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DLN: 93493127007454

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2012

Open to Public Inspection

A Fo	r the	2012 cale	endar year, or tax year beginning 07-01-2012 🤍 , 2012, and ending 06-	30-2013			
		applicable	C Name of organization		DE	mployer i	identification number
	ress cl		WILLIAM MITCHELL COLLEGE OF LAW		4	1-05187	750
┌ Na	me cha	ange	Doing Business As			1 0010,	. 5 5
┌ Ind	ıal retu	urn	Number and street (or P O box if mail is not delivered to street address) Room/s	uuto.			
П те	mınate	ed	875 SUMMIT AV	ouite	E Te	elephone n	number
L Am	ended	return	City or town, state or country, and ZIP + 4		(6	51)227	7-9171
_		n pending	ST PAUL, MN 55105		6.0		ots \$ 43,912,852
,		,	F Name and address of principal officer	1 11/2)			
			ERIC S JANUS	П(а)	Is this a g affiliates?	roup rett	urn for
			875 SUMMIT AV ST PAUL, MN 55105				F., F.,
			51 · · · · · · · · · · · · · · · · · · ·	H(b)			cluded? \(\text{Yes} \(\text{No} \) st (see instructions)
I Ta	x-exen	mpt status	▼ 501(c)(3)	1	ii No, at	tacii a ii:	st (see ilistructions)
J W	ebsite	e:► WW	/W WMITCHELL EDU	H(c)	Group exe	emption i	number 🟲
₩ Eon	n of or	rannization	✓ Corporation Trust Association Other ►	 	ar of formatio	n 1000	M State of legal domicile
				• 10	ar or ronnado	11 1900	MN
Pa	rt I	Sum	mary				
			escribe the organization's mission or most significant activities M MITCHELL COLLEGE OF LAW IS ORGANIZED TO ESTABLISH, M.	ΛΙΝΤΛΙΙ	N VND CO	NDUCT	AN INSTITUTION OF
			LEARNING IN WHICH PERSONS ARE TAUGHT THE PRINCIPLES				
			EAPRED FOR ADMISSION TO PRACTICE THE PROFESSION OF LA , AND THE UNITED STATES ALSO, TO CONDUCT GRADUATE DE				
ည			AMS FOR LAWYERS, OTHER PROFESSIONALS AND MEMBERS OF T			-GKLL L	
图							
<u>₹</u>							
Ğ	2	Check th	nis box দ if the organization discontinued its operations or disposed	of more	than 25% c	fits net	assets
Activities & Governance							1
Ě			of voting members of the governing body (Part VI, line 1a)			3	
إ			of independent voting members of the governing body (Part VI, line 1b			4	
Q.			mber of individuals employed in calendar year 2012 (Part V, line 2a)			5	
			mber of volunteers (estimate if necessary)			7	
	1		related business revenue from Part VIII, column (C), line 12			7	
	۰				Prior Yea		Current Year
	8	Contri	butions and grants (Part VIII, line 1h)		3,2	71,482	
alic	8 9		butions and grants (Part VIII, line 1h)			71,482	1,896,935
enuese	1	Progra			34,2		1,896,935 32,242,762
Rayenue	9	Progra Invest Other	tment income (Part VIII, line 2g)		34,2	66,542	1,896,935 32,242,762
Revenue	9 10	Progra Invest Other Total r	am service revenue (Part VIII, line 2g)		34,2 1,6	27,401 44,067	1,896,935 32,242,762 838,750 46,139
Revenue	9 10 11	Progra Invest Other Total r 12) .	tm service revenue (Part VIII, line 2g)	ne	34,2 1,6 39,2	27,401	1,896,935 32,242,762 838,750 46,139 35,024,586
Revenue	9 10 11 12	Progra Invest Other Total (12) . Grants	am service revenue (Part VIII, line 2g)	ne	34,2 1,6 39,2	27,401 44,067	1,896,935 32,242,762 838,750 46,139 35,024,586
	9 10 11 12	Progra Invest Other Total (12) Grants Benefi	trevenue (Part VIII, column (A), lines 3, 4, and 7d)	ne .	34,2 1,6 39,2 10,7	27,401 44,067 09,492 13,545	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643
	9 10 11 12 13 14 15	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10)	trevenue (Part VIII, line 2g)	ne .	34,2 1,6 39,2 10,7	66,542 27,401 44,067 09,492 13,545 0	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0
	9 10 11 12 13 14 15	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10) Profes	trevenue (Part VIII, column (A), lines 3, 4, and 7d)	ne .	34,2 1,6 39,2 10,7	27,401 44,067 09,492 13,545	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0
Expenses Revenue	9 10 11 12 13 14 15 16a b	Progra Invest Other Total (12) . Grants Benefi Salar(65-10) Profes Total fu	trevenue (Part VIII, line 2g)		34,2 1,6 39,2 10,7	27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154
	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other	tement income (Part VIII, column (A), lines 3, 4, and 7d)		34,2 1,6 39,2 10,7 18,4 1	27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154
	9 10 11 12 13 14 15 16a b 17	Progra Invest Other Total r 12) . Grants Benefi Salario 5-10) Profes Total fu Other	the service revenue (Part VIII, line 2g)		34,2 1,6 39,2 10,7 18,4 1	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009
Брензеѕ	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salario 5-10) Profes Total fu Other	tement income (Part VIII, column (A), lines 3, 4, and 7d)		34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423
Брензеѕ	9 10 11 12 13 14 15 16a b 17	Progra Invest Other Total r 12) . Grants Benefi Salario 5-10) Profes Total fu Other	the service revenue (Part VIII, line 2g)		34,2 1,6 39,2 10,7 18,4 1	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009
Брензеѕ	9 10 11 12 13 14 15 16a b 17	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	the service revenue (Part VIII, line 2g)		34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year
Брензеѕ	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	tement income (Part VIII, line 2g)	Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 urrent	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228
Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (1) Grants Benefi Salario 5-10) Profes Total fu Other Total of Reven Total of Total of Net as	tement income (Part VIII, line 2g)	Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 urrent	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228
Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total a Total I Net as	timent income (Part VIII, line 2g)	Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
Net Assets or Expenses or Fund Batances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (1) Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total 3 Total 1 Net as Sign alties of	tment income (Part VIII, line 2g)	ne Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
Met Assets or Expenses of Fund Batances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (1) Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total 3 Total 1 Net as Sign alties of	tment income (Part VIII, line 2g)	ne Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
Met Assets or Expenses of Fund Batances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (1) Grants Benefi Salario 5-10) Profes Total fu Other Total of Reven Total of Net as Sign alties of	the service revenue (Part VIII, line 2g)	ne Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3 hedules and	27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
A Fund Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 THII r penanowledarer har	Progra Invest Other Total (12) . Grants Benefi Salario 5-10) Profes Total fu Other Total of Reven Total of Sign alties of dege and das any kn	the service revenue (Part VIII, line 2g)	ne Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3	27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
Met Assets or Expenses of Fund Batances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 II r pena nowlearer ha	Progra Invest Other Total in 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total a Reven Total a Total in Net as Sign alties of indige and in as any kin	the service revenue (Part VIII, line 2g)	ne Bee	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3 hedules and cer) is base	27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259
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Page Pred Balances Expenses Page Pred Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 THII r penanowlearer had	Progra Invest Other Total in 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total a Reven Total a Sign alties of edge and las any kin **** Signa **** ** Signa **** ** ** ** ** ** ** ** ** ** ** **	timent income (Part VIII, column (A), lines 3, 4, and 7d)	ne Beg	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3 hedules and cer) is based	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834 distatem don all i	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259 ents, and to the best of nformation of which
Page Pred Balances Expenses Page Pred Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 r pena nowled arer had	Progra Invest Other Total in 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total a Reven Total a Sign alties of edge and las any kin **** Signa **** ** Signa **** ** ** ** ** ** ** ** ** ** ** **	tement income (Part VIII, line 2g)	ne Beg	34,2 1,6 39,2 10,7 18,4 1 7,0 36,3 2,8 ginning of C Year 63,2 21,9 41,3 hedules and cer) is based	66,542 27,401 44,067 09,492 13,545 0 48,348 26,556 36,170 24,619 84,873 current 223,570 10,736 12,834 distatem don all i	1,896,935 32,242,762 838,750 46,139 35,024,586 11,500,643 0 16,220,538 60,154 8,797,674 36,579,009 -1,554,423 End of Year 76,051,487 33,527,228 42,524,259 ents, and to the best of nformation of which

