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#### DLN: 93493104007434

**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

2012

Open to Public

Department of the Treasury

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

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

	r teveriue o							Inspection
			endar year, or tax year beging C Name of organization	nning 06-01-2012 , 2012, and endin	ng 05-31-2013	5.5 .		Aldia Alara
_	eck if app		WARTBURG COLLEGE			U Emplo	yer iden	itification number
_	Iress char		Doing Business As			42-06	80351	
_	ne chang		-					
Init	ıal return	ľ		x if mail is not delivered to street address) R	Room/suite	E Telepho	one numb	oer
Ter	mınated		100 WARTBURG BLVD					
– <sub>Am</sub>	ended ret	turn	City or town, state or country,	and ZIP + 4		(319)	352-8	411
– <sub>Apr</sub>	olication p	ending	WAVERLY, IA 50677			G Gross n	eceints ¢	88,173,356
			<b>F</b> Name and address of	f principal officer	11/-> -			· ·
			DARREL D COLSON	principal officer		s this a group iffiliates?	return	for
			100 WARTBURG BLVD					,,
			WAVERLY,IA 50677					ded?
	x-exempt	t ctatue	<b>□</b> F01/6\/2\ □ F01/6\/	(Insert no )	I	f "No," attach	a list (	(see instructions)
	<u> </u>			(iliseit lio )   4547(a)(1) 01   527		Group exempt	ion num	nber ►
W	ebsite:	► WW	W WARTBURG EDU		1.(6)			
<b>≮</b> Forr	n of orga	nızatıon	Corporation Trust Association	ciation Other 🕨	<b>L</b> Year	of formation 18	52 <b>M</b>	State of legal domicile IA
Pa	rt I	Sumi	mary		<u>'</u>			-
sovemance s	10	NDÉRG	RADUATE HIGHER EDUCA	ission or most significant activities ATION THAT CHALLENGES AND N PRESSION OF THEIR FAITH AND L		DENTS FOR L	IVES C	) F LEADERSHIP
UYCII	2 CH	heck th	ıs box দ ıf the organizatio	n discontinued its operations or disp	oosed of more th	ian 25% of its	net as	sets
5								
Acumines &				verning body (Part VI, line 1a)			3	2
				ers of the governing body (Part VI, li			4	2
5				d ın calendar year 2012 (Part V, line			5	2,04
ţ				e if necessary)			6	50
				m Part VIII, column (C), line 12 .			7a	253,47
	<b>b</b> Ne	et unrel	ated business taxable incoi	me from Form 990-T, line 34	<u> </u>		7b	
						Prior Year		Current Year
gı.			tributions and grants (Part VIII, line 1h)		6,870,5		10,081,936	
Ĭ	9	Progra			68,879,6	574	69,966,799	
Ravenue	10	Invest	ment income (Part VIII, col	umn (A), lines 3, 4, and 7d)		11,346,0	040	3,451,777
ш.			·	(A), lines 5, 6d, 8c, 9c, 10c, and 11	· —	2,234,4	484	2,649,950
				n 11 (must equal Part VIII, column (		89,330,7	787	86,150,462
				Part IX, column (A), lines 1–3).		26,625,7		27,272,004
				art IX, column (A), line 4)		20,020,	0	2,,2,2,00
				ployee benefits (Part IX, column (A),				
\$		5-10)	.s, other compensation, emp	noyee benefits (Fare 1x, column (x),		26,993,0	071	27,257,89
Expenses	16a	Profess	sional fundraising fees (Part	: IX, column (A), line 11e)			0	(
ੜੇ	ь	Total fur	ndraising expenses (Part IX, colum	ın (D), line 25) ▶-1,885,100				
ш				(A), lines 11a-11d, 11f-24e)	<del>.</del> .	24,393,0	083	24,587,938
				(must equal Part IX, column (A), line		78,011,9		79,117,837
	19	Revenu	ue less expenses Subtract	line 18 from line 12		11,318,8	865	7,032,625
net Assets of Fund Balances			<u> </u>			nning of Curre		End of Year
, <u></u>	20	Total a	ssets (Part X, line 16)		🗀	180,021,7	777	193,094,880
200						97,174,4		96,807,666
				ract line 21 from line 20		82,847,	_	96,287,214
Par	t II		ature Block		-	-1 1-		- , ,
ny ki	nowledg rer has	e and b any kn	pelief, it is true, correct, and lowledge ** ture of officer	e examined this return, including acc complete Declaration of preparer (c				
	-		ARD SEGGERMAN VP FINANCE & A or print name and title	ADMINI21 KALIUN				
			rint/Type preparer's name	Preparer's signature	Date	Check I if	PTIN	
Paid	4	TI	ROY É MARINE CPA		2014-04-10	self-employed	P00187	
			m's name 🕨 BAKER TILLY VIRO	CHOW KRAUSE LLP		Firm's EIN 🕨 39	9-085991	10
Preparer			ım's address 🟲 777 E WISCONSIN	AVENUE 32ND FLOOR		Phone no (414	) 777-55	600
160	. iniv	. ''					,	

MILWAUKEE, WI 53202

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

✓ Yes ☐ No

Form	990 (2012)					Page <b>2</b>				
Par		ent of Program Serv chedule O contains a res	-							
1	Briefly describe t	the organization's mission	n							
		GHER EDUCATION THA ESSION OF THEIR FAIT			TUDENTS FOR LIVES OF LEAD	DERSHIP AND SERVICE				
2	_	ion undertake any signific 0 or 990-EZ?		<u>-</u> ,		┌ Yes ┌ No				
	If "Yes," describe	these new services on S	chedule O							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?									
	If "Yes," describe	these changes on Scheo	lule O							
4	expenses Sectio		4) organization:	s are required to report	ree largest program services, a the amount of grants and alloc					
4a	(Code	) (Expenses \$	44,777,462	ıncludıng grants of \$	27,272,004 ) (Revenue \$	54,721,918 )				
		TUDENTS ENROLLED AND THE 2013 TERMS RESPECTIVELY	RELATED ACADEM:	IC SUPPORT, 1,708 AND 1,6	520 FULL-TIME EQUIVALENT STUDENTS	S ENROLLED FOR THE FALL				
4b	(Code	) (Expenses \$	8,486,044	ıncludıng grants of \$	) (Revenue \$	14,888,892 )				
		RISES SUPPORTS STUDENTS LI HE FALL 2012 AND WINTER 201			OVIDING BOOKS THERE WERE 1,400	AND 1,324 STUDENTS LIVING				
4c	(Code	) (Expenses \$	11,463,780	ıncludıng grants of \$	) (Revenue \$	2,534,649 )				
	ALL OTHER PROGRA	M RELATED SERVICES								
4d	Other program s	ervices (Describe in Sch	edule O )							

) (Revenue \$

including grants of \$

64,727,286

(Expenses \$

Total program service expenses ▶

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\bullet}$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 💆	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	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? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	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? If "Yes," complete Schedule F, Parts III and IV	16		No
L <b>7</b>	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 $11e^{7}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	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</i> "Yes," complete Schedule G, Part II	18		No
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2012)

Раг	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check 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   1a   2,249		. 65	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		NO
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		111	
_		8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

