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# Form **990**

Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to

	Revenue S		satisfy sta	ate reportir	ng require	ments	Inspection
A Fo	r the 2	012 calendar year, or tax year beginning 07-01-2012 , 2012, and en	ding 06-30	-2013			•
<b>B</b> Che	eck if ap	olicable C Name of organization CARLETON COLLEGE			D Emp	loyer ide	entification number
┌ Add	Iress cha	nge			41-0	69474	7
┌ Nai	ne chan	Doing Business As ie					
┌ Init	ıal returr	Number and street (or P O box if mail is not delivered to street address	s)  Room/suite	2	E Tolon	hone nun	nhor
┌ <sub>Ter</sub>	mınated	One North College Street			•		
┌ Am	ended re				(507	) 222-	4000
Г <sub>Арг</sub>	lication	Northfield, MN 55057 pending			<b>G</b> Gross	receints	\$ 220,201,726
		<b>F</b> Name and address of principal officer		<b>H(a)</b> Ist	<b>-</b> !	•	<u> </u>
		Frederick A Rogers			ins a grou iates?	preturi	r Yes <b>v</b> No
		One North College Street Northfield, MN 55057					
		,					uded?
<b>I</b> Ta	x-exemp	t status	527	11 1	vo, accae	11 4 1130	(see mstructions)
J W	ebsite:	▶ www carleton edu		H(c) Gro	oup exem	otion nu	mber ►
V For	n of oraș	nization   ✓ Corporation   ✓ Trust   ✓ Association   ✓ Other   ►		L Voor of	formation :	1966	State of legal domicile
K FOII	ii oi oiga	mization   Corporation   Trust   Association   Other		L feal of	ioimation .		IN
Pa	rt I	Summary					
		riefly describe the organization's mission or most significant activities			- 1- 1	<b>.</b>	
		arleton College is a small, private liberal arts college, located in Nor id warm, welcoming campus community Carleton offers 37 majors a					
8		ciences and social sciences					
Ĕ	_						
ē							
Governance	<b>2</b> C	heck this box 🚩 if the organization discontinued its operations or d	disposed of	more than	25% of it	s net a	ssets
	3 1	umber of voting members of the governing body (Part VI, line 1a) .				з	42
Activities &		umber of voting members of the governing body (Part VI, line Ia) .  umber of independent voting members of the governing body (Part VI				4	41
¥		otal number of individuals employed in calendar year 2012 (Part V , I				5	2,924
ď		otal number of volunteers (estimate if necessary)				6	5,100
	   7a⊺	otal unrelated business revenue from Part VIII, column (C), line 12				7a	1,961,670
		et unrelated business taxable income from Form 990-T, line 34 .				7b	0
				Pr	ior Year		Current Year
a.	8	Contributions and grants (Part VIII, line 1h)			19,527		24,900,207
H.	9	Program service revenue (Part VIII, line 2g)			103,869		108,687,657
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) .			18,709		42,847,854
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and	•		3,540	,600	4,092,635
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, colum 12)			145,646	,210	180,528,353
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			30,961	,482	32,333,766
	14	Benefits paid to or for members (Part IX, column (A), line 4) $\cdot$ .				0	0
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A	A), lines		68,461	903	69,789,417
% ₩	16a	5-10) Professional fundraising fees (Part IX, column (A), line 11e)			00,401	0	09,789,417
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) •4,420,565					
Ф	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			52,485	848	56,521,118
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A),			151,909		158,644,301
	19	Revenue less expenses Subtract line 18 from line 12	-		-6,263		21,884,052
ው ው				+	ng of Curr	<del></del>	End of Year
Not Assets or Fund Balances					Year		
Ass Ba	20	Total assets (Part X, line 16)		1	,002,749		1,055,244,227
<u> 5</u> 5	21	Total liabilities (Part X, line 26)			157,705		143,494,564
	22 t III	Net assets or fund balances Subtract line 21 from line 20 Signature Block	· · ·		845,044	,241	911,749,663
Unde my ki	r penal nowledg	cies of perjury, I declare that I have examined this return, including a le and belief, it is true, correct, and complete Declaration of prepare any knowledge					
		Signature of officer			2014-03-01		
Sign Here					Date		
Here	-	Frederick A Rogers Vice President and Treasurer Type or print name and title					
		Print/Type preparer's name Preparer's signature	Dat	to .	neck 🗀 ıf	PTIN	

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

Firm's name

Firm's address 🟲

**Paid** 

Preparer

Use Only

Check / ıf self-employed

Firm's EIN ►

Phone no

☐Yes ☐No

Par	3111		f Program Ser le 0 contains a re		lishments lestion in this Part II	I	
1	Briefl	y describe the org	ganızatıon's mıssı	on			
dıstır	iguishe		interplay of teach			ducation The College is devoted dedicated to a diverse residentia	
2	the pr	ıor Form 990 or 9	90-EZ?		rvices during the yea	ar which were not listed on	┌ Yes ┌ No
	If "Yes	s," describe these	e new services on	Schedule O			
3		e organization ce es?	ase conducting, o	<del>-</del>	t changes in how it c	onducts, any program	┌ Yes ┌ No
	If "Yes	s," describe these	e changes on Sche	edule O			
4	expen	ses Section 501		(4) organizations	are required to repo	hree largest program services, a rt the amount of grants and alloc	
4a	(Code	:	) (Expenses \$	88,948,122	ıncludıng grants of \$	32,333,766 ) (Revenue \$	89,507,622 )
	counti Avera Progra	nes and the world(1 ge class size is 18 74 ams - Carleton meets	.996 students) A Stud 1% of the graduating of 5 100% of the financia	ent-Faculty Ratio of class of 2013 particip il need of all admitte	9 1 supports them with c ated in a study abroad pr	romen and men, preparing them for lea lassroom, laboratory, off-campus study ogram during their Carleton experience rdability and accessibility, achieve cultur students)	and research opportunities Student Financial Aid
4b	(Code	<u> </u>	) (Expenses \$	17,939,188	ıncludıng grants of \$	0 ) (Revenue \$	19,180,035 )
						ucational experience of the student bod and laboratory (1769 students)	y with room and board
	(Code	<u> </u>	) (Expenses \$	14,540,117	ıncludıng grants of \$	0 ) (Revenue \$	14,540,117 )
	•	nt Services Programs		o support the Carleto	on College student life ex	perience including co-curricular and recre	
	(Code	•	) (Expenses \$	15,231,376	ıncludıng grants of \$	0) (Revenue \$	0)
	•		, , ,			mation technology resources (1996 Stu	,
4d		-	es (Describe in Sc				
	(Exp	enses \$	15,231,376 II	ncluding grants o	†\$	0)(Revenue\$	0 )
<b>4e</b>	Tota	l program service	expenses 🕨	136,658,803			

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "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		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Ċ	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   444		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	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	Yes	
b	If "Yes," enter the name of the foreign country AS, AU, EI, FR, HK, JA, NL, NZ, SF, SN, SP, SW, SZ, UK			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	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?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	1 20		
C	In res, to fine said su, did the diganization life rollif 0000-17	5c		
5a	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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		Yes	
	file Form 8282?	7c	res	
u	These, indicate the number of Forms 6262 med during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Yes	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Yes	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	Yes	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
3	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		
•	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	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			
L	Section 501(c)(12) organizations. Enter			
a	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 )			
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	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			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule 0	14h		

