



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



No status issue
436860145 SEP 09 '15

1206

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☒ Amended return
☐ Application pending

C Name of organization

COE COLLEGE

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
% BUSINESS OFFICE; 1220 1ST AVE NE

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

CEDAR RAPIDS, IA 52402

F Name and address of principal officer: **JAMES R PHIFER**

1220 FIRST AVE NE, CEDAR RAPIDS, IA 52402

D Employer identification number

42-0686467

E Telephone number

319-399-8643

G Gross receipts \$

88,989,379.

H(a) Is this a group return

for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

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

H(c) Group exemption number

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **WWW.COE.EDU**

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: **1881** **M** State of legal domicile: **IA**

Part I Summary

Activities & Governance	Revenue	Expenses	Net Assets or Fund Balances
1 Briefly describe the organization's mission or most significant activities. COE COLLEGE IS A PRIVATE, FOUR-YEAR CO-EDUCATIONAL LIBERAL ARTS COLLEGE			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
3 Number of voting members of the governing body (Part VI, line 1a)	3		
4 Number of independent voting members of the governing body (Part VI, line 1b)	4		
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5		
6 Total number of volunteers (estimate if necessary)	6		
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		
7b Net unrelated business taxable income from Form 990-T, line 34	7b		
8 Contributions and grants (Part VIII, line 1h)	8		
9 Program service revenue (Part VIII, line 2g)	9		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13		
14 Benefits paid to or for members (Part IX, column (A), line 4)	14		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15		
16a Professional fundraising fees (Part IX, column (A), line 11e)	16a		
16b Total fundraising expenses (Part IX, column (D), line 25)	16b		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17		
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	18		
19 Revenue less expenses Subtract line 18 from line 12	19		
20 Total assets (Part X, line 16)	20		
21 Total liabilities (Part X, line 26)	21		
22 Net assets or fund balances Subtract line 21 from line 20	22		

Part II Signature Block

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

Sign Here Signature of officer **Michael L White** Date **7/28/2015**

Preparer **Use Only** Print/Type preparer's name **CARLEY UMSTEAD** Preparer's signature **Carley Umstead** Date **7-20-15** Check ☐ if self-employed PTIN **P00982177**

Firm's name **MCGLADREY LLP** Firm's EIN **42-0714325**

Firm's address **221 THIRD AVE SE, STE 300 CEDAR RAPIDS, IA 52401** Phone no. **3192985333**

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

915

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

- 1 Briefly describe the organization's mission

SEE SCHEDULE O

- 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 \$ 43,701,024. including grants of \$ 23,055,697.) (Revenue \$ 41,785,333.)EDUCATIONAL-COEDUCATIONAL INSTITUTE OFFERING A 4 YR COURSE IN THE ARTS & SCIENCES, SUMMER, GRADUATE STUDY, MASTERS OF ARTS IN TEACHING PROGRAMS ARE MAINTAINED IN ADDITION TO THE REGULAR SCHOOL YEAR. THERE ARE 1,312 FALL TERM AND 1,241 SPRING TERM FULL TIME STUDENTS AND 133 PART TIME STUDENTS.4b (Code _____) (Expenses \$ 4,618,842. including grants of \$ _____) (Revenue \$ 7,676,511.)AUXILIARY ENTERPRISES-INCLUDING RESIDENCE HALLS & COLLEGE RENTAL HOUSING, FOOD SERVICES, STUDENT UNION & SUMMER CONFERENCES.4c (Code _____) (Expenses \$ 5,135,615. including grants of \$ _____) (Revenue \$ _____)PROGRAM SERVICES-EXPENDITURES FOR OPERATION AND MAINTENANCE OF FACILITIES

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

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

4e Total program service expenses **53,455,481.**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 230		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 1462		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If "Yes," enter the name of the foreign country. CAYMAN ISLANDS See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12. 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders. 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b		
c	Enter the amount of reserves on hand. 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

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

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	40	
b Enter the number of voting members included in line 1a, above, who are independent	37	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2 X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
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	X
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	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a X	
b Each committee with authority to act on behalf of the governing body?	8b X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
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 X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
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 X	
13 Did the organization have a written whistleblower policy?	13 X	
14 Did the organization have a written document retention and destruction policy?	14 X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a X	
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b X	
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," 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 **NY**

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **RICHARD E RHEINSCHMIDT - (319) 399-8643**
COE COLLEGE-1220 1ST AVE NE, CEDAR RAPIDS, IA 52402

