

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



$\mathsf{Form} 990$

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A Fo							
B Che	eck if ap	pplicable	C Name of organization BELOIT COLLEGE		D Employ	yer ider	ntification number
Add	Tress cha	nange	Doing Business As		39-08	08497	7
Naı	me char	nge	cong business re				
— Inıt	ıal retur	rn	Number and street (or P O box if mail is not delivered to street address) Room/sui	te	E Telepho	ne num	ber
Ter	mınated	d	700 COLLEGE ST		(608)		
– _{Am}	ended r	return	City or town, state or province, country, and ZIP or foreign postal code BELOTT, WI 53511		(008)	555-2	
App	lication	pending	belon, wi 55311		G Gross re	eceipts \$	102,714,808
			F Name and address of principal officer	H(a) I	s this a group	return	
			DR H SCOTT BIERMAN 700 COLLEGE ST	S	ubordinates?		┌ Yes 🗸 No
			BELOIT,WI 53511	H(b) A	re all subordir	nates	┌ Yes ┌ No
				- 11	ncluded?		
T a	x-exem	npt status	▼ 501(c)(3)	I	f "No," attach	a list	(see instructions)
ı w	ebsite	e:► WV	WW BELOIT EDU	H(c)	Group exemptı	on nur	mber ►
∢ Forr	n of org	ganızatıon	Corporation Trust Association Other ►	L Year	of formation 184	46 M	State of legal domicile WI
Pa	rt I	Sum	ımary	•		•	
Governance	R A G A E A	REMAIN MASTER A CONT GLOBAL ARE SE' DEDICA EXEMPL AGAINS	ATION OF LIBERALLY EDUCATED PERSONS FOR MORE THAN 150 NED CONSTANT TO PROVIDE STUDENTS WITH A BROAD GROUND RING AN AREA OF KNOWLEDGE, THE ABILITY AND INCLINATION TO THE PERSONAL OF LIBER FOR VALUES, ENTHUSIASM FOR PERSONAL OF LIBER FOR VALUES, ENTHUSIASM FOR PERSONAL OF LIBER FOR VALUES, ENTHUSIASM FOR PERSONAL OF LIBER FOR CONTOWERS AND MOST IMPORTANTLY, THE DESIRE TO CONTOWERS MAJOR COMMITMENTS THAT HAVE LONG HELPED TO GUIDATION TO THE PURSUIT OF EXCELLENCE, A DEDICATION TO FREE LIFIED BY THE COLLEGE'S OWN TRADITIONS, AN INTEGRITY OF POST EXPEDIENCY OR EXPLOITATION, A SPIRIT OF TOLERANCE THAT WORSHIP, SPEECH, PRESS, OR ACADEMIC RESE	ING IN F TO INTE REATIVI INUE LE DE THE C E INQUIF URPOSE	FACT, THE EX GRATE, ASSI TY, AN AESTI ARNING REL DPERATION C RY AND COMM FAND PERFOR	PERIE MILAT HETIC ATED F BEL MITME	ENCE OF TE, AND EVALUATE, TSENSIBILITY, A TO THESE GOALS OIT COLLEGE A ENT AS CE STEADFAST
Activities &	-						
Ę	2 0	Check tl	his box দ if the organization discontinued its operations or disposed o	f more th	an 25% of its	net as	sets
Ę					ı		
4.			of voting members of the governing body (Part VI, line 1a)			3	30
			of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2013 (Part V, line 2a).			4 5	1.630
			mber of volunteers (estimate if necessary)			6	1,630
			related business revenue from Part VIII, column (C), line 12			7a	94,223
	l		elated business taxable income from Form 990-T, line 34			7b	
						70	-14,540
					Prior Year	/6	-14,540 Current Year
	8	Contr	ibutions and grants (Part VIII, line 1h)		Prior Year 6,917,3		
enne	9	Progra	am service revenue (Part VIII, line 2g)		6,917,3 56,032,0	86	Current Year 10,250,419 57,393,334
Revenue	9 10	Progra Inves	am service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2	886	Current Year 10,250,419 57,393,334 8,967,420
Rayentle	9 10 11	Progra Inves Other	tment income (Part VIII, line 2g)		6,917,3 56,032,0	886	Current Year 10,250,419 57,393,334
Revenue	9 10	Progra Inves Other Total	am service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2	886 001 15 28	Current Year 10,250,419 57,393,334 8,967,420
Revenue	9 10 11	Progra Inves Other Total 12)	am service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4	386 001 115 28	Current Year 10,250,419 57,393,334 8,967,420 1,174,569
Revenue	9 10 11 12	Progra Inves Other Total 12) Grants Benefi	am service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0	386 001 115 28	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742
	9 10 11 12	Progra Inves Other Total 12) Grants Benefi	tment income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6	386 901 115 28 930 962 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0
	9 10 11 12 13 14	Progra Inves Other Total 12) Grants Benefi Salari 5-10	tment income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0	386 901 115 28 930 962 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673
	9 10 11 12 13 14 15	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes	tment income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6	386 901 15 28 930 662 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618
Exp enses Revenue	9 10 11 12 13 14 15	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes	transervice revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6	386 901 15 28 930 662 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618
	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) . Grants Benefi Salari 5-10 Profes Total fo	tment income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6	886 901 115 28 930 662 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0
Expenses	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12). Grants Benefi Salari 5-10 Profes Total fu Other	the service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8	386 901 15 28 930 662 0 0 990 0	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0
Expenses	9 10 11 12 13 14 15 16a b 17 18	Progra Inves Other Total 12). Grants Benefi Salari 5-10 Profes Total fu Other	tement income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer	386 901 15 28 930 962 0 0 999 851 821	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231
Expenses	9 10 11 12 13 14 15 16a b 17 18	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other Total Reven	the service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year	886 901 115 28 930 662 0 0 990 0 299 351 321	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other Total Reven	tement income (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer	386 901 15 28 930 662 0 0 999 351 321 1t	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511
	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven	the service revenue (Part VIII, line 2g)		6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4	386 901 15 28 930 962 0 0 99 351 321 345 386	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078
not Assets of Expenses of Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other Total Reven Total Net as Sign alties of	the service revenue (Part VIII, line 2g)	Begin	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5	386 301 315 228 330 362 0 390 0 351 321 345 386 359	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606
of Land Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total for Other Total Reven Total Reven Total Sign alties of dge and as any k	tment income (Part VIII, column (A), lines 3, 4, and 7d)	Begin	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and starr) is based on a	386 301 315 228 330 362 0 390 0 351 321 345 386 359	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606
To met Assets of Table Balances The property of the property	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total for Other Total Reven Total Reven Total Sign alties of dge and as any k	tment income (Part VIII, column (A), lines 3, 4, and 7d)	Begin	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5	386 301 315 228 330 362 0 390 0 351 321 345 386 359	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606
To met Assets of Table Balances The property of the property	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12). Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Reven Total Sign alties of dige and dis any k	the service revenue (Part VIII, line 2g)	Begin	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and starr) is based on a	386 301 315 228 330 362 0 390 0 351 321 345 386 359	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606
To met Assets of Table Balances The property of the property	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Net as Sign altres of dge and as any k	the service revenue (Part VIII, line 2g)	Beging sche	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and stater) is based on a	886 901 115 28 30 662 0 0 99 351 321 11 12 13 14 15 16 16 16 16 16 16 16 16 16 16	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606
To more Passes of Passes o	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 1 III r pena nowled arer has	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total for Other Total Reven Total Net as Sign alties of dge and as any k **** Signa LAUF Type	tement income (Part VIII, column (A), lines 3, 4, and 7d)	Begin	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and state r) is based on a	886 001 15 15 15 15 15 15 1	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606 ts, and to the best of rmation of which
Uny Passes of Expenses of Metanses of Pand Between Sign of Pand Between	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III r pena nowled rer ha	Progra Inves Other Total 12). Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Reven Total Sign alties of dge and as any k **** Signal	tement income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines s and similar amounts paid (Part IX, column (A), lines 1–3) its paid to or for members (Part IX, column (A), line 4) es, other compensation, employee benefits (Part IX, column (A), lines) ssional fundraising fees (Part IX, column (A), line 11e) stindraising expenses (Part IX, column (D), line 25) expenses (Part IX, column (A), lines 11a–11d, 11f–24e) expenses Add lines 13–17 (must equal Part IX, column (A), line 25) sue less expenses Subtract line 18 from line 12 assets (Part X, line 16) sests or fund balances Subtract line 21 from line 20 seture Block perjury, I declare that I have examined this return, including accompanibelief, it is true, correct, and complete Declaration of preparer (other the nowledge *** ature of officer RIE STICKELMAIER VP FOR BUDGET AND PLANNING er or print name and title Print/Type preparer's name Preparer's signature D.	Begin ying sche	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and star r) is based on a	886 001 15 15 15 15 15 15 1	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606 ts, and to the best of rmation of which
Pare Fund Balances Expenses Pare Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 1 III r pena nowled arer has	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total for Other Total Reven Total Net as Sign alties of dge and as any k **** Signa LAUF Type	tement income (Part VIII, column (A), lines 3, 4, and 7d)	Begin ying sche	6,917,3 56,032,0 4,538,2 759,4 68,247,0 24,408,6 27,193,8 20,486,7 72,089,3 -3,842,3 nning of Currer Year 233,649,4 79,784,8 153,864,5 edules and state r) is based on a	886 901 15 28 90 0 0 99 351 21 145 886 659 Example 10 10 10 10 10 10 10 10 10 10	Current Year 10,250,419 57,393,334 8,967,420 1,174,569 77,785,742 26,305,673 0 27,646,618 0 23,220,940 77,173,231 612,511 End of Year 237,489,078 76,031,472 161,457,606 tts, and to the best of rmation of which