Se	ection 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	Yes	
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	
	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>even</u> u		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No_
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se		16b		
Se 17	organization's exempt status with respect to such arrangements?	16b		

- ✓ Own website ✓ Another's website ✓ Upon request ✓ Other (explain in Schedule O)

  19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Frederick A Rogers One North College Street Northfield, MN (507) 222-4000

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	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2005 11100,	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	ivallie allu Title	(A) ame and Title  A verage hours per week (list any hours for related  (C)  Position (do not check more than one box, unless person is both an officer and a director/trustee)								table sation the ion (W-	(E) Reportable compensation from related organizations (W	(F) Estimated amount of other compensation from the organization and				
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	MISC)	2/1099-MISC)		related organizations			
1b	Sub-Total			•				<b>*</b>								
c d	Total from continuation sheet  Total (add lines 1b and 1c) .	•		١.	•	•	•	•		2,576,926		0		533,709		
2	Total number of individuals (in \$100,000 of reportable compe		limited				d abov	e) w	ho receive			<u> </u>		333,133		
													Yes	No		
3	Did the organization list any <b>fc</b> on line 1a? <i>If</i> "Yes," complete S						emplo	yee,	, or highest	compen	sated employee	3	Yes			
4	For any individual listed on line organization and related organ												105			
	ındıvıdual		•		•	•		•				4	Yes			
5	Did any person listed on line 1 services rendered to the organ									anızatıon • • •	or individual for	5		No		
Se	ction B. Independent Co	ntractors														
1	Complete this table for your fiv	e highest comp														
	compensation from the organiz	(A)	<u> </u>	ation	for	tne c	aienda	arye	ear ending v		(B)	ion's i	(C	)		
PCI C	Nonstruction Services 12200 Nicollet Ave	ame and business a								Engineering	cription of services and project	+	Comper 7	,839,941		
	ppetit 100 Hamilton Avenue Suite 400									manageme Food Servic		+		,729,529		
	ugh Construction Co Inc 2737 Faiview		ul MN 55:	11313	72						n contractor			,298,174		
	City Builders PO Box 7 Nerstrand MN 5									Constructio	n contractor			852,833		
	General Contractors LLC 21025 Comm Fotal number of Independent coi									General cor		$\perp$		593,586		

\$100,000 of compensation from the organization >34

Part V		Statement of Re Check if Schedule O		nse to any question	in this Part VIII .	(B)	(C)	
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512,513,or 514
o L	1a	Federated campaign	s 1a	0				
tributions, Gifts, Grants Other Similar Amounts	ь	Membership dues .	1b	0				
٦	С	Fundraising events	1c	0				
Contributions, Gifts, and Other Similar A	d	Related organization	ns 1d	0				
9.∺	e	Government grants (conf	tributions) <b>1e</b>	4,023,654				
Sis	f	All other contributions, gi	fts, grants, and <b>1f</b>	20,876,553		ł		
outi the		sımılar amounts not ınclu	ided above			ļ		
	g	Noncash contributions inc 1a-1f \$	ciuded in lines	7,359,862				
Cont	h	Total. Add lines 1a-	1f	· · · •	24,900,207			
<u> </u>				Business Code				
wenu	2a	Comprehensive Fee		611310	108,687,657	108,687,657	0	ı
æ	Ь							
M C A	C							
38	d							
Program Serwce Revenue	e f	All other program se	arvice rovenii			ء		-
ĭog.	'				0	0	U	(
	g	Total. Add lines 2a-			108,687,657			
	3	Investment income and other similar am			1,166,602	0	0	1,166,60
	4	Income from investment	of tax-exempt bond	proceeds 🕨	745	0	0	74:
	5	Royalties		🟲	141,654	0	0	141,654
	6a	Gross rents	(ı) Real 261,135	(II) Personal				
	b	Less rental	665,179	0				
	l c	expenses Rental income	-404,044	0				
	d	or (loss)  Net rental income or			-404,044	0	8,497	-412,541
	"		) Securities	(II) O ther	,	<u> </u>	9,131	
	7a	Gross amount from sales of assets other	79,757,161	17,845				
	ь	Less cost or other basis and sales expenses	38,039,937	54,562				
	С	Gain or (loss)	41,717,224	-36,717	44 500 507		1 751 106	20 000 07
ıne	d 8a	Net gain or (loss) .  Gross income from f events (not including)	undraising		41,680,507	0	1,751,136	39,929,37
Other Revenue		of contributions repo See Part IV, line 18						
ŧ.	ь	Less direct expense						
0	C O-	Net income or (loss)		events 🛌				
	9a	Gross income from g See Part IV, line 19						
	ь	Less direct expense	es <b>b</b>					
	C	Net income or (loss)		vities <b></b>				
	10a	Gross sales of inven		1,451,601				
	ь	Less cost of goods	sold <b>b</b>	913,695				
	С	Net income or (loss)			537,906	537,906	0	
		Miscellaneous Rev		Business Code 611310	1 100 777	1 100 777	0	
	11a	Summer A cademic F	rograms	221000	1,180,777 202,037	1,180,777	202,037	
	b c	Other Auxiliary Ente	arnric oc	900003	150,663	150,663	0	(
	d	Other Auxiliary Ente		300003	2,283,642	2,283,642	0	(
	e	Total. Add lines 11a		🕨				
	12	<b>Total revenue.</b> See I	instructions .		3,817,119			
	l			-	180,528,353	112,840,645	1,961,670	40,825,831

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 32,333,766 32,333,766 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 0 Benefits paid to or for members 0 0 Compensation of current officers, directors, trustees, and 1,587,086 354,595 927,004 305,487 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 Other salaries and wages 51,092,363 43,632,184 4,995,541 2,464,638 Pension plan accruals and contributions (include section 401(k) 4,635,054 3,874,203 495,548 265,303 and 403(b) employer contributions) . . . . 8,923,792 7,454,631 973,637 Other employee benefits . . . . 495,524 10 3,551,122 2,999,757 367,021 184,344 11 Fees for services (non-employees) Management . . . . 2,757,918 2,027,182 635,687 95,049 46,357 46,357 Legal . . . . . . . 0 0 102,881 0 102,881 0 0 0 0 0 0 Professional fundraising services See Part IV, line 17 Investment management fees . . . . . 4,126,146 0 4,126,146 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 0 0 Schedule O) . . . . . . . 0 Advertising and promotion . . 76,265 12 4,639 71,594 32 13 Office expenses . . . 4,716,178 3,510,822 956,456 248,900 1,579,544 1,279,255 300,289 14 Information technology . . 0 15 0 0 0 Royalties . . 5,178,483 4,984,129 189,239 5,115 16 Occupancy . . . . . . **17** 7,016,120 6,644,392 199,664 172,064 Travel . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 0 0 0 597,615 19 Conferences, conventions, and meetings . 517,499 60,023 20,093 20 3,072,378 2,991,120 81,258 0 Payments to affiliates . . . . . . 0 21 O 0 O 10,432,798 10,308,372 22 Depreciation, depletion, and amortization . 124,426 23 773,211 433,442 339,769 0 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Membership Fees 361,673 0 361,673 0 Faculty and Staff Recruitment 388,726 388,726 0 0 Food Service 6,692,444 6,692,444 0 d Off Campus Studies 5,182,831 0 5,182,831 0 e All other expenses 3,419,550 1,433,540 1,821,994 164,016 Total functional expenses. Add lines 1 through 24e 25 158,644,301 136,658,803 17,564,933 4,420,565 Joint costs. Complete this line only if the organization 26 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