Par	Statement of Program Check if Schedule O contain				٠
1	Briefly describe the organization's	mission			
COM TRA WE (AND SCH INS	SERVE THE LAW WE TEACH IT, STORE TO WILLIAM MITCHELL WITH DOWNSFORM THEMSELVES INTO SKILL CHALLENGE AND SUPPORT THEM, THE LEGAL PROFESSION AS CRICULARSHIP AND PRACTICE, MAINTILLS AN ETHIC OF SERVICE TO CONTROL THE LAW TO WORK	IVERSE TRAITS, TAL LED AND ETHICAL L AND WE ARE RESPO TICAL OBSERVERS A TAINS A STRONG CO	ENTS, AND EXPERIE EGAL PROFESSIONA NSIVE TO THEIR FAI ND ACTIVE PARTIC: NNECTION TO THE	NCES, YET THEY HAVE I LS THEY LEARN FROM U MILY AND CAREER COMM IPANTS OUR LEGAL EDU PROFESSION, IS INTELL	N COMMON A DESIRE TO S AND FROM EACH OTHER MITMENTS WE STUDY LAW JCATION INCORPORATES ECTUALLY RIGOROUS, ANI
2	Did the organization undertake any the prior Form 990 or 990-EZ? . If "Yes," describe these new service				
3	Did the organization cease conduct		nt changes in how it co	inducts any program	
,	services?			· · · · · · ·	┌Yes ┌No
	If "Yes," describe these changes or	n Schedule O			
4	Describe the organization's programexpenses Section 501(c)(3) and 5 the total expenses, and revenue, if	01(c)(4) organization	s are required to report		
4a	(Code) (Expense:	s \$ 29,293,943	including grants of \$	11,500,643) (Revenue \$	32,301,585)
	LEGAL EDUCATION PROGRAM (J D. AND L PRINCIPLES OF LAW AND ALLIED BRANCH MINNESOTA, OTHER STATES, AND THE UN LAWYERS, OTHER PROFESSIONALS, AND N OPPORTUNITY TO ENGAGE IN MEANINGFU	ES OF KNOWLEDGE AND PINITED STATES THE COLLEGIES THE PUBLIC	REPARED FOR ADMISSION T BE ALSO CONDUCTS GRADU THROUGH ITS CLINICS, IT I	TO PRACTICE THE PROFESSION (ATE DEGREE AND NON-DEGREE PROVIDES LAW STUDENTS, SUPE	OF LAW IN THE COURTS OF EDUCATIONAL PROGRAMS FOR ERVISED BY LAWYERS, THE
4b	(Code) (Expense:	s \$ 97,287	ıncludıng grants of \$) (Revenue \$)
	EXPERT WITNESS TRAINING ACADEMY THE TRAINING EXPERT WITNESSES TO EFFECT ACADEMY IS DESIGNED TO PROVIDE A STEROAL OF PROVIDING TECHNICAL SCIENTIF PROCEEDING WITHOUT COMPROMISING LEGAL THEORY AND PRACTICAL WISDOM TRAINING PROGRAM FOR MORE THAN 20	IE EXPERT WITNESS TRAIN FIVELY COMMUNICATE THE RUCTURE FOR SCIENTISTS FIC DATA, INTERPRETATIO THE INTEGRITY OF THE DA CONSISTENT WITH WILLIAN	ING ACADEMY ("THE ACADE PRINCIPLES OF EXPERT W. S AND ATTORNEYS TO DISCI N OF DATA AND EXTRAPOLA TA OR STRAYING FROM ETH M MITCHELL'S TEACHING MI	EMY") IS A PROGRAM OFFERING ITNESS KNOWLEDGE, RESEARCH USS, IN A COLLABORATIVE SETTI ATION FROM THE DATA IN A COU HICAL AND LEGAL PRINCIPLES T	ANNUAL WORKSHOPS AIMED AT I, TESTING AND EXPERIENCE THE ING, HOW BEST TO ACHIEVE THE IRT OF LAW OR OTHER LEGAL HE WORKSHOPS INCORPORATE
) (B	
4 C	(Code) (Expense:	S \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe	ın Schedule O)			
	(Expenses \$	including grants o	f\$) (Revenue \$)
40	Total program service expenses	29 391 230			

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III 2	8		No
9	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? <i>If</i> "Yes," complete Schedule D, Part V	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		No
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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $\chi^{f E}$	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		No
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	Yes	
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	
L 5	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
L 6	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
L7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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 1^7 If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	,		1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $\$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
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?	38	Yes	

Par	Statements Regarding Other IRS Fillings 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 1,375		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, 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	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		.,,,
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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	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	,,,		110
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	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	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
LO	Section 501(c)(7) organizations. Enter	7.5		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	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			
.4a	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		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
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	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	organization of manning analysis of the property of the proper	_		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se		evenu	<i>ye Cod</i>	e.) No
		evenu 10a		
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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 whistleblower 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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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 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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►MN
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►KATHLEEN M PANCIERA 875 SUMMIT AVENUE ST PAUL, MN (651) 290-7522

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) (C)								
(A) Name and Title	hours per week (list any hours					heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and
		Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	Name and Title A verage hours per week (list any hours A verage hours per week (list any hours and a director/trustee) A verage hour person is both an officer and a director/trustee) A verage hour person is both an officer and a director/trustee) A verage hour person is both an officer and a director/trustee) A verage hour person is both an officer organization (W-2/1000 MISC)							(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima amount o compens from t	ited f other sation the		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												+		
												+		
												+		
												+		
												\bot		
1b	Sub-Total			٠.				 -						
C	Total from continuation shee	•						 -						
d	Total (add lines 1b and 1c) .						•	F		1,356,326		0		204,939
2	Total number of individuals (ir \$100,000 of reportable comp	=					d abov	e) w	ho receive	d more th	ıan			
3	Did the organization list any 6	ormor officer du	actoro	r truc	+00	kov	ample		or bigboo	taamnan	cated ampleyee		Yes	No
3	On line 1a? If "Yes," complete:						• •	• •	, or mignes	• •	sated employee	3		No
4	For any individual listed on lin organization and related organ individual													
5	Did any person listed on line 1	1a receive or acc	rue cor	nner	satı	on fr	om an	• / nr	elated ord	anızatıon	or individual for	4	Yes	
•	services rendered to the orga											5		No
													•	
<u>Se</u> 1	ction B. Independent Co Complete this table for your fi		ensate	d ınde	eper	ndent	contr	acto	rs that rec	eived mo	re than \$100.000	of		
	compensation from the organi	zation Report co									thin the organization			
	ī	(A) Name and business	address							Des	(B) cription of services		(C Comper	
	GROUP 610 OPPERMAN DRIVE EAGAN 47 24448 GREENWAY AVE FOREST LA									LIBRARY MA	ATERIALS SUPPLIER SERVICES	\dashv		351,078 216,110
	O PO BOX 1450 MINNEAPOLIS MN 554									РНОТОСОР	IERS, PRINTING	\top		182,642
	SENKRUPP ELEVATOR CORP PO BOX 9		31193							SERVICES ELEVATOR	UPGRADE			135,644
MUSK	A ELECTRIC 1985 OAKCREST AVE ROS	SEVILLE MN 55113								ELECTRICA SERVICES	L UPGRADES AND			123,926