36	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8				
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		1 03	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>even</u> u		
			Yes	No
100				
	Did the organization have local chapters, branches, or affiliates?	10a	103	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b	103	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	100	No
b 11a 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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b		No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes	No No
b 11a b 12a c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes	No No
b 11a b 12a c 13 14 15	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?	10b  11a  12a  12b  12c  13  14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b  11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes	No No No
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No No

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- 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 SEGGERMAN 100 WARTBURG BLVD WAVERLY, IA (319) 352-8215

Form	990	(2012)
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#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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, or 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

	1									
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		( <b>D)</b> 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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	(A) Name and Title								(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W-		(F) Estimated amount of othe compensation from the organization an		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC	)	organizat relat organiza	ed	
												$\dashv$			
												+			
												_			
1b	Sub-Total		<u> </u>	<u> </u>	<u>.                                    </u>		<u>.                                    </u>	<u> </u>				+			
c	Total from continuation shee	ts to Part VII, S	ection /	<b>A</b> .				<b> -</b>							
d	Total (add lines 1b and 1c) .							Þ		1,017,457		0		201,831	
2	Total number of individuals (in \$100,000 of reportable comp	•					d abov	e) w	ho receive	d more th	an				
	#100,000 of reportable comp		- Organ											•	
_													Yes	No	
3	Did the organization list any <b>f</b> on line 1a? <i>If</i> "Yes," complete 5					, key	/ emplo	yee, •	or highes ,	t compen	sated employee	3		No	
4	For any individual listed on lin organization and related organ													NO	
	ındıvıdual		•	• •	•	•		•				4	Yes		
5	Did any person listed on line 1 services rendered to the organ									janization • • •	or individual for	5		No	
Se	ection B. Independent Co	ntractors													
1	Complete this table for your fi compensation from the organi	ve highest comp zation Report co													
		( <b>A</b> ) Name and business	address							Des	(B) cription of services		(C Compe		
SCHN	IEIDER ELECTRIC PO BOX 841868 DALL	AS TX 758241868									L CONTRACTING			438,612	
	ALOCODY 221 3RD AVENUE SE SUITE			018						CONSULTAI				321,339	
	SERVICE CORPORATION 407 S 27TH AV V 6711 CHANCELLOR DR CEDAR FALLS		3131							CLEANING: MARKETING	SERVICES G CONSULTANT			238,223	
	ERLY HEALTH CENTER 312 9TH STREET		0677							HEALTH SE				209,484	

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  $\blacktriangleright 9$ 

Part V	πі	Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII										
		Check If Sched	ule O contains a respor	nse to any question	IN this Part VIII .  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514				
10	1a	Federated cam	paigns 1a									
ınts	ь	Membership du	ıes <b>1b</b>									
Gra	c	Fundraising eve	ents <b>1c</b>									
ž Ę	ď	Related organiz										
Gif				270 222								
ns,	е	Government grant		379,233								
atio er (	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	9,702,703								
년 된 등	g		ons included in lines	2,128,940								
Contributions, Giffs, Grants and Other Similar Amounts	h	1a-1f \$ <b>Total.</b> Add lines	s 1a-1f		10,081,936							
Ca	<u> </u>	Totali Add illie.	314 11		,							
III e	2a	TUITION & FEES		Business Code 611310	F4 721 010	F4 731 010						
Program Serwce Revenue	b	AUXILIARY ENTERF	DRISES	611710	54,721,918 15,244,881	54,721,918 14,996,272	248,609					
or GE	c	AOXILLART ENTERT	- KIJEJ	611710	13,244,661	14,990,272	240,009					
2	d											
₹.	e											
<u> </u>	f	All other progra	am service revenue									
<b>₹</b>												
	<b>g</b> 3		s 2a-2f	+	69,966,799							
		and other simil	aramounts)	<b> </b>	1,487,129			1,487,129				
	4		stment of tax-exempt bond	proceeds 🕨	390,339			390,339				
	5	Royalties		•								
	6a	Gross rents	(ı) Real 113,392	(II) Personal								
	ь	Less rental	102,647									
	c	expenses Rental income	10,745									
	d	or (loss)	me or (loss)		10,745			10,745				
	u	Net rental inco	(i) Securities	(II) O ther	20,7.10			20,7.10				
	7a	Gross amount from sales of assets other	2,920,063	574,493								
	ь	than inventory Less cost or	4 500 457	242 722								
		other basis and sales expenses	1,609,467	310,780								
	C	Gain or (loss)	1,310,596	263,713	4 574 200			4 574 200				
	d 8a		55)	· · · · •	1,574,309			1,574,309				
Other Revenue		events (not inc \$	luding s reported on line 1c)									
the.	ь	Less direct ex	penses b									
Ò	С		(loss) from fundraising	events 🛌								
	9a		from gaming activities ne 19									
		occ rare iv, iii	a									
	Ь	Less direct ex	penses b									
	С		loss) from gamıng actı) ا	vities <b></b> -								
	10a	Gross sales of returns and allo										
			a									
	ь	Less cost of g	oods sold <b>b</b>									
	С		(loss) from sales of inve									
	44-	Miscellaneous		Business Code 541900	2,126,470	1,919,396		207,074				
	l .	CAMPUS GRO	_	541900	477,743	1,919,396		207,074				
	Ь	OTHER PROGE		561439	4,7,743	7//,/43	4,862					
	d	STUDENT CEN	ue	301439	30,130	30,130	7,002					
	e	Total. Add lines		🕨	·	33,130						
	12		See Instructions .		2,639,205							
	]	rocar revenue.	Sectionarions .	• • • • •	86,150,462	72,145,459	253,471	3,669,596				

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) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 27,272,004 27,272,004 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,115,927 317,409 598,398 200,120 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 19,152,800 17,019,184 1,398,634 734,982 Pension plan accruals and contributions (include section 401(k) 1,283,010 1,128,660 93,692 and 403(b) employer contributions) . . . . 60.658 4,362,179 3,847,898 318,548 Other employee benefits . . . . 195,733 10 1,343,979 98,144 1,182,686 63,149 11 Fees for services (non-employees) Management . . . . 32,232 Legal . . . . . . . . 32,232 Accounting . . . . . . . . . . . . 90,446 90,446 Lobbying . . . . . . . . . . . . Professional fundraising services See Part IV, line 17 Investment management fees . . . . . 500,000 500,000 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 772,237 521,991 56,393 193,853 Schedule O) . . . . . . . Advertising and promotion . . 258,642 239,436 18,887 12 319 13 Office expenses . . . . . . 1,459,791 1,213,448 106,601 139,742 755,577 453,346 302,231 14 Information technology . . 15 Royalties . 1,712,329 1,586,916 125,043 16 Occupancy . . . . . . 370 **17** 1,446,854 1,143,081 105,657 198,116 Travel . . . . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 19 Conferences, conventions, and meetings . . . 11,899 11,030 869 20 4,604,527 4,604,527 Payments to affiliates . . . . . . 21 22 Depreciation, depletion, and amortization . 3,730,803 3,730,803 23 419,781 389,116 30,655 10 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 FOOD PURCHASES & BOOKST 2,877,573 2,877,573 CAMPUS GROUPS & MAY TER 1,893,466 1,893,466 SERVICE AGREEMENTS 991,931 859,922 72,436 59,573 d REPAIRS AND MAINTENANCE 794,341 736,313 58,007 21 e All other expenses 2,235,509 2,033,807 163,248 38,454 Total functional expenses. Add lines 1 through 24e 25 79,117,837 64,727,286 12,505,451 1,885,100 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)