I G	rt X	Check If Schedule O contains a response to any question in	n this Part X			
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		75,887,861	2	42,670,896
	3	Pledges and grants receivable, net		20,776,191	3	14,660,764
	4	Accounts receivable, net		1,514,335	4	1,935,307
	5	Loans and other receivables from current and former officer key employees, and highest compensated employees Com Schedule L	plete Part II of		5	
ts	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501(c)(beneficiary organizations (see instructions) Complete Part	(3)(B), and contributing (9) voluntary employees'		6	
Assets	7	Notes and loans receivable, net		8,054,826	-	7,649,564
ď	8	Inventories for sale or use		819,471	8	878,273
	9	Prepaid expenses and deferred charges		2,130,633	<del>-</del> -	2,007,258
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 338,025,945			<u> </u>
	ь	Less accumulated depreciation	<b>10b</b> 144,418,855	186,430,462	10c	193,607,090
	11	Investments—publicly traded securities	248,458,967	11	292,884,061	
	12	Investments—other securities See Part IV, line 11	448,711,588	12	488,172,722	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		9,965,593	15	10,778,292
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		1,002,749,927	16	1,055,244,227
	17	Accounts payable and accrued expenses		12,051,671	17	10,613,030
	18	Grants payable		5,378,790	18	5,337,411
	19	Deferred revenue		4,336,928	19	4,782,756
	20	Tax-exempt bond liabilities		108,424,821	20	94,507,979
ر م	21	Escrow or custodial account liability Complete Part IV of S	Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, dir key employees, highest compensated employees, and disq				
æ		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third pa	rties		23	
	24	Unsecured notes and loans payable to unrelated third parti	es		24	
	25	Other liabilities (including federal income tax, payables to i and other liabilities not included on lines 17-24) Complete	Part X of Schedule	07.540.400		20.050.000
		D		27,513,190	-	28,253,388
<u> </u>	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here		157,705,400	26	143,494,564
Fund Balances		lines 27 through 29, and lines 33 and 34.		240,000,000		270 402 204
<u> </u>	27	Unrestricted net assets		340,966,332		378,463,201
ă	28	Temporarily restricted net assets		323,085,978		344,875,064
Ĭ	29	Permanently restricted net assets		180,992,217	29	188,411,398
or Fui		Organizations that do not follow SFAS 117 (ASC 958), checomplete lines 30 through 34.	ck here ►   and			
ĝ	30	Capital stock or trust principal, or current funds			30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fur	nd		31	
ď	32	Retained earnings, endowment, accumulated income, or oth			32	
Net	33	Total net assets or fund balances		845,044,527	33	911,749,663
_	34	Total liabilities and net assets/fund balances		1,002,749,927	34	1,055,244,227

Par	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 rate XI	<del></del>			• • • •
1	Total revenue (must equal Part VIII, column (A), line 12)	1		180,5	528,353
2	Total expenses (must equal Part IX, column (A), line 25)	2			544,301
3	Revenue less expenses Subtract line 2 from line 1	3			384,052
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			)44,527
5	Net unrealized gains (losses) on investments	5	39,56		
6	Donated services and use of facilities	6			C
7	Investment expenses	7		4,1	.26,146
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,128,99		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		911,7	49,663
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ gamma$
				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	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				1
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigle audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			1:
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	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:** 12000197 **Software Version:** v1.00

**EIN:** 41-0694747

Name: CARLETON COLLEGE

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 Indepen	Officers, Dir ndent Contra	rectors actors	s,Tru	uste	ees,	Кеу	En	nployees, Highe	st	_
(A) Name and Title	(B) Average hours per week (list	Positio more unless an d	than	onot one son i er an trust	box, s bot d a tee)	, :h		( <b>D</b> )  Reportable  compensation  from the  organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustse or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
Nına M Archabal Trustee	5	x						0	0	0
Carol A Barnett Trustee	5	х						0	0	0
Danielle S Bart Trustee	5	х						0	0	0
Alan R Bauer Trustee	5	х						0	0	0
Beth Boosalis Davis Trustee	5	х						0	0	0
Nancy Pellowe Dennis Trustee	5	х				_		0	0	0
David M Diamond Trustee	5	х						0	0	0
Arnold W Donald Trustee	5	х						0	0	0
Jack W Eugster Trustee	5	х						0	0	0
Wıllıam A Feldt Trustee	5	х						0	0	0
William R Gage Trustee	5	х						0	0	0
Maureen G Gupta Trustee	5	х						0	0	0
John F Harris Trustee	5 0	х						0	0	0
Elise M Holschuh Trustee	5	х						0	0	0
James E Johnson Trustee	5	х						0	0	0
Martha H Kaemmer Trustee	5	х						0	0	0
Leslie B Kautz Trustee	5 0	х						0	0	0
Arthur D Kowaloff Trustee	5	х						0	0	0
Richard B Kracum Trustee	5 0	х						0	0	0
Manlyn M McCoy Trustee	5 0	х						0	0	0
William R McLaughlin Trustee	5 0	х						0	0	0
Bonnie J Melville Trustee	5	х						0	0	0
Robert W Nelson Trustee	5 0	х						0	0	0
Marc Noel Trustee	5	х						0	0	0
Gary T O'Brien Trustee	5	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Wan officer and a organizations (Wfrom the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee ndividual trustaa or diliector Institutional Trustee hours organizations for employee related organızatıons below dotted line) 5 Catherine J Pagila Χ 0 0 0 Trustee 0 5 Lawrence Perlman 0 0 Х 0 Trustee 5 Pamela Kiecker Royall 0 0 0 Х 0 5 Jack W Schuler Х 0 0 0 Trustee 0 5 Margaret C Sımms 0 0 0 Х Trustee 0 5 David B Smith 0 0 0 Х Trustee 0 5 Gary L Sundem 0 0 0 Х Trustee 0 5 Caesar F Sweitzer 0 0 0 Х Trustee 0 5 Alan C Thiel Χ 0 0 Trustee 0 5 R Kırk Weidner 0 0 0 Х Trustee 0 5 Wallace R Weitz Χ 0 0 0 Trustee 0 5 Justin B Wender 0 Х 0 Trustee 0 5 00 Bonnie M Wheaton 0 0 0 Х Trustee 0 5 Michael L Wiebolt 0 Х 0 0 Trustee 0 5 Mark R Williams Х 0 0 0 Trustee 0 5 Sidney C Wolff 0 0 0 Х Trustee 60 Steven G Poskanzer Х 397,959 0 164,043 Х President 0 50 00 Frederick A Rogers Χ 283,565 0 40,668 Vice President and Treasurer 0 50 00 Donald A Hasseltine Х 297,711 0 69,120 Secretary/VP for External Relations 50 00 Beverly Nagel 0 Χ 236,298 30,664 Dean of the College 0 40 00 M H Wagner Х 181,956 0 25,156 VP Student Development and Dean of Students 0 40 00 Paul Thiboutot Х 168,212 0 36,259 VP and Dean of Admission/Financial Aid O 40 00 Χ 318,990 0 25,834 Director of Investments 40 00 Andrew Christensen 198,399 45,902 Х 0 Director of Private Markets 0 40 00 Joel Cooper 168,174 0 24,946 Director of Information Technology 0

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

40 00

Samuel Patterson

Professor of Psychology/Interim ITS Director

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	P or each or clied the state	than pers office ctor/	not one son i er an trust	box, s bot d a tee)	, th	Former	( <b>D</b> ) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Joel Weisberg Professor of Physics and Astronomy	40 00 0					×		166,548	0	36,830