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) JAMES R PHIFER TRUSTEE - PRESIDENT	40.00	X		X				240,204.	0.	39,296.
(2) TERRY ABERNATHY TRUSTEE	1.00	X						0.	0.	0.
(3) DARYL BANKS TRUSTEE	1.00	X						0.	0.	0.
(4) PETER BIRKEY TRUSTEE	1.00	X						0.	0.	0.
(5) STEVEN L CAVES TRUSTEE	1.00	X						0.	0.	0.
(6) ROBERT CHIUSANO TRUSTEE	1.00	X						0.	0.	0.
(7) TOM ELLIS TRUSTEE	1.00	X						0.	0.	0.
(8) DAVID GEHRING TRUSTEE - SECRETARY	1.00	X		X				0.	0.	0.
(9) JOHN GIROTTI TRUSTEE - VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(10) KENT GOLDER TRUSTEE - SECOND VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(11) TONY GOLOBIC TRUSTEE	1.00	X						0.	0.	0.
(12) KEITH HALL TRUSTEE	1.00	X						0.	0.	0.
(13) GENE HENDERSON TRUSTEE - CHAIRMAN	1.00	X		X				0.	0.	0.
(14) KENT HERINK TRUSTEE	1.00	X						0.	0.	0.
(15) SHIRLEY HUGHES TRUSTEE	1.00	X						0.	0.	0.
(16) DOUG HYDE TRUSTEE	1.00	X						0.	0.	0.
(17) BILL JOHNSON TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) STEVEN KLINE TRUSTEE	1.00	X						0.	0.	0.
(19) MARY JEANNE KROB TRUSTEE	1.00	X						0.	0.	0.
(20) JOAN M LIPSKY TRUSTEE	1.00	X						0.	0.	0.
(21) VINCENT MARTIN TRUSTEE	1.00	X						0.	0.	0.
(22) JULIE MCLEAN TRUSTEE	1.00	X						0.	0.	0.
(23) CURT MENEFEFEE TRUSTEE	1.00	X						0.	0.	0.
(24) PAUL MEYER TRUSTEE - TREASURER	1.00	X		X				0.	0.	0.
(25) LIZA OVROM TRUSTEE	1.00	X						0.	0.	0.
(26) CHUCK PETERS TRUSTEE	1.00	X						0.	0.	0.
1b Sub-total								240,204.	0.	39,296.
c Total from continuation sheets to Part VII, Section A								1,152,767.	0.	187,343.
d Total (add lines 1b and 1c)								1,392,971.	0.	226,639.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **9**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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
WEITZ COMPANY LLC 1065 SIERRA CT NE, CEDAR RAPIDS, IA 52402	CONSTRUCTION	6,903,601.
SODEXO, INC, 9801 WASHINGTON BLVD, GAITHERSBURG, MD 20878	FOOD SERVICE	2,181,497.
OLMSTEAD CONSTRUCTION INC 651 58TH AVE CT, CEDAR RAPIDS, IA 52404	CONSTRUCTION	827,316.
ADVANCE BUILDERS CORP 707 27TH AVE SW, CEDAR RAPIDS, IA 52404	CONSTRUCTION	511,887.
BWBR ARCHITECTS, 380 SAINT PETER ST STE 600, ST PAUL, MN 55102	ARCHITECT	481,977.

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 **7**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2011)

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	9,500.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	4393005.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8310260.				
	g Noncash contributions included in lines 1a-1f \$		1,787,589.				
	h Total. Add lines 1a-1f			12,712,765.			
Program Service Revenue	Business Code						
	2 a STUDENT TUITION/FEES		611600	41,375,998.	41,375,998.		
	b AUXILIARY ENTERPRISES		611600	7676511.	7676511.		
	c MISC FEES & CHARGE		611710	409,335.	409,335.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			49,461,844.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3622903.			3,622,903.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			<131,670.>			<131670.>
	8 a Gross income from fundraising events (not including \$ 9,500. of contributions reported on line 1c) See Part IV, line 18	a		19,635.			
	b Less direct expenses	b		21,912.			
	c Net income or (loss) from fundraising events			<2,277.>			<2,277.>
	9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions				65,663,565.	49,461,844.	0.	3,488,956.

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	23,055,697.	23,055,697.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,065,615.		592,897.	472,718.
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	15,312,505.	13,821,758.	1,312,744.	178,003.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	3,848,177.	3,120,364.	491,088.	236,725.
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	50,670.		50,670.	
c Accounting	121,505.	3,000.	118,505.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	45,691.		45,691.	
g Other				
12 Advertising and promotion	411,737.	218,756.	130,038.	62,943.
13 Office expenses	998,400.	658,783.	188,308.	151,309.
14 Information technology	229,737.	410,458.	<207,211.>	26,490.
15 Royalties				
16 Occupancy	2,615,362.	2,477,736.	137,626.	
17 Travel	689,831.	524,962.	57,686.	107,183.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	888,767.	888,767.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,506,279.	2,506,279.		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONTRACTED SERVICES	2,394,681.	2,260,808.	133,873.	
b INSTRUCTIONAL EXPENSE	2,073,739.	1,991,923.		81,816.
c EQUIP, RENTAL & MAINT	666,230.	415,086.	246,211.	4,933.
d RECRUITING	382,588.	382,588.		
e All other expenses	1,330,286.	718,516.	575,460.	36,310.
25 Total functional expenses. Add lines 1 through 24e	58,687,497.	53,455,481.	3,873,586.	1,358,430.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	22,322,730.	2	5,953,302.
	3 Pledges and grants receivable, net	2,084,451.	3	2,680,120.
	4 Accounts receivable, net	497,460.	4	506,496.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	750,000.	5	750,000.
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	453,482.	9	672,218.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 84,785,431.		
	b Less accumulated depreciation	10b 27,808,596.	10c	56,976,835.
	11 Investments - publicly traded securities	46,668,453.	11	63,838,950.
	12 Investments - other securities. See Part IV, line 11	11,412,333.	12	14,492,568.
	13 Investments - program-related. See Part IV, line 11	7,610,905.	13	7,360,659.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	11,167,834.	15	14,478,349.
16 Total assets. Add lines 1 through 15 (must equal line 34)	152,035,827.	16	167,709,497.	
Liabilities	17 Accounts payable and accrued expenses	3,797,217.	17	6,483,658.
	18 Grants payable		18	
	19 Deferred revenue	183,506.	19	178,044.
	20 Tax-exempt bond liabilities	19,196,788.	20	21,214,037.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	975,000.	23	2,750,000.
	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	10,643,529.	25	11,125,029.
	26 Total liabilities. Add lines 17 through 25	34,796,040.	26	41,750,768.
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	32,144,895.	27	35,720,060.
	28 Temporarily restricted net assets	6,216,171.	28	6,585,540.
	29 Permanently restricted net assets	78,878,721.	29	83,653,129.
	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	117,239,787.	33	125,958,729.	
34 Total liabilities and net assets/fund balances	152,035,827.	34	167,709,497.	

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	65,663,565.
2	Total expenses (must equal Part IX, column (A), line 25)	2	58,687,497.
3	Revenue less expenses Subtract line 2 from line 1	3	6,976,068.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	117,239,787.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,742,874.
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	125,958,729.

Part XII Financial Statements and Reporting

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

☐

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2011)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

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

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

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

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

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

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

h ☐ Provide the following information about the supported organization(s).

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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 section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 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 ☐

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 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

COE COLLEGE

Employer identification number

42-0686467

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ 14,116,983.