Par		ent of Program Service A Schedule O contains a response		ш	٦
1	Briefly describe	the organization's mission			
SEE	SCHEDULE O				
2	Did the organiza	ation undertake any significant p	rogram services during the year	which were not listed on	
		90 or 990-EZ?			┌ Yes ┌ No
	If "Yes," descri	be these new services on Sched	ıle O		
3	_	ation cease conducting, or make	significant changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," descri	be these changes on Schedule O			
4	expenses Sect		anizations are required to report	ree largest program services, as the amount of grants and alloca	
	(Code) (Expenses \$ 6	4,858,933 including grants of \$	26,305,673) (Revenue \$	57,393,334)
	EDUCATION COUL "LIBERAL ARTS IN AND REQUIRES TI SET THE COLLEGE AND THE DISTRIC DOMESTICALLY AN ASSISTANCE TO A LOREN POPE, BEL	D ENERGIZE AND TRANSFORM LIVES, A PRACTICE" CURRICULUM THAT ENGAGE HEM TO DEMONSTRATE THAT THEY DO FAND ITS STUDENTS APART DURING THAT OF COLUMBIA COURSES WERE OFFE OF THE TOF COLUMBIA COURSES WERE OFFE OF THE TOP TO THE TO TH	ND BY EXTENSION, THE WORLD BELOTES STUDENTS IN AN EXPLORATION OF THAT FOCUS, ON PROVIDING A RIGORE 2013-14 ACADEMIC YEAR, THE COLLERD IN FALL, SPRING AND SUMMER SES THE COLLEGE GRADUATED 282 STUD AS ONE OF 40 "COLLEGES THAT CHARE THAN 50 ACADEMIC PROGRAMS, MORE OF THAN 50 ACADEMIC PROGRAMS, MORE STUDING STUDING THAN 50 ACADEMIC PROGRAMS, MORE STUDING STUDI	WAS BORN OUT OF A BELIEF THAT A PAIT CONTINUES TO BELIEVE THIS AND DE IDEAS, COMPELS STUDENTS TO DEEPLY ROUS AND REWARDING EDUCATION AND EGE SERVED 1,306 STUDENTS, FROM 3.5 SSIONS EDUCATIONAL SERVICES WERE IDENTS DURING THE YEAR WHILE PROVINGE LIVES" BY FORMER NEW YORK TIMORE THAN 50 STUDENT CLUBS, 18 VARS PERIENCES BOTH LOCALLY AND GLOBALL	LIVERS IT THROUGH A KNOW THEIR SUBJECTS, PREPARATION, HAS LONG 4 COUNTRIES, 48 STATES E PROVIDED BOTH DING FINANCIAL ES EDUCATION EDITOR, ITY SPORTS, AND
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program	services (Describe in Schedule	0)		
	(Expenses \$	•	grants of \$) (Revenue \$)
4e	Total program	service expenses ► 64	858,933		

Form 990 (2013) 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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	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^{\square}	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
l1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI 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 other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	Yes	
L7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or 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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2013)

	Check If Schedule O contains a response or note to any line in this Part V	<u>-</u>	Yes	N
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 164			
0	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
а	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	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" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial		103	
	account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		١
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		١
2	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		N
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			'
	were not tax deductible?	6b		
	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	7a	Yes	
b	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
t	file Form 8282?	7c		1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
3	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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.	0-		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		
•	Section 501(c)(7) organizations. Enter	90		
	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			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
а	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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	l	l
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			
		 	 	 .
d	Did the organization receive any payments for indoor tanning services during the tax year?	14a		

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

Check if Schedule O contains a response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<u> 5</u>				
			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		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	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?	\vdash		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			Ti.
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
b		11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			No
12a			Yes	No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a	Yes	No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b	Yes	No
b c	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b	Yes Yes	No
b c 13	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13	Yes Yes Yes	No
b c 13 14 15	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13	Yes Yes Yes	No
b c 13 14 15	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13	Yes Yes Yes	No
b c 13 14 15	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes	
b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	
b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	

- (3)s only) available for public inspection Indicate how you made these available Check all that apply own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►LAURIE STICKELMAIER 700 COLLEGE STREET BELOIT, WI 53511 (608) 363-2250

Form 990	(2013	
----------	-------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours		tion (han d n is l	ne l both	oox, an c			(E Repor comper from organiza	table nsation the	(E) Reportable compensation from related organizations (W		(F) Estima amount o compens from t	ted f other ation
		for related organizations below dotted line)	n Individual trustee or director	institutional Trustee	Office		Highest compensated	Former	organiza 2/1099		2/1099-MISC		rrom t organizati relate organiza	on and ed
1b	Sub-Total							▶						
c	Total from continuation sheet	s to Part VII, S	ection A	٠.				►						
d	Total (add lines 1b and 1c) .							+		1,831,686		0		242,590
2	Total number of individuals (in \$100,000 of reportable compe	-					d abov	e) wl	ho receive	d more th	an			
													Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highes	t compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											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		ensated	d ınde	epen	dent	contr	acto	rs that rec	eived mo	re than \$100,000	O of		
	compensation from the organiz	ation Report co									thin the organizat			
	N	(A) ame and business	address							Des	(B) cription of services		(C Comper	

RENAISSANCE ROOFING PO BOX 5024 ROCKFORD IL 61125

MARSH USA INC PO BOX 846015 DALLAS TX 75284

WORLD LEARNING KIPLING ROAD PO BOX 676 BRATTLEBORO VT 053020676

Total number of independent contractors (including but not limited to those listed above) who received more than