159,114

34,287

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135046414

**Employer identification number** 

OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

CARLETON COLLEGE

# **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.

Open to Public Inspection

									41-0694		
Pai				iblic Charity Sta						instructions	5.
	_			te foundation becaus							
1			•	ion of churches, or a				ection 170	(b)(1)(A)(i).	ı	
2	고			d in <b>section 170(b)(1</b>							
3				perative hospital se							
4				h organization opera <sup>:</sup> ity, and state	ted ın conjun	ction with a	hospital des	cribed in <b>s</b>	ection 170(b)	(1)(A)(iii).	Enter the
5	Γ	Anorg	anızatıon op	erated for the benefi	t of a college	or univers	ity owned or o	perated by	a governme	ntal unit des	cribed in
		sect ior	170(b)(1)	( <b>A)(iv).</b> (Complete P	art II )						
6	$\Gamma$	A federal, state, or local government or governmental unit described in section $170(b)(1)(A)(v)$ .									
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public									
8	г			on 170(b)(1)(A)(vi).			mnlete Part I	τ.)			
9	Ë	A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross									
_	,	_		rities related to its e			7.7		•	•	-
				oss investment inco							
				ganızatıon after June							
10	Г									_	
10   11		An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4).</b> An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of									
	•			ly supported organiz							
				ibes the type of supp							
	_			<b>b</b> Type II <b>c</b>							
е	ı			ox, I certify that the							
			nan loundat 1 509(a)(2)	ion managers and ot	ner than one	or more pu	blicly support	led organiz	ations descri	bed in section	11 203(4)(1) 01
f				received a written de	etermination	from the IF	RS that it is a	Type I, Ty	pe II, or Typ	e III support	ing organization,
			this box								Г
g			August 17, 1 ng persons?	2006, has the organ	ızatıon accep	oted any gif	t or contribut	ion from an	y of the		
				rectly or indirectly o	ontrols, eith	er alone or	together with	persons d	escribed in (i	1)	Yes No
				governing body of th	•		_		(		g(i)
				er of a person descr		_					J(ii)
			•	lled entity of a perso	• •		above?				(iii)
h				ng information about							`
(i	) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	u notify	(vi) Is	the	(vii) A mount of
	uppoi			organization	organizati		the organi		organiza		monetary
or	ganiz	ation		(described on lines 1- 9 above	col (i) lıs your gove		ın col (i) o suppo		col (i) or in the l		support
				or IRC section	docume	_	Suppo	11.	III the t	<i>.</i>	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
							1	1	1		
								1			
Total									+		+

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	<b>Total.</b> Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV )							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-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							<b>▶</b> ┌

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

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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

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

Schedule A (Form 990 or 990-EZ) 2012

## **TY 2012 Request for Copy Attachment**

Name: CARLETON COLLEGE

**EIN:** 41-0694747

**Software ID:** 12000197

**Software Version:** v1.00

Copy Receiver Government Code: CAST, HIST

Name of person making the Frederick A Rogers

consent:

**Title of person making the** Vice President and Treasurer

consent: PIN:

**Date:** 2014-05-15

DLN: 93493135046414

# OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

Inspection

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

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** CARLETON COLLEGE 41-0694747 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

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

**f** Grassroots lobbying expenditures

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

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).	raye .		
	Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT	
		filed Form 5768 (election under section 501(h)).	

	- No. 1 No. 1 No. 2 No.	(6	a)	(b)
-or e activ	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?	Yes		(
е	Publications, or published or broadcast statements?	Yes		(
f	Grants to other organizations for lobbying purposes?	Yes		80,64
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		(
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		350
i	O ther activities?		Νo	
j	Total Add lines 1c through 1i			80,99!
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	Yes	

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

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

#### Part IV Supplemental Information

	e 1 , Part l-B, line 4 , Part l-C , line 5 , Part II-A (affiliated group list), additional information
Return Reference	Explanation
Schedule C, Part II-B, Line 1	College Relations occasionally contact legislators to express the College's views on pending legislation which would affect the College Costs incurred in connection with these activities are insignificant and no separate account is made for these costs. In addition, students participate in a volunteer activity sponsored by the Minnesota Private Council (MPCC) called "Day at the Capital" to discuss the importance of the State Grant Program with representatives. Costs incurred by the College to support this program are De minimus. Carleton College is a member of Minnesota Private College Council (MPCC), an organization described in section 501(c)(4) of the Internal Revenue Code. MPCC is an association of private nonprofit institutions of higher education that serves a variety of its members' shared needs, included, but not only, nonpartisan and non-electoral advocacy for public policy that meets students' needs and advances the interest of private higher education. Carleton College paid member dues to MPCC in the amount of \$153,113 during the taxable year MPCC has divided its expenses for its taxable year ending June 30, 2013 into two groups. Group 1 consists of those expenses that did not in any way support attempts to influence legislation within the meaning of section 501(c)(3) of the Internal Revenue Code ('lobbying"), and Group 2 consists of all other expenses. Group 2 includes many expenses such as personnel costs, that support both lobbying and nonlobbying activities. MPCC did not attempt to allocate the Group 2 expenses between lobbying and nonlobbying activities. MPCC did not attempt to allocate the Group 2 expenses represents 52 67% of the amount of dues that MPCC collected in the same taxable year. Assuming that all Group 2 expenses were paid from member dues, and allocating those expenses pro rata based on the dues paid by each member, \$80,645 of Carleton College's dues were used to pay Group 2 expenses. The amount of lobbying expenses paid from Carleton College's dues was significantly less than that
	Return Reference

DLN: 93493135046414

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

Open to Public Inspection

nterna	al Revenue Service	► Attach to For	m 990. ► See separate instructions.			Inspect	ion
	me of the organi	ization		Empl	oyer ident if ica	tion numbe	er
CAI	RLETON COLLEGE			41-0	0694747		
Pa			rised Funds or Other Similar Fu			. Complet	e if the
	organiz	zation answered "Yes" to Form 990		1 .	(L) Fdd.		
1	Total number a	t and of year	(a) Donor advised funds	<del>  '</del>	(b) Funds and o	other accou	ints
2		tributions to (during year)		+			
3		nts from (during year)					
4		e at end of year		1			
5	Did the organiz	·	L ors in writing that the assets held in dono ganization's exclusive legal control?	or advi:	sed	┌ Yes	┌ No
6	used only for c conferring impe	haritable purposes and not for the benef ermissible private benefit?	onor advisors in writing that grant funds it of the donor or donor advisor, or for an	y othe	r purpose	┌ Yes	┌ No
			the organization answered "Yes" to	Form	1 990, Part IV	<u>, line 7.</u>	
1 2	Preservation Protection Preservation Complete lines	of natural habitat on of open space s 2a through 2d if the organization held a	anization (check all that apply) or education)	ertified	d historic struc	ture	
	easement on ti	he last day of the tax year	Г		Held at the		V
а	Total number o	of conservation easements	-	2a	neid at the	ena or the	rear
b		restricted by conservation easements	<u> </u>	2b			
c	_	servation easements on a certified histo	oric structure included in (a)	2c			
d	Number of con	servation easements included in (c) acq ure listed in the National Register	` `	2d			
3	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminate	d by th	e organization	during	
	the tax year 🛌						
4	Number of stat	es where property subject to conservat	on easement is located ►	_			
5		nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	lling of	violations, and	┌ Yes	┌ No
5	Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents d	uring the year		
7	A mount of exp	enses incurred in monitoring, inspecting	, and enforcing conservation easements	during	the year		
В			d) above satisfy the requirements of sect	tion 17	0(h)(4)(B)(ı)	┌ Yes	┌ No
9	balance sheet,		nservation easements in its revenue and e footnote to the organization's financial nts				
aı		izations Maintaining Collection ete if the organization answered "Y	s of Art, Historical Treasures, ones of Example 1981.  es" to Form 990, Part IV, line 8.	or Oth	ner Similar <i>i</i>	Assets.	
1a	works of art, hi	storical treasures, or other similar asse	16 (ASC 958), not to report in its reven ts held for public exhibition, education, o o its financial statements that describes	or resea	arch in furthera		
b	works of art, hi		16 (ASC 958), to report in its revenue s ts held for public exhibition, education, c e items				ıc
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1			<b>-</b> \$	1	07,725
	(ii) Assets inc	luded in Form 990, Part X				10	
2	If the organiza	·	ical treasures, or other similar assets fo 116 (ASC 958) relating to these items	r financ			
а	Revenues incli	uded in Form 990, Part VIII, line 1			<b>►</b> \$		0
	on aco mer	> > 0 , 1 dic v 111 , 11110 1			· +		