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 100

Form 99								Page 9
Part V	/##T		o f Revenue ule O contains a respon	nse to any question i	n 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
s &	1a	Federated cam	paigns 1a					
ant	ь	Membership du	ies 1b					
Ę Ę	С	Fundraising eve	ents 1c	12,580				
ifts, ¤r. ∆	d	Related organiz	zations 1d					
છું ≅	e	Government grants		499,072				
Sir	f	_	ons, gifts, grants, and 1f	1,385,283	}			
uti	'	similar amounts no	ot included above		ļ	ļ		
를	g	Noncash contribute 1a-1f \$	ons included in lines	20,754				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f	🕍	1,896,935			
				Business Code				
ille.	2a	TUITION REVENUE	<u>.</u>	900099	31,520,167	31,520,167		
Program Service Revenue	ь	PUBLIC HEALTH LA	W CENTER INC - CO	611710	483,424	483,424		
	С	AUX & SUPP SER'	VICES	611710	135,386	135,386		
	d	EDUCATIONAL ACT	TIVITIES	611710	103,785	103,785		
	е							
Gra	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a-2f		32,242,762			
	3		ome (including divident					
			aramounts)	<u> </u>	766,510			766,510
	4		stment of tax-exempt bond p		14,178	14,178		
	5	Royalties	() Dool		14,176	14,176		
	6a	Gross rents	(ı) Real 16,809	(11) Personal				
	Ь	Less rental	26,477					
	_c	expenses Rental income	-9,668					
	d	or (loss)	me or (loss)		-9,668		-9,668	
	"	Net rental inco	(i) Securities	(II) O ther	5,000		2,000	
	7a	Gross amount						
		from sales of assets other	8,903,853	3,228				
	ь	than inventory Less cost or						
		other basıs and sales expenses	8,834,841	0				
	С	Gain or (loss)	69,012	3,228				
	d		ss)	· · · · •	72,240			72,240
Φ	8a	Gross income f events (not inc						
振		\$12	2,580					
ě		of contributions See Part IV, lin	s reported on line 1c)					
ř.		•	a	23,932				
Other Revenue	b		penses b	26,948				
0	c		loss) from fundraising () آ	events 🛌	-3,016			-3,016
	9a		from gaming activities ne 19					
		,	а					
	b		penses b					
	С		loss) from gamıng actı) آ	vities				
	10a	Gross sales of returns and allo						
			a					
	b	Less cost of g	oods sold b					
	С		(loss) from sales of inve					
		Miscellaneous		Business Code	44.55	است م		
		MISCELLANEC	DUSINCOME	900099	44,645	44,645		
	b							
	C	A.II						
	d e	All other reven	L	🕨				
					44,645			
	12	Total revenue.	See Instructions		35,024,586	32,301,585	-9,668	835,734

Form 9	990 (2012)				Page 10
Part					
Section	n 501(c)(3) and 501(c)(4) organizations must complete all columns All			lete column (A)	
_	Check if Schedule O contains a response to any question in this Pa		(B)	(c)] (D)
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	6,400	6,400		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	11,494,243	11,494,243		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	484,610	6,423	448,172	30,015
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	12,524,503	9,447,755	2,626,646	450,102
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	660,617	482,567	156,098	21,952
9	Other employee benefits	1,581,495	1,037,898	456,896	86,701
10	Payroll taxes	969,313	694,917	236,717	37,679
11	Fees for services (non-employees)				
а	Management				
b	Legal	121,817		121,817	
С	Accounting	107,149		107,149	
d	Lobbying	,		, i	
e	Professional fundraising services See Part IV, line 17	60,154			60,154
f	Investment management fees	198,698		198,698	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	615,525	296,058		49,616
12	Advertising and promotion	93,358	230,030	93,358	+3,010
13	Office expenses	970,129	671,989	222,990	75,150
	·		, , , , , , , , , , , , , , , , , , ,	<u> </u>	
14	Information technology	476,771	166,737	290,831	19,203
15	Royalties				
16	Occupancy	743,720		743,720	
17 18	Payments of travel or entertainment expenses for any federal,	266,915	211,043	19,683	36,189
19	state, or local public officials	308,703	198,091	62,744	47,868
20	Interest	456,465	190,091	456,465	47,000
21	Payments to affiliates	+30,403		+30,403	
21	Depreciation, depletion, and amortization	1,489,477	418,450	1,071,027	
23		218,704	37,569	1,071,027	
24	Insurance	210,704	37,309	101,133	
а	VOLUNTARY SEPARATION AG	2,239,137		2,239,137	
b	BANK FEES	226,606		226,606	
c	DUES & MEMBERSHIPS	141,153	87,394	51,327	2,432
d	PROFESSIONAL DEVELOPMEN	82,906	60,015	19,698	3,193
e	All other expenses	40,441	4,073,681	-4,079,402	46,162
25	Total functional expenses. Add lines 1 through 24e	36,579,009	29,391,230	6,221,363	966,416
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ if following SOP 98-2 (ASC 958-720)	,,	, ,	,,,,	,

Part X Balance Sheet

Pai	LX	Check if Schedule O contains a response to any question in thi	s Part	x			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			7,200,608	1	7,470,942
	2	Savings and temporary cash investments				2	10,696,164
	3	Pledges and grants receivable, net			4,416,489	3	3,802,858
	4	Accounts receivable, net			455,534	4	373,441
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	art II	of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrı mploy	buting employers		6	
88	7	Notes and loans receivable, net			3,354,423		2,911,934
4	8	Inventories for sale or use			28,316		23,301
	9	Prepaid expenses and deferred charges			202,691	9	252,567
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		47,116,731	,		
	Ь	Less accumulated depreciation	10b	28,157,011	19,461,115	10c	18,959,720
	11	Investments—publicly traded securities	٠		24,309,762	11	27,708,423
	12	Investments—other securities See Part IV, line 11			2,340,029	12	1,897,194
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,454,603	15	1,954,943
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			63,223,570	16	76,051,487
	17	Accounts payable and accrued expenses			1,358,141	17	3,664,617
	18	Grants payable				18	
	19	Deferred revenue			629,318	19	631,935
	20	Tax-exempt bond liabilities			10,980,000	20	21,470,000
ø	21	Escrow or custodial account liability Complete Part IV of Sch				21	<u> </u>
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	ors, tr				
аę		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	es .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X o	f Schedule	0.040.077		7 700 070
		D			8,943,277 21,910,736		7,760,676
	26	Total liabilities. Add lines 17 through 25			21,910,736	26	33,527,228
ĭč	27	lines 27 through 29, and lines 33 and 34.			22 272 570	3.7	22 447 064
<u>ರ</u>	27	Unrestricted net assets			22,372,570 5,435,500		22,417,861 6,036,352
<u> </u>	28	Temporarily restricted net assets			13,504,764		
ĭ	29	Permanently restricted net assets			13,304,764	29	14,070,046
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check be complete lines 30 through 34.	iere F	j and			
Ξ	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ď.	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Net	33	Total net assets or fund balances			41,312,834	33	42,524,259
	34	Total liabilities and net assets/fund balances			63,223,570	34	76,051,487

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
	Check if Schedule O Contains a response to any question in this raft X1	· ·	• •	• •	• • • •
1	Total revenue (must equal Part VIII, column (A), line 12)	1		35,0	24,586
2	Total expenses (must equal Part IX, column (A), line 25)	2		·	
3	Revenue less expenses Subtract line 2 from line 1	3			554,423
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			312,834
5	Net unrealized gains (losses) on investments	5			55,222
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		7	10,626
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		42,5	524,259
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				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		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
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 Consolidated basis Both consolidated and separate basis			1	
C	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 is Schedule O	n		1:	
	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?		За	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: 41-0518750