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

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

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

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

a ☒ Public exhibitiond ☒ Loan or exchange programsb ☒ Scholarly researche ☒ Other EDUCATIONALc ☒ Preservation for future generations

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

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

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

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

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

☐ Yes☐ No

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	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	78,484,551.	75,721,149.	70,206,609.	77,956,009.	
b Contributions	4,908,284.	590,165.	1,168,959.	1,458,007.	
c Net investment earnings, gains, and losses	2,734,108.	6,618,173.	9,495,167.	<1,927,639.>	
d Grants or scholarships	1,333,107.	1,346,092.	1,313,966.	1,501,083.	
e Other expenditures for facilities and programs	<512,560.>	3,098,844.	3,835,620.	5,778,685.	
f Administrative expenses					
g End of year balance	85,306,396.	78,484,551.	75,721,149.	70,206,609.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment 0.00 %b Permanent endowment 94.47 %c Temporarily restricted endowment 5.53 %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		12,084,915.		12,084,915.
b Buildings		50,882,251.	19,082,367.	31,799,884.
c Leasehold improvements		2,061,056.	1,458,784.	602,272.
d Equipment		10,393,906.	7,267,445.	3,126,461.
e Other		9,363,303.		9,363,303.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				56,976,835.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CASH VALUE OF LIFE		
(B) INSURANCE	636,318.	END-OF-YEAR MARKET VALUE
(C) TRUST AGREEMENTS	8,743,938.	END-OF-YEAR MARKET VALUE
(D) ALTERNATIVE INVESTMENTS	3,414,910.	END-OF-YEAR MARKET VALUE
(E) REAL EST, LAND & MNRL		
(F) RIGHTS	1,697,402.	END-OF-YEAR MARKET VALUE
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	14,492,568.	

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

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

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

(a) Description	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE	361,366.
(2) ARTWORK	14,116,983.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	14,478,349.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO US GOVT-PERKINS LOAN	5,578,472.
(3) ANNUITY PAYABLE	1,410,440.
(4) DEPOSITS HELD ON BEHALF OTHERS	264,511.
(5) LIABILITY TO LIFE INCOME	
(6) BENEFICIARIES	543,600.
(7) ACCRUED PENSION COST	1,838,219.
(8) ACCRUED LOSS ON INTEREST RATE	
(9) SWAPS	1,489,787.
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	11,125,029.

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

2. FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	65,663,565.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	58,687,497.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	6,976,068.
4	Net unrealized gains (losses) on investments	4	<580,786.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	2,323,660.
9	Total adjustments (net) Add lines 4 through 8	9	1,742,874.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	8,718,942.

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	41,981,391.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	<626,477.>
e	Add lines 2a through 2d	2e	<626,477.>
3	Subtract line 2e from line 1	3	42,607,868.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	23,055,697.
c	Add lines 4a and 4b	4c	23,055,697.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	65,663,565.

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

1	Total expenses and losses per audited financial statements	1	35,586,109.
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	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	35,586,109.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	23,101,388.
c	Add lines 4a and 4b	4c	23,101,388.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	58,687,497.

Part XIV Supplemental Information

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

PART III, LINE 4: THE COMMITTEE ON THE PERMANENT COLLECTION OF ART SHALL

DETERMINE IF THE PROPOSED GIFT OF ARTWORK IS SUITABLE FOR ACCEPTANCE BY

CONSIDERING WHETHER THE FOLLOWING CONDITIONS HAVE BEEN MET:

THE ARTWORK FURTHERS THE MISSION OF COE COLLEGE.

THE ARTWORK IS COMPATIBLE WITH OR COMPLEMENTARY TO THE CURRENT ART

COLLECTION.

THE DONOR HAS VALID OWNERSHIP OF THE ARTWORK, AND IS FREE TO CONVEY THE

Part XIV Supplemental Information (continued)

WORK.

THERE ARE NO UNTENABLE RESTRICTIONS, RESERVATIONS OR LIMITATIONS PLACED ON THE ARTWORK OR ITS DISPLAY.

THE COSTS FOR RESTORATION, MAINTENANCE AND INSURANCE ARE REASONABLE AND APPROPRIATE.

THE COMMITTEE ON THE PERMANENT COLLECTION OF ART PROVIDES THE PRESIDENT WITH A RECOMMENDATION FOR ACCEPTANCE OR REFUSAL.

PART V, LINE 4: THE COE COLLEGE ENDOWMENT FUND HAS BEEN ESTABLISHED BY THE BOARD OF TRUSTEES AS AN INVESTMENT PORTFOLIO FOR THE ASSETS CONTRIBUTED BY DONORS FOR THE CONTINUING SUPPORT OF THE COLLEGE AND OTHER DONOR DESIGNATED PURPOSES. THE DEVELOPMENT AND EXPANSION OF THIS FUND IS AN IMPORTANT PART OF THE COLLEGE'S OBJECTIVES FOR MAINTAINING QUALITY IN FACULTY, STUDENTS AND FACILITIES.

THE FUND IS COMPRISED OF PERMANENT, TERM AND QUASI ENDOWMENT ASSETS. ALL ENDOWMENT INCOME SUPPORTS THE COLLEGE OPERATIONS AND PROVIDES SCHOLARSHIPS FOR STUDENTS.