Part V	4 * * 4	Statement o			a in this Dart VIII			_
	10		ule O contains a respor	ise of flote to any fill	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
के के	1a	Federated cam						
ran Our	Ь	Membership du	ıes 1b					
, G	c	Fundraising ev	ents 1c	14,830				
iiffs ar.	d	Related organiz	zations 1d					
ons, Giffs, Grants Similar Amounts	e	Government grant	rs (contributions) 1e	1,417,794				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	8,817,795				
들충	g	Noncash contributi 1a-1f \$	ons included in lines	1,358,124	ĺ	ĺ		
Com	h		s 1a-1f		10,250,419			
				Business Code				
Program Serwce Revenue	2a	TUITION & FEES		812900	49,706,833	49,706,833		
e ve	ь	ROOM, BOARD & O	OTHER	812900	7,686,501	7,686,501		
ው ጨ				012300	7,000,301	7,000,501		
ž	d							
Ÿ.	e							
<u> </u>	f	All other progra	am service revenue					
နို		T-4-1 A dd l	- 2- 25		F7 202 224			
	g 3		s 2a-2f		57,393,334			
			ar amounts)		8,686,319			8,686,319
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties .			2,470			2,470
		Current ments	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	-	expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	 7a	Gross amount	(ı) Securities	(II) O ther				
	'"	from sales of assets other than inventory	25,193,699					
	ь	Less cost or other basis and	24,873,608	38,990				
	 c	sales expenses Gaın or (loss)	320,091	-38,990				
	d	Net gain or (los			281,101			281,101
ψ	8a		from fundraising	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,			· ·
Other Revenue		Ψ	s reported on line 1c)					
π Œ		: wiczy / III	a	18,237				
Ħ.	ь	Less direct ex	penses b	16,468				
ō	c	Net income or	(loss) from fundraising	events 🛌	1,769			1,769
	9a		from gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	c		(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	• • •					
	ь	Less costofa	oods sold b					
			(loss) from sales of inve	entory				
		Miscellaneou		Business Code				
	11a	MISCELLANEC	OUSINCOME	900099	1,061,659		-14,448	1,076,107
	ь	CONFERENCE	S	721000	108,671		108,671	
	С							
	d		ue					
	e	Total. Add lines	s 11a-11d	· · · • [1,170,330			
	12	Total revenue.	See Instructions .	· · · · •	77,785,742	57,393,334	94,223	10,047,766

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)

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>		<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	24,745,628	24,745,628		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,560,045	1,560,045		
4	Benefits paid to or for members				_
5	Compensation of current officers, directors, trustees, and key employees	1,935,672	534,341	1,109,155	292,176
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	19,752,429	14,940,094	3,336,653	1,475,682
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	1,356,472	1,014,378	244,558	97,536
9	Other employee benefits	3,021,881	2,122,957	757,516	141,408
10	Payroll taxes	1,580,164	1,150,964	322,018	107,182
11	Fees for services (non-employees)				
а	Management				
b	Legal	113,749	2,400	103,528	7,821
c	Accounting	96,345	·	96,345	· ·
d	Lobbying	,		·	-
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	75,239		75,239	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,797,419	2,647,282		154,190
12	·			 	
12 13	Advertising and promotion	43,813	18,765	 	197.970
	Office expenses	1,963,065	1,337,272	' ।	187,879
14	Information technology	509,595	233,846	269,701	6,048
15	Royalties	1,800	1,800		
16	Occupancy	1,637,709	1,637,709		120.015
17 18	Payments of travel or entertainment expenses for any federal,	1,410,247	1,156,938	124,494	128,815
	state, or local public officials		_		
19	Conferences, conventions, and meetings	323,123	268,432	33,903	20,788
20	Interest	2,749,357	2,749,357	 	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,336,799	3,357,654	 	
23	Insurance	289,126	1,648	256,135	31,343
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)				
а	FOOD SERVICE	3,330,990	3,200,860	87,730	42,400
b	REPAIRS & MAINTENANCE	1,566,765	1,437,804	128,022	939
c	COLLECTIONS	515,611	515,611		
d	MISCELLANEOUS OTHER	460,188	223,148	235,284	1,756
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	77,173,231	64,858,933	9,618,288	2,696,010
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				rm 990 (2013)

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	549,212	1	368,783
	2	Savings and temporary cash investments	4,773,099	2	5,226,858
	3	Pledges and grants receivable, net	3,932,463	3	3,042,641
	4	Accounts receivable, net	1,556,694	4	383,211
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
Assets	_	Naka and lasar associable ask	7,591,370	7	5,804,634
Ą	7	Notes and loans receivable, net	17,780	8	28,698
	8	Inventories for sale or use	123,016		339,977
	9 10a	Prepaid expenses and deferred charges	·	9	339,977
	Ь	Complete Part VI of Schedule D Less accumulated depreciation		10c	73.593.652
	11	Investments—publicly traded securities	133,708,837	11	144,285,660
	12	Investments—other securities See Part IV, line 11	,,	12	,
	13	Investments—program-related See Part IV, line 11	634,306	13	14,656
	14	Intangible assets		14	,
	15	Other assets See Part IV, line 11	4,485,748		4,400,308
	16	Total assets. Add lines 1 through 15 (must equal line 34)	233,649,445	16	237,489,078
	17	Accounts payable and accrued expenses	4,651,230	17	5,771,950
	18	Grants payable	-,,	18	
	19	Deferred revenue	2,109,694	19	1,953,385
	20	Tax-exempt bond liabilities	58,440,000	20	57,735,500
	21	Escrow or custodial account liability Complete Part IV of Schedule D	33,113,033	21	0.1.00,000
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		21	
æ		persons Complete Part II of Schedule L		22	
ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	14,583,962	25	10,570,637
	26	Total liabilities. Add lines 17 through 25	79,784,886	26	76,031,472
\$ 0.00		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	53,307,305	27	54,068,515
- B	28	Temporarily restricted net assets	24,804,131	28	26,632,901
됻	29	Permanently restricted net assets	75,753,123	29	80,756,190
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
ets ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
7 ₩	33	Total net assets or fund balances	153,864,559	33	161,457,606
Net	34	Total liabilities and net assets/fund balances	233,649,445	34	237,489,078
	1	Total habilities and fiet assets/fully buildiness	200,049,440	J4	201,400,070

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		77,7	785,742
2	Total expenses (must equal Part IX, column (A), line 25)	2		77 1	173,231
3	Revenue less expenses Subtract line 2 from line 1			, , , ,	173,231
_		3		ϵ	512,511
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		153,8	364,559
5	Net unrealized gains (losses) on investments	5		5 -	31,076
6	Donated services and use of facilities			3,5	731,070
_		6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9		1,4	49,460
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		161,4	57,606
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	וו		
	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 sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				1
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
За	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?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 39-0808497
Name: BELOIT COLLEGE

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, pendent Cor	Direct otracto	ors, rs	Tru	ste	es, k	(ey	Employees, Higl	nest	
(A) Name and Title	week (list any hours		ion (i	ne b oth ctor/	ox, u an of trus	ınless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		_,,	related organizations
MR BILL BOYD	1 00	х						0	0	0
TRUSTEE MR CHRISTOPHER D BARTOL	1 00							_	_	_
TRUSTEE		Х						0	0	0
MR CHUCK MCQUAID TRUSTEE	1 00	х						o	0	0
MR DICK NIEMIEC	1 00	×						0	0	0
TRUSTEE MR DON J WYATT	1 00									
TRUSTEE		Х						0	0	0
MR DONALD CARSON TRUSTEE	1 00	х						o	0	0
MR EUGENE ZELTMANN TRUSTEE	1 00	х						0	0	0
MR HAROLD F MAYER	1 00	х						0	0	0
TRUSTEE MR JACK ROZRAN	1 00	×						0	0	0
TRUSTEE MR JAMES PACKARD	1 00									
TRUSTEE MR JAMES SANGER	1.00	×						0	0	0
TRUSTEE	1 00	×						0	0	О
MR JONATHON P MASON TRUSTEE	1 00	х						0	0	0
MR OSCAR E CARDONA	1 00	х						0	0	0
TRUSTEE MR PETER CHATILOVICZ	1 00	×						0	0	0
TRUSTEE MR PHEE BOON KANG	1 00									
TRUSTEE MR RICHARD CLAYTON	1.00	×						0	0	0
TRUSTEE	1 00	х						0	0	0
MR ROBERT SHAW TRUSTEE	1 00	x						0	0	0
MR ROBERT YOUNG	1 00	×						0	0	0
TRUSTEE MR STEPHEN H MAHLE	1 00	х						0	0	0
TRUSTEE MR STEVEN COHEN	1 00								0	0
TRUSTEE		Х						0	0	0
MR THOMAS O'NEILL TRUSTEE	1 00	x						0	0	0
MR THOMAS WALCOTT TRUSTEE	1 00	х						0	0	0
MS CECILY MAJERUS	1 00	х						0	0	0
TRUSTEE MS DIANE HENDRICKS	1 00	Х						0	0	0
TRUSTEE MS JO FROMAN	1 00	.,						_	_	_
TRUSTEE		Х						0	0	0