Name: WILLIAM MITCHELL COLLEGE OF LAW

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

Form 990, Part VII - Compensation of Compensated Employees, and Independent	Officers, Dir ndent Contra	ectors	s,Tru	uste	ees	, Key	/ En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	(C on (do than	o not one son i er an trus	box s bo d a tee)	th	_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
STEPHEN B BONNER CHAIR	1 00 0 00	х		х				0	0	0
DANIEL O'KEEFE VICE CHAIR	1 00 0 00	х		х				0	0	0
JOHN H HOOLEY SECRETARY	1 00 0 00	х		х				0	0	0
LOUIS L AINSWORTH TREASURER	1 00 0 00	х		х				4,712	0	0
LYNN M ANDERSON TRUSTEE	1 00 0 00	х						0	0	0
LAWRENCE T BELL TRUSTEE	1 00 0 00	х						0	0	0
JOHN BUCK TRUSTEE	1 00 0 00	х						0	0	0
JEFFREY P CAIRNS TRUSTEE	1 00 0 00	х						0	0	0
RICHARD R CROWL TRUSTEE	1 00 0 00	х						0	0	0
LISA A GRAY TRUSTEE	1 00 0 00	х						0	0	0
JILL FLASKAMP HALBROOKS TRUSTEE	1 00 0 00	х						165	0	0
JAMES J HOOLIHAN TRUSTEE	1 00 0 00	х						0	0	0
KATHY S KIMMEL TRUSTEE	1 00 0 00	х						0	0	0
STEPHEN R LEWIS JR TRUSTEE	1 00 0 00	х						0	0	0
MARTIN LUECK TRUSTEE	1 00 0 00	х						0	0	0
HONORABLE ERIC J MAGNUSON TRUSTEE	1 00 0 00	х						0	0	0
HONORABLE HELEN M MEYER TRUSTEE	1 00 0 00	х						0	0	0
JOSEPH S MICALLEF TRUSTEE	1 00 0 00	х						0	0	0
RUTH A MICKELSON TRUSTEE	1 00 0 00	х						0	0	0
MANSCO PERRY III TRUSTEE	1 00 0 00	х						0	0	0
KATHLEEN FLYNN PETERSON TRUSTEE	1 00 0 00	х						0	0	0
JUDGE DENISE D REILLY TRUSTEE	1 00 0 00	х						0	0	0
PETER M REYES JR TRUSTEE	1 00 0 00	х						0	0	0
ELLEN G SAMPSON TRUSTEE	1 00 0 00	х						0	0	0
LENOR A SCHEFFLER TRUSTEE	1 00 0 00	х						0	0	0

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

40 00

0 00 40 00

0 00

EILEEN SCALLEN

PROFESSOR OF LAW

MICHAEL STEENSON

PROFESSOR OF LAW

Compensated Employees, and Indepen	ndent Contra	actors						•	•	
(A) Name and Title	(B) Average hours per week (list any		than	not one on i r an trust	box s bo d a tee)	, th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
WILLIAM R SIEBEN TRUSTEE	1 00 0 00	х						0	0	0
DAVID M SPARBY TRUSTEE	1 00 0 00	х						0	0	0
WILLIAM WILL F STUTE TRUSTEE	1 00 0 00	х						0	0	0
THOMAS W TINKHAM TRUSTEE	1 00 0 00	х						0	0	0
ERIC C TOSTRUD TRUSTEE	1 00 0 00	х						0	0	0
MIN AMY S XU TRUSTEE	1 00 0 00	х						0	0	0
ERIC S JANUS PRESIDENT/DEAN	50 00 2 00			х				258,029	0	47,038
KATHLEEN M PANCIERA VP FINANCE	50 00 4 00			х				163,905	0	12,473
LINDA K BERG VP INSTITUTIONAL ADVANCEMENT	50 00 0 00					х		177,055	0	25,672
KENNETH PORT PROFESSOR OF LAW	40 00 0 00					х		198,874	0	36,948
JOHN O SONSTENG PROFESSOR OF LAW	40 00 0 00					х		190,539	0	35,957

Χ

Χ

182,445

180,602

0

0

22,595

24,256

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As Filed Data -

DLN: 93493127007454

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

Inspection

		ne organ							Employer	ident if icat ic	n number
WILL	AM MII	CHELL COI	llege of Law						41-05187	750	
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	nanizations	s must comi	olete this n			
				te foundation becaus						isti actionis	•
1	Ť			ion of churches, or a							
2	Ī			d in section 170(b)(1				•	,,,,,,		
3	, T			perative hospital se				n 170(b)(1)	(A)(iii).		
4	,			h organization opera						1)(A)(iii). E	nter the
	·	hospita	al's name, c	ity, and state	_						
5	Γ	An org	anızatıon op	erated for the benefi	t of a college	e or universi	ty owned or o	perated by a	a governmen	tal unıt desc	ribed in
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)						
6	Γ	A fede	ral, state, or	local government o	r governmen	tal unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).		
7	Γ	_		at normally receives		•	support from	a governme	ntal unit or f	rom the gen	eral public
	_			on 170(b)(1)(A)(vi).			malata Dart II				
8 9	<u>'</u>		-	: described in sectioi at normally receives			-	-	utions mam	harchin faac	and groce
9	,			uties related to its e							
		•		oss investment inco	•	-			` '		
				ganization after June						tax) Holli bu	isiliesses
10	_			ganization after June ganized and operate							
11	<u>'</u>	_		ganized and operated ganized and operated						o carry out	the nurneces of
11	,			ly supported organiz							
				ibes the type of supp	orting organ	ization and	complete line	s 11e throu	gh 11h		
			┌ Type I	, ,,			-				
е	Γ	•	_	ox, I certify that the	_					•	•
			nan foundat n 509(a)(2)	ion managers and ot	her than one	or more put	olicly support	ed organizat	ions describ	ed in section	n 509(a)(1) or
f				received a written d	etermination	from the IR	S that it is a	Type I, Type	e II, or Type	III support	ing organization,
		check	thıs box								i r
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the		
			ng persons? erson who d	rectly or indirectly o	controls eith	eralone ort	together with	nersons des	scribed in (ii)	1	Yes No
				governing body of th				persons des	ochbed iii (ii)	, 11g	
		•		er of a person descr		_				11g	
			•	lled entity of a perso			above?			11g	
h		• •		ng information about		., .,					,
							(5)				
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	suppo	rted		organization	organizat	ion in	the organi	zation	organizat	ion in	monetary
o	rganiz	ation		(described on	col (i) lis		ın col (i) d	,	col (i) org		support
				lines 1-9 above or IRC section	your gove docume		suppor	τ,	in the U	5 /	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
						1.10	1.03	110	1.03	110	
			ļ			L	1		ļ		

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
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	<u>iplete Pa</u>	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(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	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(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	First five years. If the Form 990 is this box and stop here							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 stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. 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	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-ana-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							▶ ┌

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	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> 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) 2009	(c) 2010	(d) 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)			Liberal Counties and	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					
	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: 93493127007454