PART X, LINE 2: THE COLLEGE IS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE COLLEGE MAY BE SUBJECT TO FEDERAL AND STATE INCOME TAXES ON ANY NET INCOME FROM UNRELATED BUSINESS ACTIVITIES. THE COLLEGE FILES A FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX) ANNUALLY AND UNRELATED BUSINESS INCOME (UBI) IS REPORTED ON FORM 990-T, AS APPROPRIATE. MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX POSITIONS, WHICH INCLUDE SUCH MATTERS AS THE TAX EXEMPT STATUS AND VARIOUS POSITIONS RELATIVE TO POTENTIAL SOURCES OF UBI. AS OF JUNE 30, 2012 AND 2011, THERE WERE NO UNCERTAIN TAX BENEFITS

Part XIV Supplemental Information (continued)

IDENTIFIED AND RECORDED AS A LIABILITY. FORMS 990 AND 990-T FILED BY THE COLLEGE ARE NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR THE FISCAL YEARS ENDED JUNE 30, 2008 AND PRIOR.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

ADJUSTMENT FOR FACULTY RETIREMENT PLAN	63,647.
CHANGE IN FMV - INTEREST RATE SWAP	-600,265.
CHANGE IN ANNUITY & LIFE AGREEMENTS	-424,722.
CHANGE IN ACCOUNTING PRINCIPLE, ARTWORK HELD	3,285,000.
TOTAL TO SCHEDULE D, PART XI, LINE 8	2,323,660.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT EXPENSES RECLASSIFIED AS AN EXPENSE	-45,691.
UNREALIZED LOSS ON INVESTMENTS	-580,786.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	-626,477.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COLLEGE AWARDED FINANCIAL AID	23,055,697.
-------------------------------	-------------

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

COLLEGE AWARDED FINANCIAL AID	23,055,697.
INVESTMENT EXPENSES RECLASSIFIED FROM REVENUE	45,691.
TOTAL TO SCHEDULE D, PART XIII, LINE 4B	23,101,388.

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2011

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

► 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.

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.

If you need more space, use Part II

THE RACIALLY NONDISCRIMINATORY POLICY IS PUBLISHED THROUGH
THE NEWSPAPER IN EMPLOYMENT ADVERTISEMENT AND IN THE COLLEGE
HANDBOOK.

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain. If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, explain on Part II
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

YES NO

1 X

2 X

3 X

4a X

4b X

4c X

4d X

5a X

5b X

5c X

5d X

5e X

5f X

5g X

5h X

6a X

6b X

7 X

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

Schedule E (Form 990 or 990-EZ) (2011)

Part II

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

SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

COE COLLEGE RECEIVES FEDERAL AND STATE FINANCIAL AID AND GRANTS.

**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

2011Open to Public
Inspection

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

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 its grants and other 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 its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICE	STUDY ABROAD	38,819.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICE	STUDY ABROAD	254,309.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICE	STUDY ABROAD	40,729.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICE	STUDY ABROAD	44,300.
3 a Sub-total	0	0			378,157.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			378,157.

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

Schedule F (Form 990) 2011

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, Return by a U.S. Transferor of Property to a Foreign Corporation (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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (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, Information 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

Schedule F (Form 990) 2011

Department of the Treasury
Internal Revenue Service

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.

Open To Public Inspection

Employer identification number
42-0686467

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

- ☐ Yes ☐ No

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ATHLETIC GOLF OUTING (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	29,135.			29,135.
	2 Less: Charitable contributions	9,500.			9,500.
	3 Gross income (line 1 minus line 2)	19,635.			19,635.
Direct Expenses	4 Cash prizes	650.			650.
	5 Noncash prizes				
	6 Rent/facility costs	19,945.			19,945.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,317.			1,317.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(21,912)
	11 Net income summary. Combine line 3, column (d), and line 10				<2,277.>

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				
Direct Expenses	2 Cash prizes				
	3 Noncash 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 line 1, column d, and line 7				

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 Enter 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 of the third party

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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

2011

Open to Public Inspection

Name of the organization

COE COLLEGE

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

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

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

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

recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government

(c) IRC section if applicable	(d) Amount of cash grant

(e) Amount of non-cash

(f) Method of valuation (book, FMV, appraisal, other)

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

Employer identification number
42-0686467

☒ Yes ☐ No

No
☐

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

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

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ENDOWED PRIZES	66	31,421.	0.	N/A	N/A
GIFT PRIZES	19	4,330.	0.	N/A	N/A
GIFT SCHOLARSHIPS	68	1,230,903.	0.	N/A	N/A
ENDOWED SCHOLARSHIPS	302	1,851,683.	0.	N/A	N/A
GENERAL SCHOLARSHIPS	1311	19,150,000.	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					

SCHEDULE I, PART I, LINE 2: COE COLLEGE RECEIVES VARIOUS FEDERAL GRANTS

FROM NSF, DEPT OF EDUCATION AND OTHER AGENCIES OR BRANCHES OF THE US

GOVERNMENT. SEPARATE ACCOUNTS ARE USED FOR EACH GRANT TO MONITOR RECEIPTS

AND DISBURSEMENTS. THE COLLEGE FOLLOWS APPROPRIATE ACCOUNTING AND INTERNAL

CONTROL PROCEDURES. ALL REQUIRED FINANCIAL REPORTING TO THE GRANT PROVIDER

ARE COMPLETED TIMELY AND AUDITS BY AN INDEPENDENT CPA FIRM ARE DONE WHEN

REQUIRED. THE COLLEGE ANNUALLY FILES AN A-133.

**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, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

Part I Questions Regarding Compensation

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

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

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

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

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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b X

2 X

4a X

4b X

4c X

5a X

5b X

6a X

6b X

7 X

8 X

9

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts 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 as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAMES R PHIFER	(i) 227,121.	0.	13,083.	16,100.	23,196.	279,500.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2 RICHARD MEISTERLING	(i) 154,616.	0.	9,827.	10,913.	7,529.	182,885.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
3 LOUIS STARK	(i) 120,067.	0.	11,564.	8,834.	15,938.	156,403.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
4 MICHAEL WHITE	(i) 153,392.	0.	8,465.	11,216.	16,608.	189,681.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
5 RICHARD RHEINSCHMIDT	(i) 136,803.	0.	8,310.	9,736.	8,499.	163,348.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
6 MARIE BAEHR TIMKO	(i) 134,034.	0.	464.	9,812.	15,969.	160,279.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
7 STEVEN FELLER	(i) 99,403.	0.	31,116.	7,373.	15,586.	153,478.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A: EMPLOYMENT AGREEMENT STATES COE COLLEGE REQUIRES THAT ITS PRESIDENT LIVE IN A PRESIDENT'S HOUSE OR MANOR OWNED BY THE COLLEGE BECAUSE OF ITS REQUIREMENT THAT THE PRESIDENT CONDUCT SIGNIFICANT BUSINESS ACTIVITIES AND COLLEGE RELATED ENTERTAINMENT ON COLLEGE PROPERTY. THE RESIDENCE LOCATED AT 370 34TH STREET SE, CEDAR RAPIDS, IOWA, WHICH IS OWNED BY THE COLLEGE, IS DESIGNATED THE OFFICIAL COLLEGE MANOR.