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

Compensated Employees, and Inc	dependent Cor	ntracto	rs					I	I	1
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne booth a	ox, u an of trus	inless ficer tee)	_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	2/1033 112007	2,1033 111307	related organizations
MS JOANNA KUTTER	1 00	×						0	0	0
TRUSTEE						_				
MS JUDITH MILLER	1 00	x						0	0	0
TRUSTEE MS MARGARET ROBINSON	1.00									
TRUSTEE	1 00	x						0	0	0
MS NINA WEISSBERG	1 00									
TRUSTEE		×						0	0	0
MS SHAMS RASHID	1 00									
TRUSTEE		×						0	0	0
MS SUDHA P QUAMME	1 00									
		×						0	0	0
TRUSTEE DR ANN DAVIES	40 00				1					
	40 00			Х				163,487	0	21,394
PROVOST & DEAN OF THE COLL DR CHRISTINA KLAWITTER	40 00									
	40 00			Х				122,141	0	12,287
DEAN OF STUDENTS DR H SCOTT BIERMAN	40 00									
	40 00			Х				434,938	0	34,776
PRESIDENT MR. D. 1555 PRICKETT						_				
MR R JEFF PUCKETT	40 00			х				235,878	0	35,243
VP EXTERNAL AFFAIRS										
MS CONNIE TRUESDALE	40 00			X				60,030	0	15,900
SECRETARY OF THE COLLEGE									_	
MS LAURIE STICKELMAIER	40 00			X				97,438	0	14,517
VP FINANCE & PLANNING/TREASURER								31,100		
MS LORI RHEAD	40 00			X				104,186	0	20,283
VP HUMAN RESOURCES & OPERATIONS				_^				104,100	Ŭ	20,203
MS MEGAN FITCH	40 00			х				101,260	0	15,473
CHIEF INFORMATION OFFICER				^				101,260	0	15,475
MS NANCY BENEDICT	40 00			,				142.155		24.070
VP ENROLLMENT				X				142,155	0	24,078
MR BILL FLANAGAN	40 00								_	
DEVELOPMENT PROFESSIONAL						X		115,528	0	12,116
MR DANIEL SCHOOFF	40 00					l .				
SENIOR DIRECTOR OF CORPORATE RELATIONS						X		115,721	0	10,948
MS BETH MONTIERO	40 00									
EXEC DIR DEV OPER & GIFT P						×		138,924	0	25,575
				1				I	I .	<u> </u>

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493098008075

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization BELOIT COLLEGE

Employer identification number

									39-08084		
	rt I			blic Charity Sta						nstructions	
⊺he	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)		
1	\sqcap	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedı	ule E)				
3	\vdash	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)(A)(iii).		
4	\vdash	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital des	cribed in se	ction 170(b)(1)(A)(iii). E	nter the
_	_			ty, and state							
5	ļ	_	•	erated for the benefi	_	or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	_			A)(iv). (Complete P	•						
6	<u> </u>			local government or	3			. , .	,, ,, ,		
7	Г	_		at normally receives			support from	a governm	ental unit or f	rom the gen	eral public
8	Г			n 170(b)(1)(A)(vi). described in sectior			nplete Part II)			
9	Γ	An orga	anization tha	at normally receives	(1) more th	an 331/3% c	of its support	from contri	butions, mem	bership fees	, and gross
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	ed by the org	janization after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pa	rt III)		
10	Γ	An orga	anızatıon org	ganized and operated	d exclusively	to test for p	public safety	See sect io	n 509(a)(4).		
11	Г	An orga	anızatıon org	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ctions of, or t	o carry out	the purposes of
				y supported organiz						ee section 5	609(a)(3). Check
				bes the type of supp							
_	_			b Type II c							
е	ļ	•		ox, I certify that the on managers and otl	_		,			•	•
			1509(a)(2)	on managers and oc	ner than one	or more par	mery support	ca organiza	cions desemb	ed in section	11 303(4)(1) 01
f				received a written do	etermination	from the IR	S that it is a	Гуре I, Тур	e II, or Type	III support	ing organizatio <u>n,</u>
			this box	000 h th				.			J
g			august 17, 2 ng persons?	2006, has the organi	zation accep	ted any girt	or contributi	on from any	ortne		
			.	rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii))	Yes No
		and (111) below, the	governing body of th	e supported	organizatioi	n?			11g	(i)
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g((iii)
h		Provide	the follown	ng information about	the supporte	ed organizat	ion(s)				
	(i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is		(vii) A mount of
	suppor										
0	rganiza	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor		col (i) org		support
				or IRC section							
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
T-4-	. 1								1	1	

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17b; and Part III, line 12. Also complete this part for any additional information. (See instruction									
	Facts And Circumstances Test								
Retu	ırn Reference	Explanation							
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

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

DLN: 93493098008075

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

emal Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspec	tior	1
Name of the orga	anization		Empl	oyer ident if id	cation numb	er	
BELOIT COLLEGE			39-0	808497			
Part I Orga	anizations Maintaining Donor Adv	vised Funds or Other Similar F			s. Comple	te i	f the
	<u>nızatıon answered "Yes" to Form 990</u>	, Part IV, line 6.			·		
		(a) Donor advised funds	((b) Funds and	other acco	unts	
	r at end of year						1
Aggregate co	ontributions to (during year)						
	rants from (during year)					105	,000
Aggregate va	alue at end of year					373	,275
	nization inform all donors and donor advis e organization's property, subject to the oi		nor advis	sed	√ Yes	Г	No
used only for	nization inform all grantees, donors, and d r charitable purposes and not for the bene				▽ Yes	_	No
	npermissible private benefit? servation Easements. Complete if	the organization answered "Vos" t	o Form	000 Dart 1	<u> </u>	'	140
Purpose(s) o Preserva Protectio Preserva Complete lin	of conservation easements held by the orgonition of land for public use (e g , recreation on of natural habitat stion of open space less 2a through 2d if the organization held a	anization (check all that apply) or education)	n histori certified	cally importa I historic stru	nt land area Icture		
easement on	n the last day of the tax year				a Fud of the	. V.	
a Total numbe	r of conservation easements		20	Heid at th	e End of the	e Yea	<u>ar</u>
			2a				
_	le restricted by conservation easements onservation easements on a certified histo	oric structure included in (a)	2b				
		, ,	2c				
historic stru	onservation easements included in (c) acc cture listed in the National Register		2d				
	onservation easements modified, transferi	ed, released, extinguished, or terminate	ed by th	e organizatioi	n during		
Number of st	tates where property subject to conservat	ion easement is located 🛌					
	ganization have a written policy regarding of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	violations, ar	nd ryes	Г	No
Staff and vol	unteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments d	uring the yea	r		
	xpenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s during	the year			
	onservation easement reported on line 2(170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	0(h)(4)(B)(ı)	┌ Yes	Г	No
balance shee	, describe how the organization reports co et, and include, if applicable, the text of th tion's accounting for conservation easeme	e footnote to the organization's financia	•		•		
a rt IIII Orga	anizations Maintaining Collection plete if the organization answered "Y	s of Art, Historical Treasures,	or Oth	ner Similar	Assets.		
works of art,	zation elected, as permitted under SFAS 1 historical treasures, or other similar asse vide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or resea	arch in furthe			
works of art,	zation elected, as permitted under SFAS 1 historical treasures, or other similar asse vide the following amounts relating to thes	ts held for public exhibition, education,				olic	
(i) Revenues	s included in Form 990, Part VIII, line 1			► \$			
(ii) Assets II	ncluded in Form 990, Part X			- \$	7	22,5	579
If the organi	zation received or held works of art, histor ounts required to be reported under SFAS						
_	·	, , , ,		. .			
kevenues in	cluded in Form 990, Part VIII, line 1			► \$			