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

Par	Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	cal Tr	eası	ires, or C	the	<u>r Similar</u>	Asse	<b>ts</b> (cc	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	eck	any of th	he foll	lowing that	are a	significant	use of	ıts	
а	Public exhibition		d	Γ	Loan o	rexc	hange prog	rams				
b	✓ Scholarly research		e	Γ	Other							
c	▼ Preservation for future generations											
4	Provide a description of the organization's copart XIII	ollections and explain	n how	the	y furthe	rthe	organızatıor	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit								ıılar	_		_
Do.	assets to be sold to raise funds rather than								!! to For		Yes	✓ No
Pal	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						n answere	a "Y	es" to For	n 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the f	follow	ng t	:able		_					
										Amou	ınt	
C	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the e	expla	natio	on has b	een p	rovided in F	art >	KIII			Γ
Pa	rt V Endowment Funds. Complete											
		(a)Current year 651,655,398		rior y	ear <b>t</b> 402,763	<b>b (c)</b> T\	wo years back 582,570,193		Three years ba 540,722,		<u> </u>	ears back 70,511,423
1a	Beginning of year balance			-				_		_	67	
b	Contributions	11,900,109		۷,	774,503		9,469,250	_	17,555,8	376		9,766,908
С	Net investment earnings, gains, and losses	78,960,412		17,	724,826		109,737,985	<u> </u>	58,848,	146	-10	2,669,593
d	Grants or scholarships	7,611,873		7,	387,060		7,355,446		7,240,0	589		7,585,577
e	Other expenditures for facilities and programs	25,229,420		24,	422,145		24,886,524		24,872,4	170	2	26,245,329
f	Administrative expenses	4,959,966			437,489		3,132,695		2,442,9			3,055,532
g	End of year balance	704,714,660		651,	655,398		666,402,763	8	582,570,	L93	54	10,722,300
2	Provide the estimated percentage of the cur	rent year end balance	e (line	e 1 g	, columr	n (a))	held as					
а	Board designated or quasi-endowment 🕨	33 %										
b	Permanent endowment ► 25 %											
c	Temporarily restricted endowment ► 4	2 %										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
За	Are there endowment funds not in the posse	ssion of the organiza	tıon t	hat	are held	and a	admınıstere	d for	the			
	organization by  (i) unrelated organizations								Г	3a(i)	Yes	No
	(ii) related organizations			•	• •	•		•	}	3a(ii)	163	No
ь	If "Yes" to 3a(II), are the related organization					٠		٠.	` . ` .	3b		<del>                                     </del>
4	Describe in Part XIII the intended uses of the	ne organization's end	lowme	ent f	unds				_			<u> </u>
Pai	t VI Land, Buildings, and Equipme	e <b>nt.</b> See Form 990	), Pa									
	Description of property				Cost or o s (investm		( <b>b)</b> Cost or o		(c) Accumula depreciation		( <b>d</b> ) Bo	ok value
1a	Land					0	4,165	,199				4,165,199
b	Buildings					0	247,852	,624	76,964	,052	17	0,888,572
C	Leasehold improvements					0		0		0		0
d	Equipment					0	84,456	,070	67,454	,803	1	7,001,267
	Other					0	1,552	,052		0		1,552,052
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X,	, colui	mn (	B), line	10(c).	)		•		19	3,607,090
									Schedu	le D (F	orm 9	90) 2012

(a) Description of security or category		
	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
)Financial derivatives	0	
C)Closely-held equity interests C)Other	0	
) Private Equity	125,618,878	F
3) Hedge Funds	234,565,785	F
C) Real Assets	71,202,566	F
C) Real Assets	71,202,300	'
D) Planned Gıft Agreements and Other	56,785,493	F
	+	
	488,172,722	
art VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>F</b>	
	<u> </u>	
Part IX Other Assets. See Form 990, Part X, I	ine 15.	
Part IX Other Assets. See Form 990, Part X, I  (a) Descr		(b) Book value
		(b) Book value
(a) Descr	ription	
(a) Descr	5.)	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part (a) Description of liability	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part (a) Description of liability  ederal income taxes	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability ederal income taxes nnuities Payable	5.)	
ctal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
ctal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
otal. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes  nnuities Payable  sset Retirement Obligation	5.)	
(a) Description of liability  Total. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  Tederal income taxes  Tonnuities Payable  Tesset Retirement Obligation	5.)	
(a) Description of liability  ederal income taxes  nnuities Payable  esset Retirement O bligation	5.)	
(a) Description of liability  Total. (Column (b) must equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  Tederal income taxes  Tonnuities Payable  Tesset Retirement Obligation	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part	5.)	

Part	XI Reconciliation of Revenue per Audited Financial State	emen	ts With Revenue p	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements .			1	188,889,52
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	39,565,947		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII).............	2d	-32,783,649		
e	Add lines <b>2a</b> through <b>2d</b>			2e	6,782,298
3	Subtract line <b>2e</b> from line <b>1</b>		[	3	182,107,227
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	0		
b	Other (Describe in Part XIII)............	4b	-1,578,874		
c	Add lines <b>4a</b> and <b>4b</b>			4c	-1,578,874
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	2).		5	180,528,353
Part	XII Reconciliation of Expenses per Audited Financial Stat	eme	nts With Expenses	per	Return
1	Total expenses and losses per audited financial statements			1	122,184,389
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII )	2d	0		
e	Add lines <b>2a</b> through <b>2d</b>			2e	(
3	Subtract line <b>2e</b> from line <b>1</b>			3	122,184,389
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	4,126,146		
b	Other (Describe in Part XIII).............	4b	32,333,766		
c	Add lines <b>4a</b> and <b>4b</b>			4c	36,459,917

#### Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	Carleton's Art Collection is for student research and study including College archives of institutionally significant treasures and Library collections
SchD_P05_S00_L04	Schedule D, Part V, Line 4	Endowment funds are to support grants to students and the program services at the College
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The College qualifies as a tax-exempt nonprofit organization under Section 501(c)(3) of the Internal Revenue Code and similar statutes of Minnesota law. The College is subject to federal income tax only on net unrelated business income under the provisions of Section 501(c)(3) of the Internal Revenue Code. The College has evaluated its tax positions and determined it has no uncertain tax positions and has recorded no obligation for unrelated business income tax. No provisions for federal or state income taxes are required as of June 30, 2013. The College's 2009 through 2012 tax years are open for examination by federal and state taxing authorities.
SchD_P11_S00_L02d	Schedule D, Part XI, Line 2d	Net change in Annuity & Life Income Funds -\$1,322,649, Unrealized gain on Interest Rate Swap \$872,766, Scholarships -\$32,333,766
SchD_P11_S00_L04b	Schedule D, Part XI, Line 4b	Rental Expenses \$665,179, Bookstore Cost of Goods Sold \$913,695
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Scholarships

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DLN: 93493135046414

## OMB No 1545-0047

## OMB No 1545-004

2012

Open to Public

**Employer identification number** 

# SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service ►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

► Attach to Form 990 or Form 990-EZ.