COUNTRY CLUB DUES ARE INCLUDED IN TAXABLE INCOME ON W-2S.

PART I, LINE 4B: THE PRESIDENT'S DEFERRED COMPENSATION PLAN IS A 457(F) PLAN.

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

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 Part VI.

► Attach to Form 990. ► See separate instructions.

ENTITY 1

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

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) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF ROBINS, IOWA	42-0887558	NONE	07/22/09	2513333	SEE PART VI		X		X		X
B CITY OF ROBINS, IOWA	42-0887558	NONE	07/22/09	5819543	SEE PART VI		X		X		X
C CITY OF HIAWATHA, IOWA	42-6025060	NONE	06/08/07	4500000	CONSTRUCTION/RENOVATION		X		X		X
D CITY OF ROBINS, IOWA	42-0887558	NONE	07/22/09	6100000	SEE PART VI		X		X		X

Part II Proceeds

	A		B		C		D
	Yes	No	Yes	No	Yes	No	
1 Amount of bonds retired							
2 Amount of bonds legally defeased							
3 Total proceeds of issue		2,513,333.		5,861,846.		4,500,000.	6,106,078.
4 Gross proceeds in reserve funds							
5 Capitalized interest from proceeds							
6 Proceeds in refunding escrows							
7 Issuance costs from proceeds		41,461.		59,192.		34,326.	23,929.
8 Credit enhancement from proceeds							
9 Working capital expenditures from proceeds							
10 Capital expenditures from proceeds		2,471,872.		1,953,507.		4,465,674.	1,582,149.
11 Other spent proceeds				3,849,147.			4,500,000.
12 Other unspent proceeds							
13 Year of substantial completion	2002		2005		2008		2010
	Yes	No	Yes	No	Yes	No	No
14 Were the bonds issued as part of a current refunding issue?		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
	Yes	No	Yes	No	Yes	No	
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X	X
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X	X

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

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 Part VI.
► Attach to Form 990. ► See separate instructions.

ENTITY 2

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

COE COLLEGE

Employer identification number
42-0686467

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) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF ROBINS, IOWA	42-0887558	NONE	08/05/11	4800000.	CONSTRUCTION/RENOVATION		X		X		X
B											
C											
D											

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue		2,081,145.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds		24,124.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds		1,350,001.						
11 Other spent proceeds								
12 Other unspent proceeds		707,020.						
13 Year of substantial completion								
14 Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
15 Were the bonds issued as part of an advance refunding issue?		X						
16 Has the final allocation of proceeds been made?		X						
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		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 of bond-financed property?		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?			X					
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		.00		4.18		.00		.00
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		.00		.00		.00		.00
6 Total of lines 4 and 5		.00		4.18		.00		.00
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 qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintergrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a guaranteed investment contract (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

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

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 of bond-financed property?		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						
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		.00		%		%		%
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		.00		%		%		%
6 Total of lines 4 and 5		.00		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2 Is the bond issue a variable rate issue?	X							
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	US BANK N.A.							
c Term of hedge	10.0000000							
d Was the hedge superintergrated?		X						
e Was the hedge terminated?		X						
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?		X						

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 PART VI SUPPLEMENTAL EXPLANATION SHEET

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

SCHEDULE K, PART I, COLUMN F, LINE A, ENTITY 1

REISSUANCE OF 2002 BONDS (4/8/2002) WHICH WERE USED FOR
CONSTRUCTION/RENOVATION

SCHEDULE K, PART I, COLUMN F, LINE B, ENTITY 1

REISSUANCE OF 2004 BONDS (6/29/2004) WHICH WERE USED TO REFUND PRIOR
ISSUE (6/6/2000) AND FOR CONSTRUCTION/RENOVATION

SCHEDULE K, PART I, COLUMN F, LINE D, ENTITY 1

REFUND PRIOR ISSUE (7/15/1998), CONSTRUCTION/RENOVATION

SCHEDULE K, PART II, LINE 3, ENTITY 1

THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART 1, COLUMN(E)
DUE TO INVESTMENT EARNINGS.

SCHEDULE K, PART II, LINE 3, ENTITY 2

THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART 1, COLUMN(E)
AS THIS DEBT WAS ISSUED ON A DRAW-DOWN BASIS AND THE TOTAL PRINCIPAL
AVAILABLE HAS NOT YET BEEN DRAWN.

Department of the Treasury
Internal Revenue Service

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

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

2011

Open To Public Inspection

COE COLLEGE

Employer identification number
42-0686467

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

[illegible]

► \$ _____

► \$ _____

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
JOHN STROHM - END		X	750,000.	750,000.		X	X		X	
Total				\$ 750,000.						

Total ▶ \$ 750,000.

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

[illegible]

SEE PART V FOR CONTINUATIONS

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
STEVE CAVES	TRUSTEE	910,015.	STEVE IS AN		X
JAMES PHIFER	PRESIDENT	10,096.	JIM'S WIFE,		X
JOHN STROHM	TRUSTEE	0.	JOHN STROHM		X

Part V Supplemental Information

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

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: JOHN STROHM

(A) PURPOSE OF LOAN: ENDOW INVESTMENT

(B) LOAN TO OR FROM ORGANIZATION? = FROM

(C) ORIGINAL PRINCIPAL AMOUNT \$ 750,000. (D) BALANCE DUE \$ 750,000.