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

	LLIAM MITCHELL COLLEGE OF LAW		Emp	lloyer identii ica	cion numbe	:1
				0518750	<u> </u>	
Pa	organizations Maintaining Donor Ad organization answered "Yes" to Form 990		nds	or Accounts	. Complet	te if the
	organization answered Tes to Form 550	(a) Donor advised funds		(b) Funds and	other accou	ınts
1	Total number at end of year	3				
2	Aggregate contributions to (during year)	2,162				
3	Aggregate grants from (during year)	23,055	1			
4	Aggregate value at end of year	2,817,018	+			
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	ors in writing that the assets held in dono		sed	✓ Yes	┌ No
6	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?				✓ Yes	┌ No
Pa	rt II Conservation Easements. Complete	f the organization answered "Yes" to	Forn	n 990, Part IV	, line 7.	
1 2	Purpose(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 Complete lines 2a through 2d if the organization held	n or education) Preservation of an A Preservation of a ce	ertifie	d historic struct	cure	
	easement on the last day of the tax year	Г		11-14 -4 46-	F., J £ + b	V
_	Total number of conservation easements	-	2a	Held at the	Ena or the	Year
a		-	2a 2b			
Ь	Number of conservation easements on a certified hist	Large structure included in (a)				
C		` '	2c			
d	historic structure listed in the National Register	L	2d			
3	Number of conservation easements modified, transfer the tax year 🛌	red, released, extinguished, or terminated	i by tr	ie organization (during	
4	Number of states where property subject to conserva	tion easement is located ►	_			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, handl	ıng of	violations, and	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, insper-	ecting, and enforcing conservation easeme	ents d	luring the year		
7	Amount of expenses incurred in monitoring, inspectin \$\blue{x}\$\$	g, and enforcing conservation easements	durın	g the year		
8	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sect	ion 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
9	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's financial s				
Par	rt IIII Organizations Maintaining Collection Complete if the organization answered "		r Ot	her Similar <i>i</i>	Assets.	
1a	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its revent ets held for public exhibition, education, o	rrese	arch in furthera		
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, education, o				IC
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, histo	rical treasures, or other similar assets for	finan		le the	
_	following amounts required to be reported under SFAS			g, p		

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	storical i	<u>reasures, or C</u>	tne	<u>r Similar As:</u>	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	heck any of	the following that	are a	significant use	of its	
а	Public exhibition		d	┌ Loan	or exchange prog	rams			
b	Scholarly research		e	┌ Othe	r				
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expl	aın hov	w they furth	er the organization	n's ex	kempt purpose i	n	
5	During the year, did the organization solicit							_	_
В-	assets to be sold to raise funds rather than t		-					Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ea Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					sets	not [_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the	e follov	wing table	_				
							Am	ount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance				L	1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, Iır	ne 21?	•			ſ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation has	been provided in F	art)	XIII		Γ
Pa	tt V Endowment Funds. Complete								
4_	Danis and constitution of the constitution of	(a)Current year 24,135,625	(b)	Prior year 24,156,466	b (c) Two years back 18,671,28	+	Three years back 16,866,432	(e)Four y	ears back 20,396,993
1a	Beginning of year balance	494,105		720,056			600,264		694,728
b	Contributions	494,103		720,030	3,104,800	1	000,204		094,720
С	Net investment earnings, gains, and losses	2,148,150		-308,396	3,092,996	5	1,967,214	-	3,609,841
d	Grants or scholarships	421,292		345,098	415,918	3	354,959		283,616
е	Other expenditures for facilities and programs	264,205		87,403	296,763	3	407,666		331,832
f	Administrative expenses								
g	End of year balance	26,092,383		24,135,625	24,156,466	5	18,671,285	1	16,866,432
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g, colun	nn (a)) held as				
а	Board designated or quasi-endowment 🕨	37 480 %							
b	Permanent endowment ► 53 840 %								
C	Temporarily restricted endowment ► 8 6 The percentages in lines 2a, 2b, and 2c sho	80 % uld equal 100%							
3a	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that are hel	d and admınıstere	d for	the		
	organization by (i) unrelated organizations						3a(Yes i) Yes	No
	(ii) related organizations								No
b	If "Yes" to 3a(II), are the related organization					٠.	3b	_	
4	Describe in Part XIII the intended uses of the	ne organization's ei	ndowm	ent funds					<u> </u>
Par	t VI Land, Buildings, and Equipme	ent. See Form 9	90, Pa					_	
	Description of property			(a) Cost or basis (inves			(c) Accumulated depreciation	(d) Bo	ok value
1a	Land				28:	1,700			281,700
b	Buildings		•		27,345	5,784	12,568,745	1	4,777,039
c	Leasehold improvements		•						
d I	Equipment				19,401	1,606	15,588,266	<u> </u>	3,813,340
				1		7,641			87,641
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), lıne	10(c).)			1	8,959,720

Part VIII Investments—Other Securities. See F	<u>Form 990, Part X, line 12</u>	2.	
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
1)Financial derivatives			
2)Closely-held equity interests			
ther			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)			
art VIII Investments-Program Related. See	Form 990, Part X. line	13.	
(a) Description of investment type	(b) Book value		od of valuation
,	(-,		f-year market value
		1 22	<u> </u>
		1	
Total (Column (h) must equal Form 990, Part X, col (B) line 13.)			
otali (colami (b) mast equal rom 350, rate X, cor (b) mic 15)		_	
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descript	tion		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. See Form 990, Part X			
(a) December of leability			
(a) Description of Hability	(b) Book value		
ederal income taxes			
	224 066		
NNUITIES PAYABLE	324,866		
NNUITIES PAYABLE	324,866 1,990,035		
NNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY	1,990,035		
NNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47	1,990,035 570,540		
NNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE	1,990,035 570,540 3,538,908		
NNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE	1,990,035 570,540		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
ANNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
NNUITIES PAYABLE NTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC	1,990,035 570,540 3,538,908 1,322,050		
ANNUITIES PAYABLE INTEREST RATE EXCHANGE LIABILITY CONDITIONAL ASSET RETIREMENT RESERVE-FIN 47 GOVERNMENT GRANT REFUNDABLE DUE TO PUBLIC HEALTH LAW CENTER, INC DUE TO CILE Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,990,035 570,540 3,538,908 1,322,050		

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er F	Return
1	Total revenue, gains, and other support per audited financial statements	1	30,730,804
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a 2,055,222		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	7,911,215
3	Subtract line 2e from line 1	3	22,819,589
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 198,698		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	12,204,997
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	35,024,586
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	29,472,790
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		
С	Other losses		
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	5,094,878
3	Subtract line 2e from line 1	3	24,377,912
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 198,698		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	12,201,097
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	36,579,009
Par	XIII Supplemental Information	•	
Com	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	art IV	, lines 1b and 2b,

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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE INTENDED USES OF THE ENDOWMENT FUNDS ARE TO PROVIDE SCHOLARSHIPS, FUND ENDOWED FACULTY CHAIRS AND TO PROVIDE FUNDING FOR PROGRAMS AND FACILITIES AT THE COLLEGE
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	WILLIAM MITCHELL, PHLC AND SBA QUALIFY AS TAX- EXEMPT NONPROFIT ORGANIZATIONS OTHER THAN PRIVATE FOUNDATIONS UNDER SECTION 501(C)(3) OR (4) OF THE INTERNAL REVENUE CODE AND SIMILAR STATUTES OF MINNESOTA LAW WILLIAM MITCHELL AND ITS AFFILIATES FILE INCOME TAX RETURNS IN THE U S FEDERAL JURISDICTION AND IN THE STATE OF MINNESOTA WHEN TAX RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS MAY BE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKEN OR THE AMOUNT OF TAX LIABILITY THAT MIGHT ULTIMATELY BE ASSESSED SIGNIFICANT TAX POSITIONS TAKEN BY THE COLLEGE INCLUDE MAINTENANCE OF TAX- EXEMPT STATUS AND ACCURATE DETERMINATION AND REPORTING OF UNRELATED BUSINESS INCOME SUBJECT TO TAXATION AS OF JUNE 30, 2013, AND FOR THE YEAR THEN ENDED, THERE ARE NO MATERIAL UNRECOGNIZED/DERECOGNIZED TAX BENEFITS OR TAX PENALTIES OR INTEREST WITH FEW EXCEPTIONS, THE COLLEGE IS NO LONGER SUBJECT TO US FEDERAL OR STATE INCOME TAX EXAMINATIONS BY AUTHORITIES FOR YEARS BEFORE FISCAL YEAR 2009
PART XI, LINE 2D - OTHER ADJUSTMENTS		PUBLIC HEALTH LAW CENTER REVENUE 4,964,829 STUDENT BAR ASSOCIATION REVENUE 65,772 DIRECT FUNDRAISING EXPENSES 26,948 DIRECT RENTAL EXPENSES 26,477 CHANGE IN VALUE OF DERIVATIVE FINANCIAL INSTRUMENT 731,258
PART XI, LINE 4B - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 14,677 STUDENT BAR ASSOCIATION SCHOLARSHIPS 8,000 WILLIAM MITCHELL COLLEGE OF LAW SCHOLARSHIPS 11,494,243 PUBLIC HEALTH LAW CENTER - INTERCOMPANY PAYMENT 483,424 UNREALIZED LOSS ON FOREIGN CURRENCY 5,955
PART XII, LINE 2D - OTHER ADJUSTMENTS		PUBLIC HEALTH LAW CENTER EXPENSES 4,951,775 DIRECT FUNDRAISING EXPENSES 26,948 DIRECT RENTAL EXPENSES 26,477 STUDENT BAR ASSOCIATION EXPENSES 48,969
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS 11,494,243 PUBLIC HEALTH LAW CENTER - INTERCOMPANY PAYMENT 483,424 PUBLIC HEALTH LAW CENTER - INTERCOMPANY PAYMENT (WORK STUDY) 23,134 STUDENT BAR ASSOCIATION - INTERCOMPANY PAYMENT (WORK STUDY) 698 STUDENT BAR ASSOCIATION - INTERCOMPANY PAYMENT (GIFT/GRANT) 900