Par	t X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X	(A) Beginning of year		( <b>B)</b> End of year
	1	Cash—non-interest-bearing	, , , , , , , , , , , , , , , , , , ,	1	, ,
	2	Savings and temporary cash investments	7,979,771	2	12,792,285
	3	Pledges and grants receivable, net	2,400,000	3	5,000,000
	4	Accounts receivable, net	1,388,069	4	1,631,604
	5	Loans and other receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other 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) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	3,261,583	7	3,441,919
Ą	8	Inventories for sale or use	305,824	8	511,297
	9	Prepaid expenses and deferred charges	784,041	9	701,361
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  138,861,690	·		701,001
	Ь	Less accumulated depreciation	100,363,454	10c	98,095,313
	11	Investments—publicly traded securities	37,869,099	11	45, 106, 522
	12	Investments—other securities See Part IV, line 11	22,040,237	12	21,139,726
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,629,699	15	4,674,853
	16	Total assets. Add lines 1 through 15 (must equal line 34)	180,021,777	16	193,094,880
	17	Accounts payable and accrued expenses	5,922,950	17	6,502,712
	18	Grants payable	2,959,834	18	2,972,198
	19	Deferred revenue	160,989	19	200,847
	20	Tax-exempt bond liabilities	83.439.981	20	82.553.066
_	21	Escrow or custodial account liability Complete Part IV of Schedule D	33, 133,331	21	32,333,333
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
졅		persons Complete Part II of Schedule L		22	
ä	23	Secured mortgages and notes payable to unrelated third parties		23	_
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			_
		D	4,690,676	25	4,578,843
	26	Total liabilities. Add lines 17 through 25	97,174,430	26	96,807,666
φ		Organizations that follow SFAS 117 (ASC 958), check here ▶ ┌ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	36,694,321	27	40,565,917
<u>ର</u>	28	Temporarily restricted net assets	9,585,582	28	15,872,198
or Fund Balance	29	Permanently restricted net assets	36,567,444	29	39,849,099
Ĕ		Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and	30,007,-144		23,040,000
<u> </u>		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	_
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ŋet Met	33	Total net assets or fund balances	82,847,347	33	96,287,214
Z	34	Total liabilities and net assets/fund balances	180,021,777	34	193,094,880
	1				Form 000 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
		Т			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		86,1	150,462
2	Total expenses (must equal Part IX, column (A), line 25)	2		79.1	17,837
3	Revenue less expenses Subtract line 2 from line 1	3			32,625
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5			347,347 107,242
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		96,2	287,214
Par	t XIII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response to any question in this Part XII				. $\sqsubset$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

Software ID: **Software Version:** 

**EIN:** 42-0680351

Name: WARTBURG COLLEGE

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	than	not one on is r and trust	box s bot d a tee)	th		( <b>D)</b> 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		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations		
ANDREA WESTMEYER REGENT	10	х						0	0	0		
BISHOP JAMES ARENDS REGENT	10	х						0	0	0		
BISHOP STEVEN ULLESTAD REGENT	10	х						0	0	0		
DOROTHY BOWEN REGENT	10	х						0	0	0		
DR DELFORD DOHERTY REGENT	10	х						0	0	0		
DR GIL WESSEL REGENT	10	×						0	0	0		
DR GRADY BALLENGER REGENT, VICE CHAIR - BOARD	10	×						0	0	0		
DR HANS-PETER BRODHUN REGENT	10	х						0	0	0		
DR MARILYN FLACHMAN REGENT	10	х						0	0	0		
FRED HAGEMANN REGENT	10	х						0	0	0		
GARY HOOVER REGENT	10	х						0	0	0		
GUNTER SCHUCHARDT REGENT	10	х						0	0	0		
JACK SALZWEDEL REGENT, VICE CHAIR - BOARD	10	х						0	0	0		
JANET FELBERG REGENT	10	х						0	0	0		
JIM LOVERIDGE REGENT	10	х						0	0	0		
JOANN KILGUS REGENT	10	х						0	0	0		
JON VOLKERT REGENT	10	х						0	0	0		
KIRK KINNEAR REGENT	10	х						0	0	0		
LIZ MATHIS REGENT	10	х						0	0	0		
MARK BALDWIN REGENT	10	х						0	0	0		
MIKE MCCOY REGENT, VICE CHAIR - BOARD	10	х						0	0	0		
PASTOR MICHAEL HOUSHOLDER REGENT	10	х						0	0	0		
RACHEL RIENSCHE REGENT, VICE CHAIR - BOARD	10	х						0	0	0		
RAY MCCASKEY REGENT, CHAIRMAN - BOARD	10	х						0	0	0		
ROBERT SEVERSON REGENT	10	х						0	0	0		

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

40 00

40 00

VICE-PRESIDENT

VICE-PRESIDENT

SCOTT LEISINGER

VICE-PRESIDENT

RICHARD SEGGERMAN

compensated Employees, and indepen	ident contr	10013						1	ı	
(A) Name and Title	(B) Average hours per week (list		than	o not n one son is er an	e box is bot nd a stee)	x, oth		(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
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
RUTH BAHE-JACHNA REGENT, VICE CHAIR - BOARD	10	х						0	0	0
SHERMAN HICKS REGENT	10	х						0	0	0
SHON COOK REGENT	10	х						0	0	0
DARREL COLSON PRESIDENT	40 00	х		х				270,419	0	32,198
DEBORAH LOERS VICE-PRESIDENT	40 00			х				112,832	0	30,343
EDITH WALDSTEIN VICE-PRESIDENT	40 00			х				128,220	0	25,307
FRED RIBICH INTERIM VICE-PRESIDENT	40 00			х				101,086	0	20,058
GARY GRACE VICE-PRESIDENT	40 00			х				124,773	0	28,431
MARK BIERMANN	40 00							71 000		45.022