Name of the organization
CARLETON COLLEGE

41-0694747 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Yes

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

ldentifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	The College uses paper and broadcast media in solicitation of students. We publicize our nondiscriminatory policy in all printed brochures, magazines and application material and website information.
SchE_P01_S00_L06	Schedule E, Part I, Line 6	Carleton College participates in the Federal Student Financial Aid Program administered through the US Department of Education Carleton students receive funding from campus-based programs (Perkins, SEOG, and Federal Work Study) as well as Federal Pell Grants and Federal Student Loans. In addition, Carleton students receive funding via the Minnesota State Grant, Work-Study and SELF loan programs administered through the Minnesota Office of Higher Education.

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493135046414

OMB No 1545-0047

2012

Open to Public Inspection

### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

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

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990. ▶ See separate instructions.

	e of the organization _ETON COLLEGE				Employer ident	ification number
ZAKI	LETON COLLEGE				41-0694747	
Pa	rt I General Information "Yes" to Form 990, Pai			ne United States. Co	omplete if the organiz	ation answered
1	<b>For grantmakers.</b> Does the dassistance, the grantees' eligible the grants or assistance?	jibility for the g	grants or assis	tance, and the selection	on criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's pı	rocedures for monitori	ng the use of grant fu	nds outside
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ice is needed )	
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	See Add'l Data			,		
3a	Sub-total					
_	Total from continuation sheets to Part I					
C	Totals (add lines 3a and 3b)	l ol	l n			235 964 79

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

Schedule F (Form 990) 2012

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

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

#### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> </u>	Yes	Г	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)	Г	Yes	ন	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	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	<b>⊳</b>	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	<u> </u>	Yes	Г	Νo

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part v	Supplementa	ai intormatio

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).

Identifier	ReturnReference	Explanation

#### **Additional Data**

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 41-0694747

Name: CARLETON COLLEGE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Investments		232,592,464
East Asia and the Pacific	0	0	Program Services	Chinese Studies-Tianjin	403,584
East Asia and the Pacific	0	0	Program Services	Coastal Marine Ecology- Australia	389,027

<u>Form 990 Schedule F F</u>	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	0	Program Services	Studio Art-South Pacific	369,485
Europe (including Iceland and Greenland)	0	0	Program Services	New Media Seminar- Europe	332,036
Europe (including Iceland and Greenland)	0	0	Program Services	Medieval-Renaissance Rome	355,177

Form 990 Schedule F I	<u>Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America	0	0	Program Services	Society, Culture, Language-Peru	317,507
Europe (including Iceland and Greenland)	0	0	Program Services	Economics in Cambridge	271,728
Europe (including Iceland and Greenland)	0	0	Program Services	Cross-Cultural Psychology in Prague	252,685

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (including Iceland and Greenland)	0	0	Program Services	French Studies in Paris	210,617
Europe (including Iceland and Greenland)	0	0	Program Services	Spanish Studies in Madrid	203,316
Sub-Saharan Africa	0	0	Program Services	Conservation and Development-Tanzania & Ethiopia	182,694

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	Program Services	Winter Break - Dubai	29,010
Central America and the Caribbean	0	0	Program Services	Winter Break - Belize	25,396
South Asia	0	0	Program Services	Winter Break - Bangledesh	18,211

<u> Form 990 Schedule F F</u>	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	he United States	_		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region	
Europe (including Iceland and Greenland)	0	0	Program Services	Winter Break - Vienna	11,860	

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Schedule I

(Form 990)

DLN: 93493135046414

2012

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service	C	ompiece ir the organizati	Attach to Form 9		e 21 01 22.		Open to Public Inspection
Name of the organization						Employer identif	ication number
CARLETON COLLEGE						41-0694747	
<u>'</u>		s and Assistance					
Does the organization mathe selection criteria use							ר Yes ⊏
2 Describe in Part IV the o							
		o Governments and					d "Yes" to
Form 990, Part 1	IV, line 21, for any	recipient that receive	d more than \$5,000	). Part II can be du <sub>l</sub>	plicated if additional s	space is needed.	
(a) Name and address of	<b>(b)</b> EIN	(c) IRC Code section	(d) A mount of cash	(e) A mount of non-	<b>(f)</b> Method of	(g) Description of	(h) Purpose of grant
organization or government		ıf applıcable	grant	cash assistance	valuation (book, FMV , appraisal, other)	non-cash assistance	or assistance
(1) City of Northfield 801 Washington Street Northfield, MN 55057	41-6005424		75,000	C	) Cash	0	Annual contribution
2 Enter total number of sec	tion 501(c)(3) and g	overnment organizations	listed in the line 1 table	e		•	1
3 Enter total number of oth	er organizations liste	d in the line 1 table					

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> 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
(1) Student Scholarships	1272	32,333,766	C	) Financial Need	
Part IV Supplemental Inform	ation				

Part IV Supplemental Information.

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

Identifier	Return Reference	Explanation
SchI_P01_S00_L02	· · ·	Grants, scholarships, loans and work-study funds are awarded to students based on demonstrated financial need using nationally recognized needs analysis standards

Schedule I (Form 990) 2012

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DLN: 93493135046414

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

**Compensation Information** 

Open to Public Inspection

Name of the organization CARLETON COLLEGE

**Employer identification number** 

41-0694747

	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		Yes	No		
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items  First-class or charter travel  Travel for companions  Payments for business use of personal residence  Tax idemnification and gross-up payments  Health or social club dues or initiation fees					
	Travel for companions    Payments for business use of personal residence   Tax idemnification and gross-up payments   Health or social club dues or initiation fees					
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees					
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)					
	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	Yes			
	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes			
	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					
	Form 990 of other organizations  Approval by the board or compensation committee					
	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	Yes			
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No		
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No		
	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.					
	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		Νo		
b	Any related organization?	5b		No		
	If "Yes," to line 5a or 5b, describe in Part III					
	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		Νo		
b	Any related organization?	6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III					
	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		Νo		
	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					
	in Part III					
	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		N o		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