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As Filed Data -

DLN: 93493127007454

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

WILLIAM MITCHELL COLLEGE OF LAW

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

41-0518750

Рa	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
_	programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain If you need more space use Part II	3	Yes	
		4		
4	Does the organization maintain the following?	1		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
t	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	4b	Yes	
,	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	1	165	
	with student admissions, programs, and scholarships?	4c	Yes	
c	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a		No
ŀ	Admissions policies?	EP		Na
•	Admissions poneres.	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
C	I Scholarships or other financial assistance?	5d	Yes	
€	Educational policies?	5e		No
				110
f	Use of facilities?	5f		Νo
,	Athletic programs?	_E		Na
•	Admente programs	5g		No_
ŀ	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		4		
		-		
	Dana blancara de la companya de la c	_ ا	\	
	ndoes the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b	Yes	No.
	If you answered "Yes" to either line 6a or line 6b, explain on Part II	100		140
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	7	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 NON DISCRIMINATORY POLICY IS PUBLICLY COMMUNICATED, VIA OUR WEBSITE IN THE ADMISSIONS SECTION, THE STUDENT HANDBOOK AND OUR BROCHURES ADDRESSING ADMISSION TO THE COLLEGE
EXPLANATION OF RACIAL DISCRIMINATION	SCHEDULE E, PART I, LINE 5	WE BELIEVE THAT IN ORDER TO MAXIMIZE THE QUALITY OF THE LEARNING EXPERIENCE IT IS IMPORTANT TO CREATE A DIVERSE STUDENT BODY LIKEWISE, AN EFFECTIVE LEGAL PROFESSION MUST REFLECT THE DIVERSITY OF MODERN SOCIETY TO THAT END, OUR SCHOLARSHIP POLICY TAKES INTO ACCOUNT MANY FACTORS, INCLUDING MERIT (AS DEMONSTRATED BY LSAT SCORES AND UNDERGRADUATE GPA), SOCIO-ECONOMIC BACKGROUND, CULTURE, RACE, CAREER PLANS UPON GRADUATION, AND OTHER FACTORS SUGGESTING THAT A STUDENT WILL BOTH BENEFIT HIS OR HER FELLOW STUDENTS AND THE LEGAL PROFESSION
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	WILLIAM MITCHELL COLLEGE OF LAW RECEIVES FEDERAL WORK STUDY FUNDING AND IS A PARTICIPANT IN PERKINS LOANS AND OTHER GRADUATE LEVEL FEDERAL COLLEGE LOAN PROGRAMS

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493127007454

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Internal Revenue Service

Department of the Treasury

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization VILLIAM MITCHELL COLLEGE OF LAW					Employer identi	fication number
					41-0518750	
Pa	"Yes" to Form 990, Pa			he United States. C	omplete if the organiza	ition answered
1	For grantmakers. Does the dassistance, the grantees' eligible grants or assistance?	jibility for the	grants or assı	stance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the o	rganızatıon's p	procedures for monitori	ng the use of grant fur	ids outside
3	Activites per Region (The follow	ing Part I, line	3 table can be d	uplicated if additional sp	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
	EUROPE (INCLUDING ICELAND & GREENLAND) -	0			AS A MEMBER OF THE CONSORTIUM FOR INNOVATIVE LEGAL	65,972

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	(f) 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>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
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			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						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)	~	Yes	Γ	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	Yes	্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	Yes	굣	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	Yes	굣	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	Yes	굣	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).	Г	Yes	্	Νo

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. Also com	piete this part to provide any ac	dditional information (see instructions).
I dentifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 NO GRANTS ARE MADE OUTSIDE OF THE UNITED STATES
METHOD USED TO ACCCOUNT FOR EXPENDITURES		SCHEDULE F, PART I, LINE 3 THE COLLEGE TRACKS THE COURSE REVENUE AND EXPENSES AND PROVIDES AN ACCOUNTING TO CILE AT THE END OF EACH PROGRAM ANY EXCESS REVENUE OVER EXPENSES IS PAID TO CILE AND ANY EXCESS EXPENSES OVER REVENUE ARE REIMBURSED BY CILE TO THE SCHOOL
		Schedule F (Form 990) 2012

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OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Supplemental Information Regarding

Open to Public Inspection

Name of the organization WILLIAM MITCHELL COLLEGE OF LAW

COMMUNICATIONS

717 W GERMAIN ST

MINNEAPOLIS, MN

55422

Employer identification number

41-0518750

18,154

50,180

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

1 Indicate whether the organization raised funds through any of the following activities Check all that apply Mail solicitations e 🔽 Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ✓ Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (iii) Dıd (ii) Activity (iv) Gross receipts (v) A mount paid to (vi) A mount paid to (or retained by) ındıvıdual fundraiser have from activity (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No DIRECT MAIL, JACKIE ANDERSON EMAILAND W7153 135TH AVENUE TELEMARKETING 295,419 41,100 254,319 CONSULTING BAY CITY, WI 54723 SERVICES PHONE BANK OPERATION ARIA

ST CLOUD, MN 56301 FUNDRAISING CHRIS RAHIL MAGNET CONSULTING MARKETING SERVICES 1475 BRIDGEWATER RD 0 900 -900 Nο

68,334

Nο

363.753 60.154 303.599

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

AL, AK, AZ, AR, CA, CO, CT, DC, DE, FL, GA, ID, IL, IN, IA, HI, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WV, WI, WY

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2
Pai	rt II	Fundraising Events. Con more than \$15,000 of funda events with gross receipts (raising event contribut			
			(a) Event #1 GOLF TOURNAMENT	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	
₹	1	Gross receipts	36,51	2		36,512
Revenue	2	Less Contributions	12,58	0		12,580
œ	3	Gross income (line 1 minus line 2)	22.02	2		22.022
	<u> </u>		23,93			23,932
	4	Cash prizes	1,45	0		1,450
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	5,30	5		5,305
쯊	7	Food and beverages .	19,87	0		19,870
Direct	8	Entertainment				
۵	9	Other direct expenses .	32	3		323
	10	Direct expense summary Add Iii	nes 4 through 9 in colum	n (d)		(26,948)
	11	Net income summary Combine I				-3,016
Par	t II	I Gaming. Complete if the o	rganization answered	"Yes" to Form 990, Pa	rt IV, line 19, or rep	
		\$15,000 on Form 990-EZ, li	ne 6a.			
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
~	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	│ Yes │ No	│ Yes │ No	┌ Yes	
	7	Direct expense summary Add line	es 2 through 5 in column	(d)		
	8	Net gaming income summary Con	nbine lines 1 and 7 in col	umn (d)		
9	Ent	ter the state(s) in which the organiz	ation operates gaming ac	tivities		
а		the organization licensed to operate		<u> </u>		. Fyes Fno
b	If"	No," explain				
10a	We	re any of the organization's gaming				
b	If"	Yes," explain				

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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

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

OMB No 1545-0047

DLN: 93493127007454

Open to Public

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

VILLIAM MITCHELL COLLEGE OF LAW	1-0518750
Part I General Information on Grants and Assistance	
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, the selection criteria used to award the grants or assistance?	on answered "Yes" to
(a) Name and address of (b) EIN (c) IRC Code (d) Amount of cash (e) Amount of non- (f) Method of (g	J) Description of (h) Purpose of gran -cash assistance or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	.
Enter total number of section 501 (c)(3) and government organizations listed in the line 1 table	

Schedule I	(Form 990) 2012
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 2
	Part III can be duplicated if additional space is needed.