(E) LOAN IN DEFAULT? = NO

(F) APPROVED BY BOARD OR COMMITTEE? = YES

(G) WRITTEN AGREEMENT? = YES

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: STEVE CAVES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

TRUSTEE

(C) AMOUNT OF TRANSACTION \$ 910,015.

(D) DESCRIPTION OF TRANSACTION: STEVE IS AN EMPLOYEE OF US BANK WHICH PROVIDES SERVICES TO COE COLLEGE.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: JAMES PHIFER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

Part V Supplemental Information

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

PRESIDENT

(C) AMOUNT OF TRANSACTION \$ 10,096.

(D) DESCRIPTION OF TRANSACTION: JIM'S WIFE, LINNIE WAS EMPLOYED BY COE COLLEGE.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: JOHN STROHM

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

TRUSTEE

(C) AMOUNT OF TRANSACTION \$ -0-

(D) DESCRIPTION OF TRANSACTION: JOHN STROHM AND COE COLLEGE HAVE GREATER THAN 10% OWNERSHIP INTERESTS IN FRTL-US2010, LLLP, FRTL-US2011, LLLP, AND FRTL-US2012, LLLP.

(E) SHARING OF ORGANIZATION REVENUES? = NO

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization **COE COLLEGE** Employer identification number **42-0686467**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash 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	31	1,787,589.	FMV
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				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II

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

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) (2011)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): COE COLLEGE IS REPORTING THE NUMBER OF CONTRIBUTIONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2011
Open to Public
Inspection

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

FORM 990, PART VI, SECTION A, LINE 2: JOHN STROHM - TRUSTEE, DAVID CARSON
- TRUSTEE, KEN GOLDER - TRUSTEE AND RICHARD MEISTERLING - OFFICER & KEY
EMPLOYEE HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11: THE COLLEGE'S BUDGET AND AUDIT
SUBCOMMITTEE OF THE BOARD OF TRUSTEES CONDUCTS A THOROUGH REVIEW OF ALL
FORM 990'S FILED BY THE COLLEGE PRIOR TO BEING FILED WITH THE IRS. THE
SUBCOMMITTEE RECEIVES THE RETURNS FROM THE PAID PREPARER, MCGLADREY LLP THE
SUBCOMMITTEE AND A REPRESENTATIVE FROM MCGLADREY REVIEW THE RETURNS
TOGETHER. THE BOARD OF TRUSTEES ARE ADVISED OF THE REVIEW BY THE BUDGET AND
AUDIT SUBCOMMITTEE THAT THE RETURNS ARE AVAILABLE FOR FURTHER REVIEW BY ANY
BOARD MEMBER AND THAT THE RETURNS WILL BE FILED BY THE DUE DATES.

FORM 990, PART VI, SECTION B, LINE 12C: THE COLLEGE REQUIRES ALL TRUSTEES,
OFFICERS OR KEY EMPLOYEES AND SUBSTANTIAL CONTRIBUTORS TO ANNUALLY COMPLETE
THE CONFLICT OF INTEREST QUESTIONNAIRE CONCERNING TRANSACTIONS WITH COE
COLLEGE. THE CONTROLLER FOR THE COLLEGE RECEIVES COMPLETED QUESTIONNAIRES
AND REVIEWS AND SUBMITS COMMENTS AND FINDINGS TO THE PRESIDENT OF THE
COLLEGE AND THE CHAIRMAN OF THE BOARD OF TRUSTEES. THE CHAIRMAN OF THE
BOARD THEN REVIEWS AND INFORMS THE FULL BOARD OF ANY ISSUES OR ACTIONS
REQUIRED INCLUDING MONITORING WITH AN OVERSIGHT COMMITTEE IF NECESSARY.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT,
SENIOR OFFICERS AND KEY EMPLOYEES IS REVIEWED BY A BOARD OF TRUSTEES AD HOC
COMMITTEE. THE COMMITTEE CONSIDERS EACH EMPLOYEE ON THEIR MERITS, LENGTH OF
SERVICE AND JOB RESPONSIBILITIES. THE EMPLOYEE'S COMPENSATION IS THEN

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

COMPARED TO SIMILAR POSITIONS AT OTHER COLLEGES USING SURVEYS AND BENCHMARKS FROM THE ACM (ASSOCIATED COLLEGES OF THE MIDWEST) AND IPCUA (IOWA PRIVATE COLLEGES AND UNIVERSITIES ASSOCIATION). THE COMMITTEE THEN REPORTS TO THE BOARD OF TRUSTEES THEIR DUE DILIGENCE THAT WAS PERFORMED AND DOCUMENTS THE REVIEW. THE DOCUMENTATION REGARDING THE COMPENSATION REVIEW IS RETURNED TO THE COLLEGE'S LEGAL COUNSEL FOR SAFEKEEPING.

FORM 990, PART VI, SECTION C, LINE 19: THE COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENT ARE NOT MADE AVAILABLE TO THE PUBLIC. THE COLLEGE DOES FILE VARIOUS REQUIRED REPORTS SUCH AS THE A-133 AND AUDITED FINANCIAL STATEMENTS WITH VARIOUS GOVERNMENTAL AGENCIES AND AUTHORITIES WHICH MAY THEN BECOME PUBLIC RECORD.

THE IRS FORM 990 FILED BY COE COLLEGE IS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:	-580,786.
ADJUSTMENT FOR FACULTY RETIREMENT PLAN	63,647.
CHANGE IN FMV - INTEREST RATE SWAP	-600,265.
CHANGE IN ANNUITY & LIFE AGREEMENTS	-424,722.
CHANGE IN ACCOUNTING PRINCIPLE, ARTWORK HELD	3,285,000.
TOTAL TO FORM 990, PART XI, LINE 5	1,742,874.