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

tiso complete this pare for any additional information						
Ident if ier	Return Reference	Explanation				
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	President Poskanzer received the following nontaxable benefits residence on campus with the fair rental value of \$59,160 per year, maid/cleaning for personal portion of residence of \$6,200 Vice President Rogers received taxable income of \$20,540 for housing, Dean Nagel received taxable income of \$3,000 for housing, Vice President Hasseltine received taxable income of \$24,800 for housing Joel Cooper received taxable income of \$11,672 for a vacation balance payout and \$56,016 for severance payments Joel Weisberg received taxable income of \$29,451 for a NSF Research grant				
SchJ_P01_S00_L03	Schedule J, Part I, Line 3	The President's compensation is determined annually by the Executive Committee of the Board of Trustees. The committee uses a consulting firm to conduct an independent review of the President's compensation package. The review compares data from 25 of the College's peer institutions, as well as utilizing various salary surveys. The College uses the same consulting firm to review the following positions. Vice President and Treasurer, Vice President of External Relations, Dean of the College, Vice President and Dean of Admissions, Vice President and Dean of Students, Chief of Staff and Director of Investments. The President submits his salary recommendations for these positions to the Executive Committee for approval. This process takes place annually, the review of all executive positions look took place in Spring 2012.				
SchJ_P01_S00_L04	Schedule J, Part I, Line 4	Joel Cooper received taxable income of \$56,016 for severance payments				
SchJ P02 S00 L00	Schedule J. Part II	Column (D) Nontaxable benefits includes employer paid health benefits and tuition assistance				

Schedule J (Form 990) 2012

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 41-0694747

Name: CARLETON COLLEGE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Steven G Poskanzer	(ı) (ıı)	379,132 0	0 0	18,826 0	24,500 0	139,543 0	562,001 0	0
Frederick A Rogers	(ı) (ıı)	250,111 0	0 0	33,453 0	24,500 0	16,168 0	324,232 0	0
Donald A Hasseltine	(ı) (ıı)	269,078 0	0	28,633 0	44,500 0	24,620 0	366,831 0	0
Beverly Nagel	(I) (II)	232,266 0	0	4,032	23,328 0	7,336 0	266,962 0	0
M H Wagner	(ı) (ıı)	180,896 0	0 0	1,059 0	18,234 0	6,921 0	207,110	0
Paul Thiboutot	(ı) (ıı)	165,638 0	0 0	2,574 0	17,126 0	19,133 0	204,471	0
Jason Matz	(ı) (ıı)	311,310 0	0	7,680 0	24,500 0	1,334 0	344,824 0	0
Andrew Christensen	(ı) (ıı)	197,209 0	0 0	1,190 0	20,750 0	25,152 0	244,301 0	0
Joel Cooper	(I) (II)	99,798 0	0	68,376 0	11,390 0	13,556 0	193,120 0	0
Joel Weisberg	(ı) (ıı)	135,513 0	0	31,035 0	14,165 0	22,665 0	203,378 0	0
Samuel Patterson	(I) (II)	157,404 0	0	1,710 0	16,271 0	18,017 0	193,402 0	0

DLN: 93493135046414

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

	LETON COLLEGE										.06947		ition num	iDEI	
Pa	rt I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date issued	(e) Issue	price	<b>(f</b> )	Descriptio	n of purpose	( <b>g)</b> De	eased	beh	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
Α	Minnesota Higher Education Facilities Authority Series 6D	41-0988525	60416HENO	04-13-2005	31,40			e Series 3L: new student	1 and Series housing	х			x		Х
В	Minnesota Higher Education Facilities Authority Series 6T	41-0988525	60416HNH3	12-04-2008	19,29	94,728		at and Mem truction	orıal Hall		X		×		X
c	Minnesota Higher Education Facilities Authority Series 7D	41-0988525	60416HRZ9	06-29-2010	31,9	5 / 105		z Center for ovation and	,		X		×		X
Pa	TEIII Proceeds														
_	A mount of hands ratured				·	Α	_	E	3		С			D	
1	A mount of bonds retired  A mount of bonds legally defe	a a a d					0		0			0			
2	Total proceeds of issue	aseu				24.460	0		0		24.06	2 4 2 5			
3	Gross proceeds in reserve ful			31,460,	000	0 19,294,728			31,96	2,105					
<u>4</u> 5	Capitalized interest from proc						0		0			0			
6	Proceeds in refunding escrow					28,123,	408		0			0			
7	Issuance costs from proceed					336,	_		291,550		22	7,859			
8	Credit enhancement from pro-					330,	301		291,550			7,839			
9	Working capital expenditures								0			0			
10	Capital expenditures from pro					3,000,0	000	-	19,003,178		31,62	4 246			
11	Other spent proceeds					3,000,	0	•	0		31,02	0			
12	Other unspent proceeds						0		0			0			
13	Year of substantial completio	n			20	08		20	11	2	011				
					Yes	No		Yes	No	Yes	N	lo	Yes		No
14	Were the bonds issued as par	rt of a current refund	ing issue?			х			Х		>	<			
15	Were the bonds issued as par	rt of an advance refu	nding issue?		Х				Х		>	<			
16	Has the final allocation of pro	ceeds been made?			Х			Х		Х					
17	Does the organization mainta allocation of proceeds?	ın adequate books a	nd records to supp	ort the final	Х			Х		Х					
Par	t IIII Private Business l	Jse						•						'	
						Α			3		C				
					Yes	No		Yes	No	Yes	N	lo	Yes		No

#### financed property? For Paperwork Reduction Act Notice, see the Instructions for Form 990.

property financed by tax-exempt bonds?

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

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

Χ

Χ

Χ

Χ

Χ

	dule K (Form 990) 2012									Page Z	_
Par	t IIII Private Business Use (Continued)		Τ .			_					_
			Yes	A No	Yes	B No	Yes	C No	Yes	D No	_
3a	Are there any management or service contracts that may result in privatiof bond-financed property?	e business use	Tes	X	165	X	165	X	165	No	_
b	If "Yes" to line 3a, does the organization routinely engage bond counsel counsel to review any management or service contracts relating to the fir property?										
С	Are there any research agreements that may result in private business u financed property?	se of bond-		Х		х		Х			
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed property.										
4	Enter the percentage of financed property used in a private business use other than a section 501(c)(3) organization or a state or local government			0%		0%		0 %		0	%
5	Enter the percentage of financed property used in a private business use unrelated trade or business activity carried on by your organization, anot (c)(3) organization, or a state or local government			0%		0%		0 %		o,	%
6	Total of lines 4 and 5			0%		0%		0 %		O,	%
7	Does the bond issue meet the private security or payment test?			х		Х		Х			_
8a	Has there been a sale or disposition of any of the bond financed property nongovernmental person other than a 501(c)(3) organization since the bouseued?			х		х		х			
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold o	r disposed of		%		%		%		0	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	s sections									
9	Has the organization established written procedures to ensure that all no bonds of the issue are remediated in accordance with the requirements u		X		Х		х				
	Regulations sections 1 141-12 and 1 145-2?										_
Par	t IV Arbitrage	1 -		1							
		A Yes	No	V	B		<u> </u>	No	D V	N-	_
1	Has the Issuer filed Form 8038-T?	Yes	No X	Yes	No X	Ye	5	X	Yes	No	_
 2	If "No" to line 1, did the following apply?		^					^			_
<u>-</u> а	Rebate not due yet?			T				v	I		_
b b	Exception to rebate?	X	X	X	X	X		X			_
c	No rebate due?		X		X	^		х			_
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed										_
3	Is the bond issue a variable rate issue?	X			Х			Х			_
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	×			Х			Х			_
b	Name of provider	Morgan Stanle Services LLC	ey Capital								
С	Term of hedge		2022								_
d	Was the hedge superintegrated?		Х								_
e	Was a hedge terminated?		Х								_