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	, Hist	orical	Γreasι	ires, or Ot	<u>her Similar</u>	Assets	5 (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, che	eck any o	f the fol	lowing that ar	e a significant	use of it	S
а	Public exhibition		d	┌ Loa	n or exc	hange progra	ms		
b	Scholarly research		e	┌ Oth	er				
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and expla	ın how	they furt	her the	organızatıon's	s exempt purpo	se in	
5	During the year, did the organization solicit							_	_
Do	assets to be sold to raise funds rather than		•						es 🔽 No
Pal	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answered	res to Fori	11 990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse	ts not	ΓYe	es No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follow	ıng table		_			
						_		Amount	<u>t </u>
C	Beginning balance					-	lc		
d	Additions during the year					<u> </u>	Ld		
e	Distributions during the year					├	le		
f	Ending balance					<u> </u>	Lf		
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21?					ΓYe	es No
ь	If "Yes," explain the arrangement in Part XI								<u> '</u>
Pa	rt V Endowment Funds. Complete								our voore book
1a	Beginning of year balance	(a)Current year 129,711,883		rior year 113,282,60		118,664,445	(d)Three years ba 102,942,5		89,083,136
b	Contributions	6,825,933		2,651,21	-	2,774,411	4,474,8	_	6,038,079
c	Net investment earnings, gains, and losses				_				
a		13,941,212 1,338,607		19,722,48		-2,634,589 1,206,005	15,831,5 1,238,3	_	12,660,647
d e	Grants or scholarships Other expenditures for facilities	1,338,007		1,307,04	-	1,200,003	1,230,	97	1,343,392
-	and programs	6,862,797		4,636,58	0	4,315,657	3,346,0	133	3,493,964
f	Administrative expenses								
g	End of year balance	142,277,624		129,711,88	3	113,282,605	118,664,4	₋ 45	102,942,506
2	Provide the estimated percentage of the cur	rent year end balan	ce (lıne	a 1g, colu	mn (a))	held as			
а	Board designated or quasi-endowment 🕨	34 000 %							
b	Permanent endowment ► 53 000 %								
С	Temporarily restricted endowment ► 13	000 %							
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hat are he	eld and a	admınıstered	for the	_	- I N
	organization by (i) unrelated organizations						Г	3a(i)	Yes No
	(ii) related organizations						<u> </u>	3a(ii)	No
b	If "Yes" to 3a(II), are the related organization		don So	chedule R	2.			3b	
4	Describe in Part XIII the intended uses of t	he organızatıon's en	dowme	nt funds			_		
Par	t VI Land, Buildings, and Equipme		the or	ganızatı	on ans	wered 'Yes'	to Form 990,	Part I\	√, line
	11a. See Form 990, Part X, line Description of property	10.		(a) Cost of basis (investigation)		(b)Cost or oth			d) Book value
								-	
	Land		•			1,593,		0.470	1,593,634
	Buildings		.			113,114,			63,625,086
	Leasehold improvements		.			•		5,744	2 228 280
	Equipment					8,363, 10,584,		4,887 8,053	2,228,389 6,146,543
	I. Add lines 1a through 1e (Column (d) must o	equal Form 990. Part	X, colur	nn (B). Iin	e 10(c)			,,055	73,593,652
	5 (22.2(2)200	,: -,-	,	. //	1-7-	·		le D (Fo	rm 990) 2013

provided in Part XIII

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. (Complete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
	on answered 'Yes' to Form 990	0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ord		to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	janization answered tes t	to Form 990, Part IV, line The Or This See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
STUDENT DEPOSITS	597,034	
FUNDS HELD FOR OTHERS	373,636	
ANNUITIES PAYABLE	2,788,833	
INTEREST RATE EXCHANGE LIABILITY	6,811,134	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,570,637	
2. Liability for uncertain tax positions In Part XIII, provious reports the organization's liability for uncertain tax positions.	ae tne text of the footnote to th ions under FIN 48 (ASC 740)	ne organization's financial statements that Check here if the text of the footnote has been

	,		
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p the organization answered 'Yes' to Form 990, Part IV, line 12a.	er F	Return Complete If
1	Total revenue, gains, and other support per audited financial statements	1	58,401,834
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-19,308,669
3	Subtract line 2e from line 1	3	77,710,503
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 75,239		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	75,239
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	77,785,742
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return. Complete
	ıf the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	50,808,787
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	16,468
3	Subtract line 2e from line 1	3	50,792,319
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 75,239		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	26,380,912
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	77,173,231
-	Complemental Information		

Part XIII Supplemental Information

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

information	
Return Reference	Explanation
PART III, LINE 4	THE COLLEGE MAINTAINS AN ANTHROPOLOGICAL MUSEUM AND AN ART MUSEUM THE COLLECTIONS ARE DISPLAYED FOR PUBLIC VIEWING HOWEVER, SPACE LIMITATIONS REQUIRE THAT ONLY PORTIONS OF THE COLLECTION ARE DISPLAYED AT A GIVEN TIME THE COLLECTIONS AND THEIR PRESERVATION ARE USED IN THE CLASSROOM SETTING FOR INSTRUCTIONAL PURPOSES IN AREAS OF STUDY SUCH AS ANTHROPOLOGY, ART AND MUSEUM STUDIES
PART V, LINE 4	THE PURPOSE OF THE COLLEGE'S ENDOWMENT FUND IS TO PROVIDE A CONTINUOUS SOURCE OF FUNDING TO SUPPORT THE MISSION OF THE INSTITUTION ENDOWMENT FUND EXPENDITURES PROVIDE FUNDING FOR SCHOLARSHIPS, FACULTY SALARIES, LIBRARY RESOURCES, AND OTHER PROGRAM ACTIVITIES
PART X, LINE 2	THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IT IS ALSO EXEMPT FROM STATE INCOME TAX HOWEVER, ANY UNRELATED BUSINESS INCOME MAY BE SUBJECT TO TAXATION THE COLLEGE FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED NO LIABILITY HAS BEEN RECOGNIZED BY THE COLLEGE FOR UNCERTAIN TAX POSITIONS AS OF MAY 31, 2014 AND 2013 THE COLLEGE'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES OPEN TAX YEARS SUBJECT TO EXAMINATION BY THE US AND STATE TAXING AUTHORITIES ARE FOR THE YEARS 2011 TO 2013 WHICH STATUTES EXPIRE IN 2014 TO 2016, RESPECTIVELY
PART XI, LINE 2D - OTHER ADJUSTMENTS	STUDENT FINANCIAL AID -26,305,673 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 505,156 CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS 214,793 SPECIAL EVENTS EXPENSE 16,468 INTEREST RATE SWAP GAIN 729,511
PART XII, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENTS EXPENSE 16,468
PART XII, LINE 4B - OTHER ADJUSTMENTS	STUDENT FINANCIAL AID 26,305,673

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493098008075

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

	Name of the organization Employer identifies			ation number				
BELUII	39-0808497							
Par				YES	NO			
1	Does the organization have a racially nondiscriminatory policy toward students by statement in it other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes				
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student adriprograms, and scholarships?		2	Yes				
	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation prothat makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes				
				103				
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes				
	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes				
	Copies of all catalogues, brochures, announcements, and other written communications to the puwith student admissions, programs, and scholarships?	iblic dealing	4c	Yes				
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes				
	Does the organization discriminate by race in any way with respect to		- - 					
	Students' rights or privileges? Admissions policies?		5a		No			
	Admissions ponetes.		30		No			
c	Employment of faculty or administrative staff?		5c		No			
	Scholarships or other financial assistance?		5d		No			
	Educational policies?		5e		No			
	Use of facilities?		5f		No			
	Athletic programs?		5g		No 			
	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		<u> 5h</u> -		No.			
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No			
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pondiscrimination? If "No." explain on Pa				140			

Part II Supplemental Information. 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)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	BELOIT COLLEGE IS A FOUR YEAR PRIVATE LIBERAL ARTS INSTITUTION THAT DRAWS STUDENTS NOT ONLY NATION WIDE BUT WORLD WIDE MATERIALS USED IN PROMOTIONAL ACTIVITIES AND RECRUITING EFFORTS INCLUDE STATEMENTS THAT BELOIT COLLEGE DOES NOT DISCRIMINATE AGAINST STUDENTS, APPLICANTS FOR ADMISSION, APPLICANTS FOR FINANCIAL ASSISTANCE, APPLICANTS FOR EMPLOY MENT, OR EMPLOY EES ON THE BASIS OF SEX, RACE, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, SEXUAL ORIENTATION, OR PHYSICAL OR MENTAL DISABILITIES UNRELATED TO INSTITUTIONAL JOBS, PROGRAMS, OR ACTIVITIES
SCHEDULE E, PART I, LINE 6	BELOIT COLLEGE DID RECEIVE FEDERAL FUNDS, WHICH WERE USED FOR STUDENT PROGRAMS/ENTITLEMENTS SUCH AS PELL GRANTS, SEOG GRANTS, AND WORKSTUDY PROGRAMS