FORM 990, PAGE 2, PART III

ORGANIZATION'S MISSION

IT IS THE MISSION OF COE COLLEGE TO PROVIDE STUDENTS AN EDUCATION OF SUPERIOR QUALITY THAT AIMS AT PREPARING THEM FOR LIFE FOLLOWING

GRADUATION. OUR REASON TO EXIST AS AN INSTITUTION IS TO READY STUDENTS

Name of the organization	Employer identification number
COE COLLEGE	42-0686467

INTELLECTUALLY, PROFESSIONALLY, AND SOCIALLY TO LEAD PRODUCTIVE AND SATISFYING LIVES IN THE GLOBAL SOCIETY OF THE 21ST CENTURY. AS SUCH, OUR SUCCESS AS A COLLEGE IS MEASURED ACCORDING TO THE SUCCESS OF OUR GRADUATES.

WE BELIEVE THAT A LIBERAL ARTS EDUCATION IS THE BEST PREPARATION FOR LIFE. WE BELIEVE THAT SUCH AN EDUCATION ALLOWS STUDENTS TO DISCOVER WHAT THEIR REAL TALENTS AND INTERESTS ARE, AND THAT IT DEVELOPS IN THEM THE SKILLS, ABILITIES, AND HABITS OF MIND THAT WILL MAKE POSSIBLE A SUCCESSFUL CAREER IN ANY FIELD OF ENDEAVOR, INCLUDING ONES THAT DO NOT YET EXIST. INDEED, WE BELIEVE THAT WHAT DEFINES A LIBERAL ARTS EDUCATION IS ITS FOCUS ON CULTIVATING IN STUDENTS CERTAIN FUNDAMENTAL ABILITIES: THE ABILITY TO THINK LOGICALLY AND ANALYTICALLY; THE ABILITY TO COMMUNICATE CLEARLY, BOTH IN WRITING AND SPEAKING; THE ABILITY TO USE EFFECTIVELY COMPUTER TECHNOLOGY; THE ABILITY TO WORK PRODUCTIVELY AS A MEMBER OF A GROUP SEEKING TO ACHIEVE A COMMON OBJECTIVE; THE ABILITY TO MAKE INFORMED JUDGMENTS, WHETHER IN THE REALM OF ETHICAL BEHAVIOR OR IN THAT OF AESTHETIC APPRECIATION; THE ABILITY TO FOSTER AND SUSTAIN AN ATTITUDE OF INTELLECTUAL CURIOSITY AND CREATIVITY; AND THE ABILITY TO RECOGNIZE AND HONOR TRUE EXCELLENCE WHEN FOUND IN ANY FORM OR CONTEXT. FURTHERMORE, WE BELIEVE THAT IT IS IMPORTANT FOR A LIBERAL ARTS EDUCATION TO CULTIVATE IN STUDENTS A DESIRE TO UNDERSTAND, A CAPACITY FOR TOLERANCE, AND AN ABILITY TO APPRECIATE THE ETHNIC AND CULTURAL DIVERSITY THAT MAKE UP HUMAN KIND. IT IS THE MISSION OF THE COLLEGE TO DEVELOP IN STUDENTS THESE ABILITIES AND ATTITUDES, AND IN SO DOING TO PROVIDE THEM AN EDUCATION THAT DIRECTS THEM TOWARD A MEANINGFUL AND SUCCESSFUL LIFE.

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

COE'S ACADEMIC PROGRAM REFLECTS A COMMITMENT TO DEVELOPING THESE ABILITIES BY ITS INSISTENCE THAT STUDENTS ACQUIRE CERTAIN EDUCATIONAL EXPERIENCES. WE REQUIRE THAT STUDENTS COMPLETE BOTH OUR GENERAL EDUCATION REQUIREMENTS, WHICH ENSURE BREADTH OF LEARNING, AND OUR REQUIREMENTS FOR A MAJOR; WHICH GUARANTEE DEPTH OF KNOWLEDGE IN A PARTICULAR FIELD. IN ADDITION, AS PART OF EACH STUDENT'S EDUCATION, A SERIES OF INTENSIVE WRITING EXPERIENCES, SPREAD ACROSS THE FOUR YEARS OF STUDY, IS REQUIRED. BEYOND THESE REQUIREMENTS, STUDENTS ARE ENCOURAGED TO BEGIN PLANNING FOR THEIR LIVES AFTER COLLEGE EARLY ON IN THEIR UNDERGRADUATE CAREERS, AND, THROUGH CAREFUL ADVISING, THEY ARE GIVEN GUIDANCE AND DIRECTION IN THIS ENDEAVOR. INDEED, THE DEFINING FEATURE OF A COE EDUCATION IS THE REQUIREMENT THAT EVERY STUDENT PLAN AND PARTICIPATE IN ONE OF THE FOLLOWING: A SIGNIFICANT EXPERIENTIAL PROJECT, SUCH AS AN INTERNSHIP; A MAJOR SCHOLARLY UNDERTAKING; OR STUDY ABROAD. THESE EXPERIENCES WILL OFTEN, THOUGH NOT INVARIABLY, OCCUR DURING THE JUNIOR YEAR.

THE HALLMARK OF A COE EDUCATION IS OUR ATTENTION TO EACH STUDENT AS AN INDIVIDUAL. IT IS ALSO IMPORTANT THAT THE COLLEGE ENVIRONMENT AT COE REFLECTS OUR COMMITMENT TO A DIVERSE STUDENT BODY AND OVERALL COLLEGE COMMUNITY. WE BELIEVE THAT THROUGH LISTENING CAREFULLY TO EACH STUDENT AS HIS OR HER INTERESTS AND UNIQUE TALENTS ARE FORMED, AND THROUGH TAILORING AN ACADEMIC PROGRAM TO SUIT EACH STUDENT'S FUTURE, WE HELP THAT STUDENT DEVELOP ABILITIES THAT PROVIDE THE BEST PREPARATION FOR LIFE.

FORM 990, PAGE 1, PART 1, LINE 5 AND PAGE 5, PART V, LINE 2A

NUMBER OF EMPLOYEES

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

THE 1,462 IS THE NUMBER OF W-2 REPORTED. THIS REPRESENTS 953 STUDENTS
ON WORK STUDY FINANCIAL AID PROGRAM AND 509 EMPLOYEES OF COE COLLEGE.