Χ

Х

71,808

83,594

124,725

15,822

26,986

22,686

0

0

0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493104007434

**Employer identification number** 

OMB No 1545-0047

**Public Charity Status and Public Support** 

**SCHEDULE A** (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

WARTBURG COLLEGE

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

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

Inspection

									42-0680		
	rt I			blic Charity Sta					<del></del>	ınstructıon	S.
The	organı:			e foundation becaus							
1			-	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2		A scho	ol described	in <b>section 170(b)(1</b>	L <b>)(A)(ii).</b> (At	tach Sche	dule E )				
3	Г	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın <b>sect</b> i	ion 170(b)(	1)(A)(iii).		
4	Γ	A medi	cal researc	n organization operat	ted ın conjun	ction with	a hospital de	scribed in <b>s</b>	ection 170(b	)(1)(A)(iii).	Enter the
_	_			ty, and state							<del></del>
5	ļ	_	•	erated for the benefi	=	e or univers	sity owned or	operated by	, a governme	ntal unit des	cribed in
	_			A)(iv). (Complete P	•						
6	<u> </u>			local government or							
7		_		at normally receives		•	s support fro	m a governn	nental unit or	from the ge	neral public
8	_			on 170(b)(1)(A)(vi). described in <b>sectior</b>		•	mplete Part	TT \			
9	<u>'</u>		-				-	-	abutions mo	mborchin for	s and gross
9	,			at normally receives							
				ities related to its ex							
				oss investment inco						ax)    O      [	/usillesses
10	_			janization after June							
10	_	_		ganized and operated							
11	ı			ganized and operated ly supported organiz							
			•	bes the type of supp				•		see <b>section</b>	309(a)(3). Check
				b						Non-function	ally integrated
e	$\Gamma$	By che	cking this b	ox, I certify that the	organization	ıs not con	trolled direct	ly or indired	tly by one or	more disqu	alıfıed persons
				on managers and ot	her than one	or more pu	ablicly suppo	rted organız	ations descr	bed ın sectı	on 509(a)(1) or
_			1509(a)(2)	received a unitten d	a t a rm n a t . a n	from the T	DC that it is	Tuna I Tu	ma II ar Tun	a III ayınnay	ting organization
f			this box	received a written de	etermination	i iromi the 1	KS that it is a	aryper, ry	pe II, or Typ	e III Suppor	ting organization,
g				2006, has the organi	ızatıon acce	oted any gi	ft or contribu	tion from an	y of the		,
_			ng persons?	,	·	, 5			,		
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	ner alone or	r together wit	h persons d	escribed in (		Yes No
		and (111	) below, the	governing body of th	ie supported	organizati	on?			11	.g(i)
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11	g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	) above?			119	g(iii)
h		Provide	e the follown	ng information about	the support	ed organıza	ation(s)				
_	i) Nam		(ii) EIN	(iii) Type of	(iv) Is		(v) Did yo	•	(vi) I:		(vii) A mount of
	suppoi			organization	organizat		the organ		organiza		monetary
OI	rganiza	ation		(described on lines 1- 9 above	col (i) lıs your gove		ın col (i) suppo		col (i) or		support
				or IRC section	docume	_	Suppl	510.	"" ""	0 3 .	
				(see		_					
				instructions))	Yes	No	Yes	No	Yes	No	
						1.0	1.55	+	1.03	1.10	
								+			
Tota								+			
ivia			I	I	I	1	1	1	1	1	1

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(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	<b>Total.</b> 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							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-and-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							<b>▶</b> ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
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						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493104007434

# OMB No 1545-0047

Inspection

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Political Campaign and Lobbying Activities

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** WARTBURG COLLEGE 42-0680351 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l <b>.</b> )		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

	filed Form 5768 (election under section 501(h)).	(a	1)	(b)	
ror e activ	each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	Amoun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
c	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?	Yes		3	31,85
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	O ther activities?		No		
j	Total Add lines 1c through 1i			3	31,85
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Γ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c	)(5), o	r sectio	n
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	ऻ—
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  THE Complete if the organization is exempt under section 501(c)(4), section			3	<u> </u>

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

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

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES		THE COLLEGE PAYS MEMBERSHIP DUES TO VARIOUS ORGANIZATIONS, SOME PORTION OF WHICH MAY BE USED FOR LOBBYING IN CONNECTION WITH ISSUES THAT IMPACT HIGHER EDUCATION THE COLLEGE ALSO PAYS A CONSULTING FIRM THAT CONDUCTS LOBBYING AND REVIEWS APPROPRIATE GRANT AND OTHER FUNDING OPPORTUNITIES ON BEHALF OF THE COLLEGE

1

DLN: 93493104007434

OMB No 1545-0047

#### **SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

Open to Public Inspection

Internal Revenue Service

► 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.

WARTRII	of the organization RG COLLEGE		Emp	loyer identificat	tion numbe	r
				0680351		
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		ınds	or Accounts.	. Complet	e if the
		(a) Donor advised funds		<b>(b)</b> Funds and o	theraccou	nts
. Tot	cal number at end of year					
Agg	gregate contributions to (during year)					
Αgg	gregate grants from (during year)					
Αgg	gregate value at end of year					
	d the organization inform all donors and donor advise ids are the organization's property, subject to the or		or advi	sed	┌ Yes	┌ No
use	d the organization inform all grantees, donors, and d ed only for charitable purposes and not for the benei nferring impermissible private benefit?				┌ Yes	┌ No
art I	Conservation Easements. Complete if	the organization answered "Yes" to	Forn	n 990, Part IV	, lıne 7.	
Г Г с <sub>°</sub>	rpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space mplete lines 2a through 2d if the organization held a	or education)  Preservation of an Preservation of a c	ertifie	d historic struct	cure	
eas	sement on the last day of the tax year	Г		Held at the	End of the	Voor
<b>a</b> Tot	tal number of conservation easements	<u> </u>	2a	rield at the	LIIG OF THE	ı caı
-	tal acreage restricted by conservation easements	<u> </u>	2b			
	mber of conservation easements on a certified histo	pric structure included in (a)	2c			
d Nu	mber of conservation easements included in (c) acc toric structure listed in the National Register	` '	2d			
	mber of conservation easements modified, transferi	ے red. released. extinguished. or terminated	d bv th	ne organization d	durina	
	e tax year ►	, , , ,	•	5	J	
Nu	mber of states where property subject to conservat	ion easement is located ►	_			
	es the organization have a written policy regarding forcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of	violations, and	┌ Yes	┌ No
Sta ►_	aff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents c	luring the year		
A m	nount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	durin	g the year		
Do	es each conservation easement reported on line 2(o d section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
Ιn	Part XIII, describe how the organization reports co	nservation easements in its revenue and e footnote to the organization's financial		•		
bal	e organization's accounting for conservation easeme	ents				
bal	e organization's accounting for conservation easeme	s of Art, Historical Treasures, o	or Ot	her Similar <i>I</i>	Assets.	
bal the art III a Ift	e organization's accounting for conservation easemed Organizations Maintaining Collection	es of Art, Historical Treasures, of Yes" to Form 990, Part IV, line 8.  16 (ASC 958), not to report in its revenents held for public exhibition, education, of	ue sta or rese	tement and bala arch in furthera	ance sheet	с
bal the art III a Ift work ser b Ift	Organization's accounting for conservation easemed  Organizations Maintaining Collection Complete if the organization answered "You che organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar assets.	res of Art, Historical Treasures, of es" to Form 990, Part IV, line 8.  16 (ASC 958), not to report in its revenues in the form public exhibition, education, of its financial statements that describes in the form of the fo	ue sta or rese s these statem	tement and bala arch in furthera a items ient and balance	ance sheet nce of publi	
bal the art II  a Ift wool ser b Ift wool ser	Organization's accounting for conservation easemed Organizations Maintaining Collection Complete if the organization answered "Y the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asservice, provide, in Part XIII, the text of the footnote the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asservices.	res of Art, Historical Treasures, of es" to Form 990, Part IV, line 8.  16 (ASC 958), not to report in its revenues in the form public exhibition, education, of its financial statements that describes in the form of the fo	ue sta or rese s these statem	tement and bala earch in furthera e items ent and balance earch in furthera	ance sheet nce of publi e sheet nce of publi	с
bal the art III a Ift won ser b Ift won ser (i)	Organization's accounting for conservation easemed Organizations Maintaining Collection Complete if the organization answered "You the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asservice, provide, in Part XIII, the text of the footnote to the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asservice, provide the following amounts relating to thes	res of Art, Historical Treasures, of es" to Form 990, Part IV, line 8.  16 (ASC 958), not to report in its revenues in the form public exhibition, education, of its financial statements that describes in the form of the fo	ue sta or rese s these statem	tement and bala earch in furthera e items ent and balance earch in furthera	ance sheet nce of publi sheet nce of publi	