(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)	(f) Description of non-cash assistance
614	11,494,24	3		
_	recipients	recipients cash grant	recipients cash grant non-cash assistance	recipients cash grant non-cash assistance (book, FMV, appraisal, other)

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 SCHOLARSHIP AWARDS ARE MERIT-BASED AND ARE USED TO PAY FOR THE PROGRAM TUITION STUDENT GRADES ARE MONITORED TO ENSURE COMPLIANCE WITH SCHOLARSHIP REQUIREMENTS

Schedule I (Form 990) 2012

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DLN: 93493127007454

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization WILLIAM MITCHELL COLLEGE OF LAW **Employer identification number**

41-0518750

Pai	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel 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 Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?			
	directors, trustees, and the CLO/Executive Director, regarding the items checked in line 1a	2		
_	To dead on the form of the fellower the file of the control of the			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☐ Compensation committee ☐ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
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, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
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, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)ERIC S JANUS PRESIDENT/DEAN	(i) (ii)	256,622 0	0	1,407 0	19,001 0	28,037 0	305,067 0	0 0
(2)KATHLEEN M PANCIERA VP FINANCE	(i) (ii)	163,174 0	0 0	731 0	11,989 0	484 0	176,378 0	0
(3)LINDA K BERG VP INSTITUTIONAL ADVANCEMENT	(i) (ii)	176,324 0	0 0	731 0	13,556 0	12,116 0	202,727 0	0 0
(4)KENNETH PORT PROFESSOR OF LAW	(i) (ii)	198,619 0	0 0	255 0	13,375 0	23,573 0	235,822	0 0
(5)JOHN O SONSTENG PROFESSOR OF LAW	(i) (ii)	188,257 0	0	2,282, 0	12,467 0	23,490	226,496 0	0
(6)EILEEN SCALLEN PROFESSOR OF LAW	(i) (ii)	182,190 0	0 0	255 0	12,014 0	10,581 0	205,040	0 0
(7)MICHAEL STEENSON PROFESSOR OF LAW	(i) (ii)	179,195 0	0 0	1,407 0	12,918 0	11,338 0	204,858 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

Identifier	Return Reference	Explanation
	• • • • • • • • • • • • • • • • • • •	THE COLLEGE HAS AN HONORARY COUNTRY CLUB MEMBERSHIP THAT THE PRESIDENT USES TO ENTERTAIN CLIENTS, DONORS AND ALUMNI OF THE COLLEGE THE PRESIDENT WOULD EITHER PAY DIRECTLY OR REIMBURSE THE COLLEGE FOR CHARGES RELATED TO PERSONAL USE OF THE CLUB MEMBERSHIP

Schedule J (Form 990) 2012

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DLN: 93493127007454

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.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

WIL	LIAM MITCHELL COLLEGE OF I	LAW							41	41-0518750						
Pa	art I Bond Issues								I					-		
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Descripti	on of purpose	(g) De	efeased	beha	On alf of uer		Pool		
		<u> </u>		<u> </u>					Yes	No	Yes	No	Yes	No		
Α	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	60416HBG8	10-02-2003	15,80	00,000 R	UILDING AN A NTO THE COI EMODELING O LASSROOMS	LLEGE AND		x		х		×		
В	MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY	41-0988525	NONEAVAIL	05-30-2013	10,80	00,000 IS	EFUND 10/02 SSUE AND BO 30,000 FOR IS OST		x		х		x			
Pa	rt III Proceeds															
1	A mount of bonds retired				<u> </u>	A = 130.00		В		С	\longrightarrow	D				
$\frac{1}{2}$	Amount of bonds legally defea	ased			 	5,130,00	30				\longrightarrow					
3	Total proceeds of issue					15,800,00		10,800,000			\rightarrow					
4	Gross proceeds in reserve funds			<u> </u>	15,000,00	1	10,000,000			\rightarrow			-			
5				+	313,00	00				$\overline{}$						
6	Proceeds in refunding escrows				10,696,16		10,696,164			$\overline{}$						
7	Issuance costs from proceeds			<u> </u>	273,00		103,836			$\overline{}$						
8	Credit enhancement from proc	ceeds			151,836						$\overline{}$					
9	Working capital expenditures t	from proceeds														
10	Capital expenditures from pro	ceeds		-		15,062,16	64				$\neg \uparrow$					
11	Other spent proceeds															
12	Other unspent proceeds				<u> </u>		1									
13	Year of substantial completion	n			20	0.5	2(013								
			-		Yes	No	Yes	No	Yes	N	lo	Yes	\bot	No		
14	Were the bonds issued as part	t of a current refund	ing issue?			Х	Х						\perp			
15	Were the bonds issued as part	t of an advance refu	nding issue?			Х		Х								
16	Has the final allocation of proc	ceeds been made?			Х			Х								
17	Does the organization maintai allocation of proceeds?	ın adequate books a	nd records to supp	ort the final	Х		Х									
Pai	rt IIII Private Business U	Jse							_							
					Yes	A No		B No	Yes	C	lo	Yes	D I			
1	Was the organization a partner	er in a partnership, o	ra member of an L'	LC, which owned	res	No	Yes		res	IN	•	res	+	No		
_		vas the organization a partie in a partie ship, or a member of an ELC, which own			1	X		X					- 1			

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

property financed by tax-exempt bonds?

financed property?

Χ

Part Private Business Use (Continued) В C D Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed Χ property? Are there any research agreements that may result in private business use of bond-Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 % 0% 0 00000% other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0 00000% 0 00000% 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0% 0 00000% % % Does the bond issue meet the private security or payment test? 7 Χ Х 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 Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of % % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С Α D Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Exception to rebate? Х b Χ No rebate due? c Х Χ If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ into a qualified hedge with respect to the bond issue? US BANK US BANK Name of provider Term of hedge 28 300000000000 28 300000000000 C Was the hedge superintegrated? d Χ Χ Was a hedge terminated? Χ Χ

SCHEDULE K PART IV,

ARBITRAGE, LINE 2C

DATE REBATE COMPUTATION

PERFORMED

Part IV Arbitrage (Continued)

		_ A	Α		В			D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х		X				
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X				
Pa	rt V Procedures To Undertake Corrective Action								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
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				
		·		•				-	
Pa	art VI Supplemental Information. Complete this part	<u>to provide additior</u>	nal informati	on for respor	nses to ques	tions on Sche	edule K (see	instructions)	
	Identifier Return Reference				Fyplan	ation			

COMPUTATION WAS PERFORMED 10/16/2008

ISSUER NAME MINNESOTA HIGHER EDUCATION FACILITIES AUTHORITY DATE THE REBATE

Schedule K (Form 990) 2012

OMB No 1545-0047

OMB No 1545-004

2012

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization WILLIAM MITCHELL COLLEGE OF LAW **Employer identification number**

