IS COMPLETED THIS REVIEW LAST OCCURRED IN SPRING 2012
	FORM 990, PART VI, SECTION C, LINE 19	THE COLLEGE MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -3,580,842 ADJUSTMENT OF ACTUARIAL LIABILITY 61,905 CHANGE IN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES -43,836 TOTAL TO FORM 990, PART XI, LINE 5 - 3,562,773

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
AUGSBURG COLLEGE

Employer identification number  
41-0694721

Part I

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ZEBRA INVESTMENTS SIX LIMITED FIVE SIMPSON STREET WINDHOEK, WEST WA	FOREIGN CAMPUS	WA	AUGSBURG COLLEGE	C	73,994	412,181	100 000 %

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

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 (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011



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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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**TY 2011 Itemized Other Current Liabilities Schedule****Name:** AUGSBURG COLLEGE**EIN:** 41-0694721

<b>Corporation Name</b>	<b>Corporation EIN</b>	<b>Description</b>	<b>Beginning Amount</b>	<b>Ending Amount</b>
ZEBRA INVESTMENTS SIX (PROPRIETARY) LIMI	APPLD FOR	DEFERRED REVENUE	331,336	12,390
		BANK OVERDRAFT	5,960	0
		CURRENT INTERCOMPANY PAYABLE	0	234,579

**TY 2011 Itemized Other Current Assets  
Schedule**

**Name:** AUGSBURG COLLEGE  
**EIN:** 41-0694721

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
ZEBRA INVESTMENTS SIX (PROPRIETARY) LIMI	APPLD FOR	CURRENT INTERCOMPANY RECEIVABLE	151,142	0

## TY 2011 Other Deductions Schedule

**Name:** AUGSBURG COLLEGE

**EIN:** 41-0694721

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PROJECT EXPENSES	4,842,023	625,824