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493098008075

OMB No 1545-0047

2013

S

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	e of the organization					Employer identi	fication number		
BELC	OIT COLLEGE					39-0808497			
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete	ıf the organıza	ation answered		
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitorii	ng the ι	ise of its grants	s and other		
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ice is ne	eded)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a i service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region		
(1)	See Add'l Data		j	,					
(2)									
(3)									
(4)									
(5)									
	Sub-total Total from continuation sheets	0	0				434,65		
	to Part I : Totals (add lines 3a and 3b)	0					434,65		

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganızatıons or ent	rities					

Schedule F (Form 990) 2013

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) SCHOLARSHIP	SOUTH AMERICA	16	216,319	SEE PART VI					
(2) SCHOLARSHIP	EUROPE/ICELAND/ GREENLAND	48	528,393	SEE PART VI					
(3) SCHOLARSHIP	RUSSIA	10	114,774	SEE PART VI					
(4) SCHOLARSHIP	SUB-SAHARAN AFRICA	12	166,279	SEE PART VI					
(5) SCHOLARSHIP	MIDDLE EAST / NORTH AFRICA	7	84,766	SEE PART VI					
(6) SCHOLARSHIP	EAST ASIA / PACIFIC	21	206,378	SEE PART VI					
(7) SCHOLARSHIP	SOUTH ASIA	11	116,179	SEE PART VI					
(8) SCHOLARSHIP	CENT AMERICA / CARIBBEAN	5	104,457	SEE PART VI					
(9) SCHOLARSHIP	NORTH AMERICA	6	22,500	SEE PART VI					
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
(17)									
(18)									

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)	Γ	Yes	V	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	V	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	<u>ح</u> ا	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	. 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)	Г	Yes	দ	. 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).	Г	Yes	V	. No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	IN CASES WHERE FUNDS ARE SPENT AWAY FROM CAMPUS, APPROPRIATE DOCUMENTATION IS REQUIRED TO BE SUBMITTED AND APPROVED TO SUBSTANTIATE THE EXPENSE

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III, COLUMN (E)	GRANT FUNDS AWARDED IN THE FORM OF STUDENT FINANCIAL ASSISTANCE IS CREDITED TO THEIR TUITI ON ACCOUNT TO ASSIST IN COVERING THE COST OF TUITION

Additional Data

Software ID: Software Version:

EIN: 39-0808497

Name: BELOIT 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
SOUTH AMERICA	0		EDUCATIONAL SERVICES	PROGRAM SERVICES	42,294
EUROPE/ICELAND/GREENLAND	0	=	EDUCATIONAL SERVICES	PROGRAM SERVICES	278,110
CENTRAL AMERICA & THE CARIBBEAN	0	_	EDUCATIONAL SERVICES	PROGRAM SERVICES	

Form 990 Schedule F F	Part I - Activit	<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
SUB-SAHARAN AFRICA	0	0	EDUCATIONAL SERVICES	PROGRAM SERVICES	22,556
MIDDLE EAST AND NORTH AFRICA	0	=	EDUCATIONAL SERVICES	PROGRAM SERVICES	
EAST ASIA AND THE PACIFIC	0		EDUCATIONAL SERVICES, ABROAD STUDENT SUPPORT	PROGRAM SERVICES	80,939

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)	(d) is a program service, describe specific type of service	(f) Total expenditures for region			
RUSSIA	0	_	EDUCATIONAL SERVICES, ABROOAD STUDENT SUPPORT	PROGRAM SERVICES				
NORTH AMERICA	0	=	EDUCATIONAL SERVICES	PROGRAM SERVICES	10,754			

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

Department of the Treasury

Internal Revenue Service

DLN: 93493098008075

OMB No 1545-0047

Supplemental Information Regarding SCHEDULE G (Form 990 or 990-EZ) **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

ame of the organization		<u> </u>			- International Control of the Contr	Employer iden	tification number
LOIT COLLEGE						39-0808497	
art I Fundraising Act Form 990-EZ filer				on answered "Yes" to part.	to Form	990, Part IV	, line 17.
Indicate whether the organ	ization raised funds	through a	ny of the f	following activities Che	eck all th	at apply	
Mail solicitations			e	Solicitation of non	n-governi	ment grants	
Internet and email solicitations				f Γ Solicitation of government grants			
Phone solicitations In-person solicitations		g F Special fundraising event					
Did the organization have a or key employees listed in If "Yes," list the ten highes	Form 990, Part VII)	or entity	ın connec	tion with professional f	fundraisii	ng services?	┌ Yes ┌ N
to be compensated at leas			ranaraise	is) parsuant to agreem	enes una	er willen ene fal	naraiser is
i) Name and address of (ii) Activity individual or entity (fundraiser)		(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
L		Yes	No				
2							
3							
1							
5							
,							
,							
3							
)							
)							
tal			.				
List all states in which the registration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has be	en notified it is	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundra events with gross receipts g	aising event contribut	on answered "Yes" to ions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported nes 1 and 6b. List				
		3 . 3	(a) Event #1 BUC OPEN	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
Φ			(event type)	(event type)	(total number)					
Revenue	1	Gross receipts	33,067	7		33,067				
Rev	2	Less Contributions	14,830			14,830				
	3	Gross income (line 1 minus line 2)	18,237	7		18,237				
	4	Cash prizes								
မွာ	5	Noncash prizes	500			500				
ense	6	Rent/facility costs	4,440			4,440				
Expenses	7	Food and beverages .	4,824	1		4,824				
Direct	8	Entertainment								
à	9	Other direct expenses .	6,704	1		6,704				
	10	Direct expense summary Add line	es 4 through 9 in column	(d)		(16,468)				
	11	Net income summary Subtract lir	ne 10 from line 3, columr	ı (d)		1,769				
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than				
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
		Gross revenue								
Expenses	2	Cash prizes								
xper	3	Non-cash prizes								
	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	☐ Yes % No	┌ Yes	│ Yes %					
		Direct expense summary Add lines			.					
9 a b	Ente Is t	er the state(s) in which the organiza he organization licensed to operate No," explain	tion operates gaming ac gaming activities in eac	tivitiesh of these states?						
10a b		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No If "Yes," explain								

Does	s the organization operate gaming activit	ies with nonmembers	;?							
12			st or a member of a partnership or other entity							
		•	· · · · · · · · · · · · · · · · · · ·							
13	Indicate the percentage of gaming acti		Yes No							
a										
ь										
14	·		organization's gaming/special events books and records							
			g							
	Name 🟲									
	Address ►									
15a			m whom the organization receives gaming							
L										
Ь	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$									
_										
С	If "Yes," enter name and address of the	third party								
	Name ▶									
	Address 🏲									
16	Gaming manager information									
	Name 🟲									
	Gaming manager compensation > \$									
	Description of services provided •									
			<u>_</u>							
	·	Employee	Independent contractor							
17	Mandatory distributions	- I	bla diskubishing form bla manning managed to							
а			ble distributions from the gaming proceeds to							
			Yes No							
b			istributed to other exempt organizations or spent							
Day	in the organization's own exempt activity To the organization's own exempt activity To the organization's own exempt activity To the organization's own exempt activity The organization of the organizati		planations required by Part I, line 2b, columns (iii) and (v), and							
Fal		b, 15c, 16, and 17	blanations required by Part 1, line 2b, columns (iii) and (v), and b, as applicable. Also complete this part to provide any							
	Return Reference	-	Explanation							

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

DLN: 93493098008075

OMB No 1545-0047

Schedule I (Form 990)

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

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

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

BELOIT COLLEGE						39-0808497	
Part I General Information	n on Grants and	Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization Part II Grants and Other A	vard the grants or ass ation's procedures fo ssistance to Gov	r monitoring the use overnments and O	f grant funds in the Unite		nplete if the organ	nization answered "Y	▼Yes 「N es" to
Form 990, Part IV, lin (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of gran
					other)		
2 Enter total number of section 50		=				. •	
3 Enter total number of other orga	inizations listed in th	e line 1 table				<u>.</u>	
For Paperwork Reduction Act Notice, see	the Instructions for F	orm 990.		Cat No. 50055P		Schedu	le I (Form 990) 2013