a Revenues included in Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

Par	<b>TIL</b> Organizations Maintaining Co	liections of Ar	t, HIS	storical li	reasures, or	Otne	r Similar As	<b>SSETS</b> (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	heck any of	the following tha	t are a	significant use	e of its
а	Public exhibition		d	┌ Loan	or exchange pro	grams	i	
b	Scholarly research		e	┌ Othe	r			
С	✓ Preservation for future generations							
4	Provide a description of the organization's co	ollections and expl	aın ho	w they furth	er the organizati	on's ex	kempt purpose	ın
5	During the year, did the organization solicit	or receive donatior	ns of ai	rt, historical	treasures or oth	ersın	nılar	
	assets to be sold to raise funds rather than t	o be maintained as	s part	of the organ	ızatıon's collectı	on?		「Yes
Par	Part IV, line 9, or reported an an					ed "Y	es" to Form 9	990, 
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interm	nediary	for contribu	utions or other a	ssets	not	┌ Yes
b	If "Yes," explain the arrangement in Part XII	I and complete th	e follo	wing table				
							Ar	nount
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, III	ne 21?	,				┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if th	e expla	anation has	been provided ir	Part 2	XIII	<b>Г</b>
Pa	rt V Endowment Funds. Complete							
		(a)Current year	(b)	Prior year	<b>b</b> (c)Two years ba			(e)Four years back
1a	Beginning of year balance	45,679,819		49,190,421	40,182,8	_	36,575,945	50,105,268
Ь	Contributions	2,445,139		1,808,279	2,100,2	48	693,726	4,626,170
С	Net investment earnings, gains, and losses	7,150,663		-3,476,472	8,732,9	48	4,798,095	-16,233,325
d	Grants or scholarships	714,057		649,266	621,0	36	647,681	650,680
е	Other expenditures for facilities and programs	1,273,811		1,193,143	1,204,6	28	1,237,196	1,271,488
f	Administrative expenses							
g	End of year balance	53,287,753		45,679,819	49,190,4	21	40,182,889	36,575,945
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g, colum	nn (a)) held as			
а	Board designated or quasi-endowment ►	31 000 %						
b	Permanent endowment ► 69 000 %							
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%						
3a	Are there endowment funds not in the posse organization by	ssion of the organi	zatıon	that are hel	d and admınısteı	ed for	the	Yes No
	(i) unrelated organizations						За	(i) No
	(ii) related organizations						3a(	<del></del>
	If "Yes" to 3a(II), are the related organizatio	•					3	b
4	Describe in Part XIII the intended uses of the				1.0			
Par	t VI Land, Buildings, and Equipme Description of property	ent. See Form 9	90, Pa	(a) Cost or		other	(c) Accumulated	d (d) Book value
	bescription of property			basis (invest			depreciation	(2) 555% (4.45
1a	Land			1	26,550 3,5	55,780		3,682,330
b	Buildings		•		118,8	16,882	31,746,46	87,070,420
С	Leasehold improvements		•					
	Equipment		•		6,4	60,266	4,138,25	2,322,012
						02,212	<u> </u>	<del></del>
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colι	umn (B), line	10(c).)		🕨	98,095,313

Part VII Investments—Other Securities. S  (a) Description of security or category	See Form 990, Part X, line 12. (b)Book value	(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
1 )Fınancıal derivatives		
2 )Closely-held equity interests		
3)Other A)CSV - LIFE INSURANCE	2,404,939	F
B) OTHER	7,101,125	F
C) FUND OF HEDGE FUNDS	11,633,662	F
	<b>b</b> 24.420.736	
otal. (Column (b) must equal Form 990, Part X, col (B) line 12 ) Part VIII Investments—Program Related.		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b> -</b>	
Part IX Other Assets. See Form 990, Part >		(h) Baak walua
(a) De	scription	(b) Book value
T. 1 (0 loon (1)	45)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part X		
(a) Description of liability	(b) Book value	
Federal Income taxes		
STUDENT DEPOSITS	950,730	
ANNUITIES PAYABLE	2,874,573	
DEPOSITS HELD IN CUSTODY	211,540	
ASSET RETIREMENT OBLIGATION	542,000	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>4</b> ,578,843	
2. Fin 48 (ASC 740) Footnote In Part XIII, provide the	e text of the footnote to the organizat	tion's financial statements that reports the

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	64,802,904
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	6,407,242
3	Subtract line <b>2e</b> from line <b>1</b>	3	58,395,662
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 500,000		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	27,754,800
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	86,150,462
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	51,363,037
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII ) 2d 280,917	7	
e	Add lines <b>2a</b> through <b>2d</b>	2e	280,917
3	Subtract line <b>2e</b> from line <b>1</b>	3	51,082,120
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 500,000		
b	Other (Describe in Part XIII ) 4b 27,535,717	7	
С	Add lines <b>4a</b> and <b>4b</b>	4c	28,035,717
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	79,117,837

#### Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE COLLEGE DOES NOT HAVE A SIGNIFICANT ART COLLECTION THE ITEMS THAT ARE HELD ARE USED FOR EDUCATIONAL PURPOSES IN VARIOUS COURSES AND FOR THE BENEFIT OF THE GENERAL PUBLIC
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE COLLEGE'S ENDOWMENT FUNDS ARE USED TO SUPPORT THE EDUCATIONAL AND OTHER SUPPORT SERVICES PROVIDED TO THE STUDENT BODY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE COLLEGE FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS THE GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED NO LIABILITY HAS BEEN RECOGNIZED BY THE COLLEGE FOR UNCERTAIN TAX POSITIONS AS OF MAY 31, 2013 AND 2012
PART XI, LINE 4B - OTHER ADJUSTMENTS		ACTUARIAL ADJUSTMENTS - LOSS -178,270 RENTAL EXPENSES -102,647 FINANCIAL AID 27,272,004 GAIN ON DISPOSAL OF PLANT ASSETS 263,713
PART XII, LINE 2D - OTHER ADJUSTMENTS		ACTUARIAL ADJUSTMENTS - LOSS 178,270 RENTAL EXPENSES 102,647
PART XII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID 27,272,004 GAIN ON DISPOSAL OF PLANT ASSETS 263,713

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DLN: 93493104007434

OMB No 1545-0047

2012

2012

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

**Schools** 

► Attach to Form 990 or Form 990-EZ.