SCHEDULE L, PART II

LOANS TO AND/OR FROM INTERESTED PERSONS

COE COLLEGE'S ENDOWMENT INVESTED \$750,000 IN A LOAN TO FARRELL-ROEH
PROPERTIES, LLP OWNED 50% BY EACH OF JOHN STROHM AND MARY PAT LINK
(WIFE) WHICH IS SECURED BY 99% INTEREST IN FRP IN FR BRUNSWICK, LLC
WHICH OWNS A GROCERY-ANCHORED SHOPPING CENTER IN BRUNSWICK, GEORGIA.
LOAN BEARS INTEREST AT 8% PER ANNUM (9.5% IF HELD TO MATURITY). THE
NOTE IS A DEMAND NOTE WITH MATURITY DATE DEFINED BY CERTAIN EVENTS.

FORM 990, PART VII

SALARY EXPLANATION

FRANCIS MARY MISKIMEN COMPENSATION LISTED IS FOR POSITION AS EMPLOYEE
OF COE COLLEGE NOT FOR POSITION AS ASSISTANT SECRETARY OF BOARD. SHE IS
A 40 HOUR PER WEEK EMPLOYEE OF THE COLLEGE.

FORM 990, PAGE 1, ITEM B

REASON FOR AMENDING - SCHEDULE K

UPON REVIEW OF THE COLLEGE'S POST-ISSUANCE COMPLIANCE PROCEDURES, IT
WAS DISCOVERED THAT THE COLLEGE HAD INACCURATELY REPORTED THE PRIVATE
BUSINESS USE PERCENTAGE RESULTING FROM A MANAGEMENT CONTRACT ON ITS
SCHEDULE K UNDER ITS 2009 BONDS IN COLUMN B. THE PERCENTAGE THAT WAS
REPORTED WAS 11.4% AND THE PRIVATE BUSINESS USE THAT SHOULD HAVE BEEN
REPORTED WAS 4.18%. AS OF AUGUST 1, 2015, THE COLLEGE AMENDED ITS
MANAGEMENT CONTRACT TO COMPLY WITH A SAFE HARBOR STANDARD UNDER REV.

PROC. 97-13 AND ANTICIPATES THAT THE PRIVATE BUSINESS AFTER SUCH DATE

Name of the organization

COE COLLEGE

Employer identification number

42-0686467

WILL BE 0%.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to 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 of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to 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)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	Yes No	
				1a	1b
(1) K RAYMOND CLARK ALUMNI CENTER TRUST	C	12,696.ACTUAL			X
(2) K RAYMOND CLARK ALUMNI CENTER TRUST	P	58,540.ACTUAL			X
(3) K RAYMOND CLARK ATHLETIC FACILITIES	C	162,632.ACTUAL			X
(4) K RAYMOND CLARK RACQUET CENTER TRUST	C	102,503.ACTUAL			X
(5) K RAYMOND CLARK RACQUET CENTER TRUST	P	253,014.ACTUAL			X
(6) MCELROY - COE LOAN FUND	R	438,801.ACTUAL			X

Part VII Supplemental Information

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

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

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) KENT PILCHER TRUSTEE	1.00	X						0.	0.	0.
(28) SIGI REYNOLDS TRUSTEE	1.00	X						0.	0.	0.
(29) DONALD RIBBLE TRUSTEE	1.00	X						0.	0.	0.
(30) BRETT RULE TRUSTEE	1.00	X						0.	0.	0.
(31) WILLIAM R SHUTTLEWORTH TRUSTEE	1.00	X						0.	0.	0.
(32) STAN SMITH TRUSTEE	1.00	X						0.	0.	0.
(33) GARY SOJKA TRUSTEE	1.00	X						0.	0.	0.
(34) BRUCE SPIVEY TRUSTEE	1.00	X						0.	0.	0.
(35) JOHN STROHM TRUSTEE	1.00	X						0.	0.	0.
(36) LORI STURDEVANT TRUSTEE	1.00	X						0.	0.	0.
(37) STEVE VAN EVERY TRUSTEE	1.00	X						0.	0.	0.
(38) CARSON VEACH TRUSTEE	1.00	X						0.	0.	0.
(39) J DAVID CARSON TRUSTEE	1.00	X						0.	0.	0.
(40) JOHN ECKSTEIN TRUSTEE	1.00	X						0.	0.	0.
(41) RICHARD MEISTERLING VP ADVANCEMENT & ASST SECY	40.00			X				164,443.	0.	18,442.
(42) LOUIS STARK VP STUDENT AFFAIRS	40.00			X				131,631.	0.	24,772.
(43) MICHAEL WHITE VP ADMINISTRATION/ASST SEC	40.00			X				161,857.	0.	27,824.
(44) RICHARD RHEINSCHMIDT CONTROLLER, ASTN SECY & TR	40.00			X				145,113.	0.	18,235.
(45) MARIE BAEHR TIMKO VP ACADEMIC AFFAIRS & DEAN	40.00			X				134,498.	0.	25,781.
(46) FRANCIS MARY MISKIMEN ASST SECY	40.00			X				56,716.	0.	10,582.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) STEVEN FELLER PROF/PHYSICS	40.00					X		130,519.	0.	22,959.
(48) MARIO AFFATIGATO PROF/PHYSICS	40.00					X		114,930.	0.	12,971.
(49) WENDY DUNN PROF/PSYCHOLOGY & DIR INST	40.00					X		113,060.	0.	25,777.
Total to Part VII, Section A, line 1c								1,152,767.		187,343.

Form 4562

Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization** 990
(Including Information on Listed Property)

OMB No 1545-0172

2011Attachment
Sequence No 179

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

COE COLLEGE

FORM 990 PAGE 10

42-0686467

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	2,494,034.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	/		27 5 yrs	MM	S/L	
	/		27 5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year	/		40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	2,494,034.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V**Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year					
43 Amortization of costs that began before your 2011 tax year					43
					12,245.
44 Total. Add amounts in column (f). See the instructions for where to report					44
					12,245.