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

(a)Type of grant or assistance	(b) Number of recipients	(c)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 FINANCIAL ASSISTANCE	1277	24,745,628										
Part IV Supplemental Information	tion. Provide the info	rmation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.							
Detum Deference Evalence												

Return Reference Explanation

PART I, LINE 2 GRANTS ARE AWARDED IN THE FORM OF FINANCIAL ASSISTANCE TO WARDS THE PAYMENT OF TUITION AND FEES IN WHICH CASE THE GRANT AMOUNTS ARE APPLIED DIRECTLY TO THE STUDENT'S ACCOUNT OTHER GRANTS ARE AWARDED FOR VARIOUS REASONS TO STUDENTS, FACULTY AND STAFF FOR EDUCATIONAL OR WORK RELATED ACTIVITIES IN THESE CASES EXPENSE VERIFICATION IS

REQUIRED IN THE FORM OF RECEIPTS AND OTHER APPROPRIATE DOCUMENTATION

Schedule I (Form 990) 2013

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

DLN: 93493098008075

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization BELOIT COLLEGE

Employer identification number

39-0808497 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 directors, trustees, officers, including 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 $\overline{\mathbf{v}}$ Written employment contract Independent compensation consultant 굣 Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations 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 Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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 The organization? Νo 5b Νo Any related organization? 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 The organization? 6a Νo Any related organization? 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 7 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 ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	incentive i renortanie i		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)DR ANN DAVIES PROVOST & DEAN OF THE COLL	(i) (ii)	163,487 0	0 0	0	16,287 0	5,107 0	184,881 0	0	
(2)DR H SCOTT BIERMAN PRESIDENT	(i) (ii)	390,938 0	39,000 0	5,000 0	25,500 0	9,276 0	469,71 4 0	0	
(3)MR R JEFF PUCKETT VP EXTERNAL AFFAIRS	(i) (ii)	235,878 0	0	0	24,169 0	11,074 0	271,121 0	0	
(4)MS NANCY BENEDICT VP ENROLLMENT	(i) (ii)	142,155 0	0 0	0	14,802 0	9,276 0	166,233 0	0	
(5)MS BETH MONTIERO EXEC DIR DEV OPER & GIFT P	(i) (ii)	138,924 0	0 0	0	14,501 0	11,074 0	164,499 0	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference	Explanation									
PART I, LINE 1A	TRAVEL FOR COMPANIONS - SPOUSAL TRAVEL IS PAID FOR BY THE COLLEGE WHEN THE SPOUSE ASSISTS THE BELOIT COLLEGE EMPLOYEE WITH THE COLLEGE BUSINESS ACTIVITIES IN PERFORMING SPECIFIC DUTIES THE ONLY SUCH SPOUSAL TRAVEL PAID FOR BY THE COLLEGE WAS THAT OF THE PRESIDENT'S SPOUSE ALL EXPENDITURES MADE BY THE COLLEGE FOR TRAVEL OF THE SPOUSE WERE ATTRIBUTABLE TO SPECIFIC DUTIES IN THE FURTHERANCE OF THE MISSION OF THE COLLEGE HOUSING ALLOWANCE OR RESIDENT FOR PERSONAL USE - AS A CONDITION OF EMPLOYMENT, THE PRESIDENT OF BELOIT COLLEGE IS REQUIRED TO RESIDE IN THE PRESIDENT'S HOUSE THE PRESIDENT'S HOUSE SERVES BOTH AS A PERSONAL RESIDENCE AS WELL AS A VENUE FOR THE CARRYING ON OF COLLEGE BUSINESS REGULARLY THE COLLEGE HAS DETERMINED THAT THE VALUE OF THE USE OF THIS PERSONAL RESIDENCE IS NOT CONSIDERED TAXABLE INCOME TO THE PRESIDENT AS PROVIDED FOR IN INTERNAL REVENUE CODE SECTION 119 CONSISTENT WITH THE USE OF THE RESIDENCE AS A VENUE FOR COLLEGE BUSINESS, A PART-TIME HOUSEKEEPER IS ASSIGNED TO CLEAN UP AND ASSISTANCE WITH SUCH USE									

Schedule J (Form 990) 2013

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

DLN: 93493098008075

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

> explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization Employer identification number

	ne of the organization LOIT COLLEGE										ployerid -08084		ation nun	iber	
D	art I Bond Issues										-00004	<i>31</i>			
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	(f) Descriptio	n of purpose	(g) De	(g) Defeased		On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	WISC HEALTH & EDUCATIONAL FACILITIES AUTHORITY	39-1337855	97710BTF9	04-28-2010	28,3	94,743		REFINANCE OF 2007 SERIES BOND				Х			Х
В	WISC HEALTH & EDUCATIONAL FACILITIES AUTHORITY	39-1337855	NONEAVAIL	05-09-2014	29,7	75,000		CURRENT REFUND BONDS SSUED APRIL 28, 2010			x		х		х
Pa	art III Proceeds														
					,	4		В		С				D	
1	A mount of bonds retired				580,	000		200,000							
2															
3	Total proceeds of issue					28,394,	743	2	29,775,500						
4															
5															
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds					400,960 75,500									
8	Credit enhancement from proce														
9	Working capital expenditures fi	<u> </u>													
10	Capital expenditures from proc	eeds				1,983,	783								
11	O ther spent proceeds					26,010,	000	2	29,700,000						
12															
13	Year of substantial completion				20			201							
			_		Yes	No		Yes	No	Yes	N	lo	Yes	$-\!\!\!\!+$	No
14					Х			Х							
15	Were the bonds issued as part	of an advance refun	iding issue?			X			Х						
16	Has the final allocation of proc	eeds been made?			Х			Х							
17	Does the organization maintair allocation of proceeds?	Does the organization maintain adequate books and records to support the final allocation of proceeds?			X			x							
Pa	Private Business U	se													
						A	_	B			C			D	
	Was the organization a partner	in a partnership or	a member of an II.	C which owned	Yes	No		Yes	No	Yes	N	lo	Yes	+	No
1	managery franced by terr	Was the organization a partner in a partnership, or a member of an LLC, which owned				Х			X						

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

property financed by tax-exempt bonds?

financed property?

Χ

	Tittate basiness ose (continued)	T .			`	1			`
			4		3		Ç .		<u> </u>
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×		×				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		Х		Х				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of				_				_
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		х		x				

Part IV Arbitrage

	Arbitrage	А		В		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	
1	Has the Issuer filed Form 8038-T?		Х		Χ					
2	If "No" to line 1, did the following apply?									
a	Rebate not due yet?	Х		X						
ь	Exception to rebate?		Х		Х					
С	No rebate due?		Х		Х					
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Х	Х						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х	X						
ь	Name of provider			CHASE BANK						
С	Term of hedge			23 06300	0000000					
d	Was the hedge superintegrated?				Х					
е	Was the hedge terminated?				Х					
	Schedule K (Form 990) 2013									

Par	t IV Arbitrage (Continued)								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider								
C	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X				
7	Has the organization established written procedures to monitor the requirements of section 148?	×		x					
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

DLN: 93493098008075

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

Noncash Contributions

► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Part I Types of Property			39	-0808497			
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	Method of noncash contr			nts
1 Art—Works of art	Х	5		NO VALUE ASS	IGNED		
2 Art—Historical treasures .							
3 Art—Fractional interests							
Books and publications	X			NO VALUE ASS	IGNED		
Clothing and household							
goods							
Cars and other vehicles							
Boats and planes							
Intellectual property							
Securities—Publicly traded .	Х	40	1,311,993	COST OR MARK	ET		
Securities—Closely held stock .							
L Securities—Partnership, LLC, or trust interests							
2 Securities—Miscellaneous							
3 Qualified conservation							
contribution—Historic							
structures							
Qualified conservation							
contribution—O ther							
Real estate—Residential							
Real estate—Commercial							
Collectibles	X	5		NO VALUE ASS	ICNED		
Food inventory	X	1		NO VALUE ASS			
Drugs and medical supplies .				NO VALUE ASS	IGNED		
. Taxidermy							
! Historical artifacts							
S Scientific specimens							
Archeological artifacts	X	8		NO VALUE ASS	IGNED		
other ► (X	1	46.131	OTHER			
OMPUTER SOFT)			,				
other ► ()							
7 Other ▶()							
3 Other►()							
Number of Forms 8283 received by	_	=	1 34				
for which the organization completed	Form 8283,	Part IV, Donee Acknowled	dgement 29	"	-	1	
On D			and a such and the Department of the	*h		Yes	No
Oa During the year, did the organization							
it must hold for at least three years				to be used			_
for exempt purposes for the entire h					30a		No
b If "Yes," describe the arrangement	ın Part II						
$oldsymbol{L}$ Does the organization have a gift ac	ceptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
a Does the organization hire or use th	ırd partıes or	related organizations to s	olicit, process, or sell noi	ncash			
contributions?					32a	Yes	
b If "Yes," describe in Part II							
If the organization did not report an	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked.			
december in Death II		(1), 111 117, 117	, (a)			- 1	