Employer identification number

WARTBURG COLLEGE 42-0680351 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes 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? 2 Yes 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 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes 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 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo 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

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

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE COLLEGE FOLLOWS A NONDISCRIMINATORY POLICY REGARDING ALL PROGRAMS ENROLLMENT OF STUDENTS IS WITHOUT DISCRIMINATION AS TO RACE, SEX, COLOR, SEXUAL ORIENTATION, HANDICAP, OR NATIONAL ORIGIN AND IS PUBLISHED IN THE COLLEGE'S CATALOG, AND THE COLLEGE'S WEBSITE RECRUITMENT PROCEDURES ARE DESIGNED AND CARRIED OUT TO REACH ALL RACIAL SEGMENTS IN THE GEOGRAPHICAL AREA SERVED BY THE COLLEGE
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES FINANCIAL ASSISTANCE FROM THE U.S. GOVERNMENT IN CONNECTION WITH VARIOUS PROGRAMS SUCH AS THE PELL GRANT PROGRAM, TEACHER EDUCATION ASSISTANCE FOR COLLEGE AND HIGHER EDUCATION GRANT PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT (SEOG), FEDERAL WORKSTUDY PROGRAM AND FEDERAL PERKINS LOAN PROGRAM THE COLLEGE ALSO RECEIVES SUPPORT FROM THE STATE OF IOWA THROUGH THEIR TUITION GRANT PROGRAM AND OTHER RELATED STATE PROGRAMS

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493104007434

OMB No 1545-0047

2012

Open to Public Inspection

**Employer identification number** 

# SCHEDULE F (Form 990)

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

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or

Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

Department of the Treasury
Internal Revenue Service

Part I

Name of the organization WARTBURG COLLEGE

	42-0680351
General Information on Activities Outside the United States. Complet	e if the organization answered
"Yes" to Form 990, Part IV, line 14b.	-

	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	<b>For grantmakers.</b> Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fu	nds outside			
3	Activites per Region (The follow	ung Part I, line 3	table can be du	uplicated if additional spa	ace 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			
	See Add'l Data		region	regiony					

**3a** Sub-total

b	Total from continuation sheets
	to Part I
c	Totals (add lines 3a and 3b)

0

0

288,022

288,022

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

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

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

#### Part IV Foreign Forms

1	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)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Υ	'es	<u> </u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

#### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Als	so complete this part to provide any a	additional information (see instructions).
Identifier	ReturnReference	Explanation
	SCHEDULE F, PART I, LINE 3 - COLUMN (E)	LINE 1 - INSTRUCTION AND STUDENT SERVICES, LINE 2 - INSTITUTIONAL SUPPORT, INSTRUCTION AND STUDENT SERVICES, LINE 3 - INSTITUTIONAL SUPPORT, ACADEMIC SUPPORT, INSTRUCTION AND STUDENT SERVICES, LINE 4 - INSTRUCTION AND STUDENT SERVICES, LINE 6 - INSTRUCTION, LINE 7 - INSTRUCTION,
	I	Schedule F (Form 990) 2012

#### **Additional Data**

Software ID: Software Version:

**EIN:** 42-0680351

Name: WARTBURG COLLEGE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	SEE PART V	100,295
EAST ASIA & PACIFIC	0	0	PROGRAM SERVICE	SEE PART V	15,447
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	SEE PART V	168,470

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
NORTH AMERICA (INCLUDING CANADA AND MEXICO BUT NOT THE UNITED STATES)	0	0	PROGRAM SERVICE	SEE PART V	711					
SOUTH AMERICA	0	0	PROGRAM SERVICES	SEE PART V	521					
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICE	SEE PART V	2,578					

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DLN: 93493104007434

OMB No 1545-0047

Schedule I

(Form 990)

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

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

Department of the Treasury Internal Revenue Service			Attach to Form 990	Inspection			
Name of the organization						Employer identificat	
WARTBURG COLLEGE						42-0680351	
Part I General Information	n on Grants and	l Assistance				•	
Does the organization maintain the selection criteria used to aw	vard the grants or as	sıstance? <b></b> .					✓ Yes
2 Describe in Part IV the organiza							
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of gran
2 Enter total number of section 50	)1(c)(3) and govern	ment organizations list	ed in the line 1 table .			•	
3 Enter total number of other orga						<u> </u>	

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>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	, <b>(f)</b> Description of non-cash assistance
(1) INSTITUTIONAL SCHOLARSHIPS AND GRANTS	1707	1,255,822	25,860,437	'TUITION DISCOUNTING	INSTITUTIONAL SCHOLARSHIPS AND GRANTS ARE USED AS A DIRECT REDUCTION OF THE TUITION THAT EACH FULL-TIME STUDENT IS REQUIRED TO PAY
(2) SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT	336 	155,745		FAIR MARKET VALUE	SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT (SEOG) IS A FEDERAL GRANT THAT IS AWARDED BY THE COLLEGE TO QUALIFIED STUDENTS IN ORDER TO REDUCE THE COST THE STUDENT MUST PAY FOR THEIR EDUCATION

#### Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 THE COLLEGE PROVIDES GRANTS AND SCHOLARSHIPS TO ITS FULL-TIME, DEGREE SEEKING STUDENTS, BY CREDITING SUCH AMOUNTS DIRECTLY TO THEIR STUDENT ACCOUNTS, TO BE ONLY USED AS AN OFFSET FOR TUITION

**Compensation Information** 

DLN: 93493104007434

OMB No 1545-0047

**Schedule J** 

Internal Revenue Service

(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization WARTBURG COLLEGE

**Employer identification number** 

42-0680351

Pa	Questions Regarding Compensation	<u> </u>				
					Yes	No
1a	Check the appropriate box(es) if the organization prov					
	990, Part VII, Section A, line 1a Complete Part III  First-class or charter travel	ro blov	Housing allowance or residence for personal use			
	Travel for companions	•  -	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	,  -	Health or social club dues or initiation fees			
	Discretionary spending account	, T	Personal services (e g , maid, chauffeur, chef)			
	, , , ,	,	, , , , , ,			
ь	If any of the boxes in line 1a are checked, did the org	ganızatı	on follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses de	scribed	above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to re					
	directors, trustees, and the CEO/Executive Director	, regard	ling the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organ					
	organization's CEO/Executive Director Check all the used by a related organization to establish compensation					
	Compensation committee	ان ااداناه ح	Written employment contract			
	Independent compensation consultant	₹   <b>•</b>				
	Form 990 of other organizations	٠ ح	Approval by the board or compensation committee			
	,	,	The state of the s			
4		art VII	, Section A , line 1a with respect to the filing organization $% \left( 1\right) =\left( 1\right) \left( 1\right$			
	or a related organization					
а	Receive a severance payment or change-of-control p	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-ba			4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A,	lıne 1a	, did the organization pay or accrue any			
	compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
a	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A,					
	payments not described in lines 5 and 6? If "Yes," de			7		Νo
8	Were any amounts reported in Form 990, Part VII, pa					
	subject to the initial contract exception described in in Part III	keguia	tions section 53 4958-4(a)(3)/IT "Yes," describe	_		NI -
^		العاد ما ما	able was complete an area and one described on Demoles	8		No
9	If "Yes" to line 8, did the organization also follow the section $53\ 4958-6(c)$ ?	reputta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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 and Title		(B) Breakdown of  (i) Base compensation	of W-2 and/or 1099-MISC compensation  (ii) Bonus & (iii) Other reportable compensation compensation		(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990
(1)DARREL COLSON PRESIDENT	(i) (ii)	227,291 0	0 0	43,128	18,220	13,978 0	302,617 0	0
(2)EDITH WALDSTEIN VICE-PRESIDENT	(i) (ii)	125,188 0	0	3,032 0	10,240	15,067 0	153,527 0	0
(3)GARY GRACE VICE-PRESIDENT	(i) (ii)	120,550 0	0 0	4,223 0	10,103 0	18,328 0	153,204 0	0