Pa	rt IV Arbitrage (Continued)								
		А		В	1	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		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?		x		х		х		
7	Has the organization established written procedures to monitor the requirements of section 148?	х		х		×			
Pa	rt V Procedures To Undertake Corrective Action								
		А		В	1	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	х		x		x			

Part VI Supplemental Inf	ormation. Complete this part to բ	provide additional information for responses to questions on Schedule K (see instructions).
Identifier	Return Reference	Explanation
SchK_P03_S00_L07	Schedule K, Part III, Line 7	These are qualified 501(c)(3) bonds

Schedule K (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**Noncash Contributions** 

DLN: 93493135046414

OMB No 1545-0047

. Inspection

**SCHEDULE M** (Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Department of the Treasury ► Attach to Form 990. Internal Revenue Service

Name of the organization CARLETON COLLEGE

**Employer identification number** 

					41-0694/4/			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of d noncash contrib	etermı	_	ts 
	Art—Works of art							
	Art—Historical treasures .	Х	1	107,725	Appraised value			
_	Art—Fractional Interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	241	7.120.897	Market Value			
	Securities—Closely held stock .			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .	Х	1	60,000	Gıft Amount			
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
25	Volunteer Other► (Expense )	×	339	71,240	Actual			
	Other ► ( )		333	, 1,210	, ( C C G G I			
	Other►( )							
	Other ( )							
	Number of Forms 8283 received	by the orga	nization during the tax yea	r for contributions				
	for which the organization comple	ted Form 8	283, Part IV, Donee Acknowledge	owledgement	29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year				d to be used			
	for exempt purposes for the enti					30a	igsquare	No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	•		,		31	Yes	
32a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell	noncash • • •	32a	Yes	
b	If "Yes," describe in Part II							
	If the organization did not report	an amount	: in column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II				•			

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

Identifier	Return Reference	Explanation
SchM_P01_S00_L32b	1 ' '	The College will retain an attorney for non cash real estate gifts and a broker for publicly traded securities, as needed

Schedule M (Form 990) (2012)

OMB No 1545-0047

Open to Public

Inspection

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Supplemental Information to Form 990 or 990-EZ

Name of the organization CARLETON COLLEGE

**Employer identification number** 

41-0694747

ldentifier	Return Reference	Explanation
F990_P06_S0A_L04	Form 990, Part VI, Section A, Line 4	
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	Management presented the 2012 Form 990 in its entirety to the Audit Committee of the Board of Trustees for their review prior to submitting it to the IRS. The 2012 Form 990 is also included on the Board of Trustees website and provided with the Board materials for all members reference
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Officers, trustees, and key employees are required to annually disclose interests that cou ld give rise to conflict. Such interests include a list of family members, substantial bus iness or investment holdings and other transactions or affiliations with businesses or oth er organizations. Transactions with parties with whom a conflicting interest exists may be undertaken only if all of the following are observed. 1) The conflicting interest is full y disclosed, 2) the person with the conflict of interest is excluded from the discussion a nd approval of such transaction, 3) a competitive bid for comparable valuation exists, and 4) the Audit Committee of the Board of Trustees has determined that the transaction is in the best interest of the organization.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The President's compensation is determined annually by the Executive Committee of the Boar d of Trustees. The committee uses a consulting firm to conduct an independent review of the President's compensation package. The review compares data from 25 of the College's peer institutions, as well as utilizing various salary surveys. The College uses the same consulting firm to review the following positions. Vice President and Treasurer, Vice President of External Relations, Dean of the College, Vice President and Dean of Admissions, Vice. President and Dean of Students, Chief of Staff and Director of Investments. The President submits his salary recommendations for these positions to the Executive Committee for approval. This process takes place annually, the review of all executive positions last took place in Spring 2013.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Carleton's governing documents, Conflict of Interest policy, and Financial Statements are available on the organization's website and are available up request
F990_P11_S00_L09	Form 990, Part XI, Line 9	Net Change in Annuity & Life Income Funds -\$1,322,649, Unrealized Gain(Loss) on Interest R ate SWAP \$872,766, Real Estate Expenses \$665,179, Bookstore Cost of Goods Sold \$913,695

SCHEDULE R Related Ord

For Paperwork Reduction Act Notice, see the Instructions for 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.

2012

Schedule R (Form 990) 2012

**Employer identification number** 

DLN: 93493135046414

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

CARLETON COLLEĞE				41-069	4747			
Part I Identification of Disregarded Entities (Comple	te if the organizatio	n answered "Yes" t	o Form 990, P	•				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	s [	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the (a)	ations (Complete i e tax year.)	f the organization a				line 34 because r		ne g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	(d) Exempt Code sec	tion Public chari (if section 5	ty status	Direct controlling entity	Section (13) co	n 512(b ontrolled tity?
							1	

Cat No 50135Y

(a)		(b)	(c)	(d)	(e)	)	(f)	(g)	(h	1)	(i)	C	i)	(k)
Name, address, and f related organization	EIN of on	Primary activity		Direct controll entity	Predom ing income(re	inant elated, ted, I from ider 512-	Share of	Share of	Disprop	ortionate	Code V—UBI amount in bot 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or   I	Percentage ownership
					314	,			Yes	No		Yes	No	
Part IV Identification of Related line 34 because it had one of	or more related organization	ons treated a	s a cor		า or trust du		the tax y	ear.)	swere				Part I	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Lega domic (state or t count	il cile foreign		( <b>d)</b> Direct controlling entity	(C co	(e) e of entity orp, S corp, r trust)	(f) Share of total income	0	(g) re of en of-year assets	d- Percen owner	tage	( )	(i) ction 512 b)(13) ontrolled entity?
(1) Trust Name Confidential	Charitable Remainder				I/A	Т			+		_		Y (	es No
One North College Street Northfield, MN 55057	Trusts	MM	I			ľ								
									_					
									1		1			

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No					
<b>1</b> D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		No					
b	<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No					
C	c Gift, grant, or capital contribution from related organization(s)	<b>1</b> c		No					
d	d Loans or loan guarantees to or for related organization(s)	1d		No					
e	e Loans or loan guarantees by related organization(s)	1e		No					
f	f Dividends from related organization(s)	1f		No					
		1g		No					
	h Purchase of assets from related organization(s)	1h		110					
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)									
Lease of facilities, equipment, of other assets to related organization(s)									
k	<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)	1k		No					
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No					
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
	o Sharing of paid employees with related organization(s)	10	Yes						
р	p Reimbursement paid to related organization(s) for expenses	1p		No					
q	<b>q</b> Reimbursement paid by related organization(s) for expenses	1q	Yes						
r	r Other transfer of cash or property to related organization(s)	1r		No					
s	s Other transfer of cash or property from related organization(s)	1s		No					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and trans	ısactıon thresholds							
	(a)       (b)       (c)         Name of other organization       Transaction type (a-s)       Amount involved type (a-s)	( <b>d)</b> ethod of determining amount	ınvolved	i					

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

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				`	,		_	
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(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	

Additional Data Return to Form

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 41-0694747

Name: CARLETON COLLEGE

Schedule R (Form 990) 2012

Page **5** 

#### Part VII Supplemental Information

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

### **TY 2012 Reasonable Cause Explanation**

Name: CARLETON COLLEGE

**EIN:** 41-0694747

**Software ID:** 12000197

**Software Version:** v1.00

**Explanation:** Application for Extension of Time to File an Exempt Organization

Return was filed requesting a 6 month extension allowing time for management, audit committee and trustee review. The Internal Revenue Service approved this request and extended the due date

to February 15, 2014.