41-0518750

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, THE OFFICERS, TRUSTEES AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A QUESTIONNAIR E RELATED TO CONFLICTS OF INTEREST THAT THEY MIGHT HAVE WITH THE COLLEGE. THIS DOCUMENT IS REVIEWED BY THE PRESIDENT AND DEAN'S OFFICE AND ANY POTENTIAL CONFLICTS OF INTEREST ARE R EFERRED TO THE COMPLIANCE COMMITTEE OF THE BOARD. WHERE APPROPRIATE UNDER THE COLLEGE'S PO LICY AN OFFICER, TRUSTEE OR KEY EMPLOYEE WITH A CONFLICT OF INTEREST MAY BE REQUIRED TO AB STAIN FROM DECISIONS THAT MIGHT BE INFLUENCED BY THAT CONFLICT OF INTEREST.
	FORM 990, PART VI, SECTION B, LINE 15	THE HUMAN RESOURCE OFFICE GATHERS COMPARABILITY DATA FROM OUTSIDE INDEPENDENT SOURCES AND PROVIDES THIS INFORMATION TO THE BOARD, WHICH ALLOWS THEM TO SET COMPENSATION IN LINE WITH THE MARKET DATA FOR THE PRESIDENT AND DEAN AND GUIDELINES FOR COMPENSATION FOR THE REST O F THE COLLEGE COMPENSATION FOR OTHER EMPLOYEES IS SET BY THE PRESIDENT AND DEAN IN CONSUL TATION WITH HUMAN RESOURCES USING COMPARABILITY DATA PROVIDED BY OUTSIDE CONSULTANTS AND PERFORMANCE REVIEWS
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE NOT NORMALLY AVAILABLE FROM THE COLLEGE. WWW. GUIDESTAR ORG, AN UNRELATED ORGANIZATION, PROVIDES A SUBS CRIPTION SERVICE THAT IT POPULATES WITH NONPROFIT DOCUMENTS THAT IT OBTAINS FROM THE INTER NAL REVENUE SERVICE. WILLIAM MITCHELL INFORMATION IS AVAILABLE THROUGH THIS SERVICE.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -14,677 CHANGE IN VALUE OF DERIVATIVE FINANC IAL INSTRUMENT 731,258 CHANGE IN VALUE OF FOREIGN CURRENCY - 5,955
COMMITTEE RESPONSIBLE FOR AUDIT OVERSIGHT	FORM 990, PART XII, LINE 2C	THERE HAS BEEN NO CHANGE IN AUDIT OVERSIGHT PROCESS IN THE PAST YEAR

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

DLN: 93493127007454

2012

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2012

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
WILLIAM MITCHELL COLLEGE OF LAW

41-0518750

Part I Identification of Disregarded Entities (Co	mplete if the organization a	nswered "Yes" to	Form 990, Part	t IV, line 33.)				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	D	(f) irect controlling entity		
Down II I down this continue of Boloned Town Supremb Over			annered lives like	- Faura 000 F) and Th	lung 24 hannung it		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations duri	ng the tax year.)				art IV,			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Exempt Code secti	(d) (e) E Code section Public charit (if section 50		(f) Direct controlling entity	Section (13) co	
							Yes	N ₄
(1) PUBLIC HEALTH LAW CENTER INC 875 SUMMIT AVENUE	CONDUCTS RESEARCH, LEGAL TECHNICAL ASSISTANCE AND EDUCATION ON PUBLIC HEALTH	MN	501(C)3	3 11A		WILLIAM MITCHELL COLLEGE OF LAW	Yes	
ST PAUL, MN 55105 41-1896367								
(2) STUDENT BAR ASSOCIATION OF WILLIAM MITCHELL COLLEGE OF LAW 875 SUMMIT AVENUE	PROMOTES UNDERSTANDING BETWEEN STUDENTS, FACULTY AND ENHANCES NETWORKING	MN	501(C)4			WILLIAM MITCHELL COLLEGE OF LAW	Yes	
ST PAUL, MN 55105 23-7163182								
(3) CONSORTIUM FOR INNOVATIVE LEGAL EDUCATION INC 875 SUMMIT AVENUE	PROVIDES EXPANDED EDUCATIONAL PROGRAMS ON A NATIONAL AND INTERNATIONAL BASIS	MN	501(C)3	11B		N/A		N
ST PAUL, MN 55105 41-1884496	INTERNATIONAL BASIS							

Cat No 50135Y

(a) Name, address, and E related organizatio	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomir income(rel unrelate excluded tax und sections 5 514)	lated, ed, from ler 512-	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or aging	(k Percer owner	ntage
					314)				Yes	No		Yes	No		
Identification of Related line 34 because it had one of									swere	d "Ye	s" to Form	990,	Part	ΙV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Leg: domi (state or count	al cile foreign	D	(d) rect controlling entity	(C co	(e) e of entity orp, S corp, r trust)	(f) Share of tota Income		(g) re of en of-year assets	d- Percen owner	tage		(i) Section ! (b)(13 controll entity	3) led
A CHARITARI E REMAINDER	CHADITABLE TOUCT					 -							Ţ		No
) CHARITABLE REMAINDER NUITY TRUST (1)	CHARITABLE TRUST	мі	N			<u> </u>									No
						1									

,						9
Part V Transactions With Related Organizations (Complete of the o	organization answered '	"Yes" to Form 990, Pa	rt IV, line 34, 35b, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
During the tax year, did the organization engage in any of the following transactions	with one or more related o	rganızatıons lısted ın Par	ts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled en	tity			1a	Yes	
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d	Yes	
e Loans or loan guarantees by related organization(s)				1e	Yes	
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1 g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related orga	anızatıon(s)			11	Yes	
m Performance of services or membership or fundraising solicitations by related orga	anızatıon(s)			1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organiza	tion(s)			1n	Yes	
o Sharing of paid employees with related organization(s)				10	Yes	
p Reimbursement paid to related organization(s) for expenses				1р	Yes	
q Reimbursement paid by related organization(s) for expenses				1q	Yes	
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
If the answer to any of the above is "Yes," see the instructions for information on v	who must complete this lin	e, including covered rela	 tionships and transaction thresholds			
(a)	(b)	(c)	(d)			
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount in	ivolve	d	

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PUBLIC HEALTH LAW CENTER INC	Q	459,304	FAIR MARKET VALUE
(2) PUBLIC HEALTH LAW CENTER INC	A	24,120	FAIR MARKET VALUE
(3) PUBLIC HEALTH LAW CENTER INC	E	1,322,050	FAIR MARKET VALUE
(4) STUDENT BAR ASSOCIATION OF WILLIAM MITCHELL COLLEGE OF LAW	D	104,712	FAIR MARKET VALUE
(5) CONSORTIUM FOR INNOVATIVE LEGAL EDUCATION	Q	29,853	CASH
(6) CONSORTIUM FOR INNOVATIVE LEGAL EDUCATION	P	80,442	CASH

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	c) (d) Predominant incile income ate or (related, reign unrelated,		(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations ⁷		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Software ID: Software Version:

EIN: 41-0518750

Name: WILLIAM MITCHELL COLLEGE OF LAW

Schedule R (Form 990) 2012

Identifier

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Part VII Supplemental Information

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

Return Reference

> Form 990, Schedule R, Part V - Transactions With Related Organizations									
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved						
PUBLIC HEALTH LAW CENTER INC	Q	· · ·	FAIR MARKET VALUE						
PUBLIC HEALTH LAW CENTER INC	А		FAIR MARKET VALUE						
PUBLIC HEALTH LAW CENTER INC	E		FAIR MARKET VALUE						
STUDENT BAR ASSOCIATION OF WILLIAM MITCHELL COLLEGE OF LAW	D	, ,	FAIR MARKET VALUE						
CONSORTIUM FOR INNOVATIVE LEGAL EDUCATION	Q	29,853	CASH						
CONSORTIUM FOR INNOVATIVE LEGAL EDUCATION	Р	80,442	CASH						

Explanation