Schedule J (Form 990) 2012

#### 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

Also complete this part for any addition	ilai iliioiiliatioii	
Identifier	Return Reference	Explanation
SUPPLEMENTAL INFORMATION		SCHEDULE J, PART I, LINE 4 - THE COLLEGE HAD A CODE SECTION 457(F) DEFERRED COMPENSATION AGREEMENT WITH PRESIDENT COLSON UNDER THE AGREEMENT, THE COLLEGE MAINTAINED A DEFERRED COMPENSATION ACCOUNT THAT CONSIDERED AN APPROPRIATE PERCENTAGE OF THE PRESIDENT'S SALARY, AS WELL AS RELATED EARNINGS (LOSSES) THE AMOUNTS CREDITED TO SUCH AN ACCOUNT WERE TO BECOME FULLY VESTED WITH THE PRESIDENT ON THE EARLIEST OF (1) THE DATE THE PRESIDENT REACHED AGE 57, (2) THE DATE THE PRESIDENT TERMINATED EMPLOYMENT DUE TO DISABILITY, (3) THE DATE OF THE PRESIDENT'S DEATH, OR (4) THE DATE OF THE PRESIDENT'S INVOLUNTARY TERMINATION OF EMPLOYMENT (IN WHICH CASE THE PRESIDENT WOULD FORFEIT THE ENTIRE VALUE OF THE ACCOUNT) DURING 2012, PRESIDENT COLSON MET THE AGE STIPULATION AND THE PROCEEDS OF THE ACCOUNT WERE DISTRIBUTED TO HIM IN FULL

Schedule J (Form 990) 2012

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2012

OMB No 1545-0047

Schedule K (Form 990)

## **Supplemental Information on Tax Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

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Internal Revenue Service

Department of the Treasury

	ne of the organization RTBURG COLLEGE									Em	ployer id	lentifica	tion num	ber	
VVA I	TBURG CULLEGE									42	-06803	51			
Pa	art I Bond Issues				1										
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	<b>f)</b> Descriptio	n of purpose	( <b>g)</b> De	efeased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	IOWA HIGHER EDUCATION LOAN AUTHORITY	42-1235696	462460VZ6	12-29-2005	49,9	18,166	SEE	PART VI			x		x		х
В	IOWA HIGHER EDUCATION LOAN AUTHORITY	42-1235696	462460VY9	12-29-2005	36,706,381 SEE PART VI			×		×		х			
Pa	rt III Proceeds													_	
						A		E			С			D	
1_	A mount of bonds retired			3,110,	000		235,000								
2	A mount of bonds legally defea	sed													
3	Total proceeds of issue					64,774,									
4	Gross proceeds in reserve fund					3,722,	680		3,193,864						
5	Capitalized interest from proce					3,552,	458		3,552,458						
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds					992,	887		734,128						
8	Credit enhancement from proc	eeds													
9	Working capital expenditures f	from proceeds													
10	Capital expenditures from proc	ceeds			31,540,072 31,540,072										
11	O ther spent proceeds					60,058,	886								
12	Other unspent proceeds														
13	Year of substantial completion	1			2.0	005		20	0.8			-			
					Yes	No		Yes	No	Yes	N	lo	Yes		No
14	Were the bonds issued as part	t of a current refundi	ng issue?			х			Х						
15	Were the bonds issued as part	of an advance refur	nding issue?		Х				Х						
16	Has the final allocation of proc	eeds been made?			Х			Х							
17	Does the organization maintain allocation of proceeds?		nd records to suppo	ort the final	Х			Х							
Pa	rt IIII Private Business U	se						-							
						Α		I			<u>C</u>			D	
1 _	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			C which owned	Yes	No	-	Yes	No	Yes	N	lo	Yes	+	No

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Sche	dule K (Form 990) 2012									Page <b>2</b>
Par	Private Business Use (Continued)		,						,	
				Α		В		<u>C</u>		D
3a	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
<b>J</b> a	of bond-financed property?			Х		Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0%		0%		%	,	%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, another (c)(3) organization, or a state or local government			%		%		%		%
6	Total of lines 4 and 5			0%		0%		%	,	%
7	Does the bond issue meet the private security or payment test?			Х		Х				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		х		Х					
Dar	t IV Arbitrage									
FeI	Arbitrage	Α			В		С С		D	
		Yes	No	Yes	No	Yes		No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х					
2	If "No" to line 1, did the following apply?				I		I	I		
а	Rebate not due yet?	-	Х		Х					
b	Exception to rebate?		Х		Х					
С	No rebate due?	×		Х						
	If you checked "No rebate due" in line $2c$ , provide in Part VI the date the rebate computation was performed			•	•	•	'	•		
3	Is the bond issue a variable rate issue?		Х		Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х					
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
е	Was a hedge terminated?									
		•		•	-					

Part IV Arbitrage (Continued)

		А	·	В	·	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	×		Х					
b	Name of provider	SEE PART VI SEE PART VI							
С	Term of GIC	5 00000000000		5 00000000000					
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х		Х					
6	Were any gross proceeds invested beyond an available temporary period?		х		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?	x		x					
		•		•			•	•	

### Part V Procedures To Undertake Corrective Action

1		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has 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?	Х		Х					

Part VI Supplemental Info	ormation. Complete this part to	provide additional information for responses to questions on Schedule K (see instructions).
Identifier	Return Reference	Explanation
SCHEDULE K, PART 1, COLUMN F - LINE A		THE 2005 SERIES A BOND PROCEEDS WERE USED TO ADVANCE REFUND THE 2002 (7/10/02) BONDS
SCHEDULE K, PART 1, COLUMN F - LINE B		THE 2005 SERIES B BOND PROCEEDS WERE USED TO FINANCE THE COST OF ACQUIRING, CONSTRUCTING, IMPROVING, AND EQUIPPING THE WELLNESS CENTER, TO PAY CAPITALIZED INTEREST DURING CONSTRUCTION OF THE WELLNESS CENTER, AND TO FUND THE SERIES B DEBT SERVICE RESERVE FUND
SCHEDULE K, PART II, LINE 3		THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART I, COLUMN (E) DUE TO INVESTMENT EARNINGS
SCHEDULE K, PART IV, LINE 2C COLUMN A		(A) ISSUER NAME IOWA HIGHER EDUCATION LOAN AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED 11/30/2010
SCHEDULE K, PART IV, LINE 2C COLUMN B		(A) ISSUER NAME IOWA HIGHER EDUCATION LOAN AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED 11/30/2010
SCHEDULE K, PART IV, LINE 5B COLUMN A		RESERVE FUND - ROYAL BANK OF CANADA, ESCROW FUND - MBIA, INC
SCHEDULE K, PART IV, LINE 5B COLUMN B		CONSTRUCTION FUND - MORGAN STANLEY, RESERVE FUND - ROYAL BANK OF CANADA, CAPITALIZED INTEREST FUND - MORGAN STANLEY
SCHEDULE K, PART IV, LINE 5C COLUMN A		RESERVE FUND - 5 YRS, ESCROW FUND - 6 8 YRS
SCHEDULE K, PART IV, LINE 5C COLUMN B		CONSTRUCTION FUND - 2 4 YRS , RESERVE FUND - 5 YRS, CAPITALIZED INTEREST FUND - 2 4 YRS

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OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