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.			
Return Reference	Explanation		
,	THE COLLEGE, AS A MATTER OF ACCOUNTING POLICY, DOES NOT RECORD REVENUE FOR WORKS OF ART ADDED TO ITS COLLECTIONS, AS ALLOWED UNDER SFAS 116 FURTHERMORE, ITEMS USED AS PROPS IN THE COLLEGE'S THEATER PROGRAM AND USED BOOKS DONATED TO THE COLLEGE'S LIBRARY ARE NOT REPORTED AS REVENUE FOR FINANCIAL STATEMENT PURPOSES		

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493098008075

OMB No 1545-0047

2013

Open to Public
Inspection

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Return Reference	Explanation
FORM 990,	BELOIT COLLEGE ENGAGES THE INTELLIGENCE, IMAGINATION, AND CURIOSITY OF ITS STUDENTS, EMPOWERING THEM TO
PART III, LINE	LEAD FULFILLING LIVES MARKED BY HIGH ACHIEVEMENT, PERSONAL RESPONSIBILITY, AND PUBLIC CONTRIBUTION IN A
1	DIVERSE SOCIETY OUR EMPHASIS ON INTERNATIONAL AND INTERDISCIPLINARY PERSPECTIVES, THE INTEGRATION OF
	KNOWLEDGE WITH EXPERIENCE, AND CLOSE COLLABORATION AMONG PEERS, PROFESSORS, AND STAFF EQUIPS OUR
	STUDENTS TO APPROACH THE COMPLEX PROBLEMS OF THE WORLD ETHICALLY AND THOUGHTFULLY

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE OF THE BELOIT COLLEGE BOARD OF TRUSTEES ACTS AS THE COMPENSATION COMMITTEE. THERE ARE 5 MEMBERS OF THIS COMMITTEE, THE CHAIR OF THE BOARD, THE CHAIR OF THE BUDGET COMMITTEE, AND 3 MEMBERS ELECTED FROM THE FULL BOARD. THE PROCESS USED TO DETERMINE THE COMPENSATION OF THE PRESIDENT AND TO REVIEW THE COMPENSATION OF THE OFFICERS OF THE COLLEGE IS DETAILED BELOW. 1 MARKET DATA FROM COMPENSATION SURVEYS OF MEMBER COLLEGES OF THE ASSOCIATED COLLEGES OF THE MIDWEST/GREAT LAKES COLLEGES ASSOCIATION (ACM/GLCA), MEMBER COLLEGES OF THE WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES (WAICU), AND TWENTY COMPARATIVE NATIONAL RESIDENTIAL LIBERAL ARTS COLLEGES BELOIT USES FOR A VARIETY OF PURPOSES ARE USED TO COMPARE THE SALARIES, BENEFITS AND OTHER PERQUISITES OF THE PRESIDENT AND OFFICERS OF THE COLLEGE 2. THE EXECUTIVE COMMITTEE USES THE MARKET DATA AS PART OF THEIR DECISION PROCESS. PRIOR TO THE SPRING BOARD OF TRUSTEE MEETING THE EXECUTIVE COMMITTEE IS ALSO PROVIDED WITH AN ANNUAL REPORT AND REFLECTION ON THE PREVIOUS YEAR AUTHORED BY THE PRESIDENT. THIS IS DISCUSSED BY THE EXECUTIVE COMMITTEE WITH THE PRESIDENT AND IN EXECUTIVE SESSION AT THEIR SPRING MEETING. FOLLOWING THIS DISCUSSION, THE EXECUTIVE COMMITTEE WITH THE PRESIDENT AND IN EXECUTIVE SESSION AT THEIR SPRING MEETING. FOLLOWING THIS DISCUSSION, THE EXECUTIVE COMMITTEE DECIDES ON A COMPENSATION PROPOSAL TO BRING TO THE FULL BOARD 3 THE EXECUTIVE COMMITTEE TAKES THEIR RECOMMENDATION REGARDING. THE PRESIDENT'S COMPENSATION FOR REVIEW AND CONSIDERATION TO THE FULL BOARD ALSO AT THE SPRING BOARD OF TRUSTEE MEETING AT THIS MEETING, THE EXECUTIVE COMMITTEE SUMMARIZES THE PRESIDENT'S ANNUAL REPORT, THEIR OWN DELIBERATIONS, AND THE ARGUMENT FOR THE COMPENSATION PRECAMENTS THE DECISION FOR THE NEXT FISCAL YEAR.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	BELOIT COLLEGE'S FORM 990 WAS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM A DRAFT OF THE FORM 990 WAS PROVIDED ELECTRONICALLY TO THE BOARD OF TRUSTEES AUDIT COMMITTEE FOR REVIEW AT THE APRIL AUDIT COMMITTEE MEETING THE APRIL MEETING AGENDA INCLUDED DISCUSSION OF QUESTIONS OR CONCERNS REGARDING THE INFORMATION CONTAINED IN THE FORM 990 ONCE ALL ISSUES AND QUESTIONS REGARDING THE RETURN WERE RESOLVED, THE FORM 990 WAS FINALIZED TO INCORPORATE ANY NECESSARY CHANGES AN UPDATED VERSION WAS PROVIDED ELECTRONICALLY TO THE CONTROLLER TO DISTRIBUTE TO THE AUDIT COMMITTEE FOR ADDITIONAL MATTERS TO BE ADDRESSED AND RESOLVED THE FINALIZED VERSION OF FORM 990 WAS FILED WITH THE IRS ON OR BEFORE APRIL 15TH FILING DEADLINE TO RESPECT THE WISHES OF CERTAIN DONORS TO REMAIN ANONY MOUS, WE HAVE CHOSEN NOT TO PROVIDE A FULL DISCLOSURE COPY OF THE 990 TO THE FULL GOVERNING BOARD OF BELOIT COLLEGE THE BOARD DOES, HOWEVER, RECEIVE A FULL REPORT LESS THE DONOR NAMES AND ADDRESSES TO REVIEW A FULL DISCLOSURE COPY, WITH ALL DONOR INFORMATION, WILL BE FILED WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	TRUSTEES AND OFFICERS ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST DOCUMENTS ANNUALLY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COLLEGE PARTICIPATES ANNUALLY IN AN OFFICER COMPENSATION SURVEY CONDUCTED BY THE WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES (WAICU), AND AN ANNUAL ADMINISTRATIVE SALARY SURVEY CONDUCTED BY THE ASSOCIATED COLLEGES OF THE MIDWEST (ACM) WITH BI-ANNUAL INCLUSION OF THE GREAT LAKES COLLEGE ASSN (GLCA) THE SURVEYS ARE REVIEWED AS A PART OF THE PROCESS FOR DETERMINING ENCUMBENT SALARY INCREASES ANNUALLY ADDITIONALLY, THE SURVEYS AND INDEPENDENT COMPARABILITY DATA FROM THE WAICU AND ACWIGLCA SCHOOLS WERE UTILIZED TO DETERMINE COMPENSATION FOR HIRING EXECUTIVES, OFFICERS AND KEY STAFF TO FILL VACANCIES

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S WEB SITE. OTHER DOCUMENTS MAY BE MADE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 505,156 CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS 214,793 INTEREST RATE SWAP GAIN 729,511