FOITH 990 OF 990-EZ

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

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

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

2012

Open to Public Inspection

Name of the organ								En	nploye	r identii	lication	number	•
WARTBORG COLLEGE								4 2	-0680	351			
Part I Exces													
							25a or 25b, or (c) Descri						
<b>1</b> (a) Name o	raisquaii	nea pers			between di: id organizati	ption o	rtrans	saction		d) Corre			
				p 0 1 2 0 11 4 11	ia organizati						es	No	
2 Enter the am	ount of ta	x ıncurre	d by organiza	ition man	agers or dis	qualified per	sons during the	yearı	under	section			
4958										<b>F</b> \$			
3 Enter the amo	ount of ta	x, ıf any,	on line 2, abo	ove, reiml	oursed by th	ie organizatio	on			<b>&gt;</b> \$			
Part II Loar	s to an	d/or E	rom Inter	acted D	erconc								
						)-EZ, Part V	, line 38a, or Fo	orm 99	0.Par	t IV , lın	e 26, o	r ıf the	
			n amount on l						,	,			
(a) Name of	` '	•	(c) Purpose	` '		(e)Origin	1		) In	(h		(i)Wri	
ınterested person	with orga	inization	of loan	or from organiza		principal amount		defa	ault?	A ppro		agreen	nent?
person				organiza	CIOII.	amount				commi			
				То	From			Yes	No	Yes	No	Yes	No
												_	
										ļ	<u> </u>	_	
										<u> </u>		_	
										<u> </u>	-	_	
						_				<u> </u>	+	_	
 Total				<u> </u>						1	1	٦	
	ts or Ac	ssistan	ce Benefit		erested I	Persons							
							rt IV, line 27						
(a) Name of inte			atıonshıp bet			fassistance			tance	(e)	Purpos	e of assi	stance
person			ted person ar	nd the									
(1) DICCLOCUDE			organization				MEDIT COLL		LLIDG	CTU	DENT	TNIANIC	T A I
(1) DISCLOSURE SUBJECT TO		FERPA L	_A WS	156	5,500		MERIT SCHO	JLARS	HIPS	AID	DENTE	INANC	IAL
(2) DISCLOSURE		FERPA L	_A WS	28	3,050		TUITION RE	MISSI	ON	STU	DENT F	INANC	IAL
SUBJECT TO										AID			
							_						

Part IV Business Transactions I					
Complete if the organization	<u>n answered "Yes" on I</u>	orm 990, Part IV, lin	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	tation ues?
				Yes	No
(1) ME & V	PARTIAL OWNER IS A FAMILY MEMBER OF LIZ MATHIS, REGENT	261,609	MARKETING AND ADVERTISING SERVICES PROVIDED IN THE ORDINARY COURSE OF BUSINESS FEES CHARGED ARE NORMAL AND REASONABLE FOR THE SERVICES PROVIDED LIZ MATHIS HAS NO CONTROL OVER ME & V		No
(2) FRED WALDSTEIN	FAMILY MEMBER OF EDITH WALDSTEIN, VICE PRESIDENT OF ENROLLMENT MANAGEMENT	90,383	EMPLOYED AS FACULTY, PROFESSOR OF POLITICAL SCIENCE REPORTS TO THE VICE PRESIDENT FOR ACADEMIC AFFAIRS FAMILY MEMBER EDITH WALDSTEIN, VICE PRESIDENT FOR ENROLLMENT MANAGEMENT, HAS NO CONTROL OVER FACULTY COMPENSATION OR GOVERNANCE		No

### Part V Supplemental Information

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

complete this part to provide additional miorimation for responses to questions on senedate E (see instructions)							
Ident if ier	Return Reference	Explanation					

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DLN: 93493104007434

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

**Noncash Contributions** 

	ne of the organization TBURG COLLEGE	Employer identification number						
	. 50.1.3 00.22.02				42-0680351			
Ρā	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art	X	1		VALUE - TIME OF	DONA	TION	
	Art—Historical treasures .			,				
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	31	2,000,017	AVG HI/LOW DATE	OFG	IFT	
LO	Securities—Closely held stock .	Х	1	903	AVG HI/LOW DATE	OFG	IFT	
L <b>1</b>	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic structures							
L <b>4</b>	Qualified conservation contribution—Other							
<b>L</b> 5	Real estate—Residential .	Х	1	110,250	FMV			
<b>L6</b>	Real estate—Commercial							
<b>.7</b>	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	HARVESTED Other►( <u>CROPS</u> )	Х	1	3,520	AVG HI/LOW ON D	ATEC	FGIF	Т
	O ther ▶()							
	O ther ► () O ther ► ( )				+			
	Number of Forms 8283 received for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza must hold for at least three year							
					d to be used			No
	for exempt purposes for the enti					30a		No
	If "Yes," describe the arrangem							
	Does the organization have a gif			•		31	Yes	<u> </u>
			ies or related organizations	to solicit, process, or sell	noncash • • •	32a		No
	If "Yes," describe in Part II If the organization did not report	t an amount	: in column (c) for a type of	property for which column	(a) is checked,			

describe in Part II

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

**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.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

SCHEDULE O
(Form 990 or 990-EZ)
Supplement

Department of the Treasury

Internal Revenue Service

Name of the organization WARTBURG COLLEGE

As Filed Data -

DLN: 93493104007434

Employer identification number

2012

Open to Public Inspection

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

• Attach to Form 990 or 990-F7.

42-0680351 Identifier Return Reference Explanation FORM 990. PART VI. SECTION **B. LINE 11** FORM 990. PART VI. SECTION THE CONFLICT OF INTEREST POLICY IS REVIEWED. UPDATED. AND APPROVED ANNUALLY BY B. LINE 12C THE BOARD BOARD MEMBERS AND KEY EMPLOYEES ARE REMINDED OF THEIR RESPONSIBILITY TO FOLLOW THE CONFLIC T OF INTEREST POLICY BUSINESS OFFICE PERSONNEL ARE FAMILIAR WITH THE VENDORS. USED BY THE COLLEGE AND WOULD FOLLOW THE CONFLICT OF INTEREST POLICY IF THERE WERE ANY POTENTIAL TRANS ACTIONS THAT WOULD FALL WITHIN THE SCOPE OF THAT POLICY FORM 990, PART VI, SECTION THE BOARD OF REGENTS ESTABLISHES COMPENSATION FOR THE PRESIDENT INITIALLY AND B. LINE 15A ANNUALLY, AP PLYING ALL ELEMENTS NOTED IN THIS LINE'S QUERY. THE COMPARATOR GROUP IS LIMITED TO LIBERAL ARTS COLLEGES WITH COMPARABLE ENROLLMENTS, INCLUDING OTHER ELCA RELATED COLLEGES THE PRE SIDENT ESTABLISHES COMPENSATION FOR THE PRESIDENT'S CABINET INITIALLY AND ANNUALLY, APPLYI NG ALL ELEMENTS NOTED IN THIS LINE'S QUERY THE COMPARATOR GROUP IS LIMITED TO LIBERAL ART S COLLEGES WITH COMPARABLE ENROLLMENTS, INCLUDING OTHER ELCA-RELATED COLLEGES FORM 990, PART VI, SECTION THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS C, LINE 19 ARE NOT MADE AVAILABLE TO THE PUBLIC