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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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 cal applicable	endar year, or tax year beginning C Name of organization MILLIGAN COLLEGE INC	o6-01-2013 , 2013, and ending 05-	31-2014	D Emplo	yer ide	entification number
☐ Add	dress c	hange	Doing Business As			62-0	53575	55
∏ Na	me cha	ange	Doing business as					
Init	tıal retu	nm		all is not delivered to street address) Room/s	uite	E Teleph	one nur	mber
Tei	rmınate	ed	P O BOX 750			(423)461-	8686
☐ Am	ended	return	City or town, state or province, coun MILLIGAN COLLEGE, TN 37682	try, and ZIP or foreign postal code		(423)	701-	0000
Г Арі	plicatio	n pending	MILLIGAN COLLEGE, IN 37002			G Gross	receipts	\$ 41,596,456
			F Name and address of prin		H(a)	s this a group	retur	n for
			JACQUELINE R STEADMAN 1 BLOWERS BOULEVARD	I		subordinates?		┌ Yes 🗸 No
			MILLIGAN COLLEGE, TN 3	7682	Н(b)	Are all subord	ınates	┌ Yes ┌ No
						ncluded?		
I Ta	x-exer	mpt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527	-	If "No," attach	n a list	(see instructions)
J W	ebsit	e:► WW	W MILLIGAN EDU		H(c)	Group exemp	tion nu	ımber ►
K For	m of or	rganızatıon	Corporation Trust Association	Other ►	L Yea	r of formation 18	882 N	M State of legal domicile TN
Pa	rt I	Sum	ımary		<u>'</u>		·	-
	1	Briefly d	escribe the organization's missio	n or most significant activities				
		THE OR	GANIZATION IS A CHRISTIAN	LIBERAL ARTS COLLEGE				
2								
Ĭ								
Ĕ								
至	2	Check th	าเร box দ rif the organization dis	scontinued its operations or disposed	of more tl	nan 25% of its	net a	ssets
Governance								1
2 6				ng body (Part VI, line 1a)			3	27
Activities &			·	of the governing body (Part VI, line 1b	•		4	21
톶				calendar year 2013 (Part V, line 2a)			5	845
¥	1			ecessary)			6	142.474
				art VIII, column (C), line 12			7a 7b	142,474
	"	ivet unite	Tated business taxable income in	om r om r 990-1, me 34		Prior Year	 /b	Current Year
	8	Contri	butions and grants (Part VIII, lir	20.1h)		3,710,	995	8,933,392
₽	9		am service revenue (Part VIII, III	·	29,607,		31,653,445	
Ravenu	10			(A), lines 3, 4, and 7d)		866,		1,009,619
2	11		· · · · · · · · · · · · · · · · · · ·	lines 5, 6d, 8c, 9c, 10c, and 11e)		/	0	0
	12		, , , , , , , , , , , , , , , , , , , ,	(must equal Part VIII, column (A), lii	ne 📉			
						34,185,		41,596,456
	13			IX, column (A), lines 1-3)		9,814,		11,042,169
	14			X, column (A), line 4)			0	0
88	15	5-10)		e benefits (Part IX, column (A), lines		11,751,	301	12,101,809
Expenses	16a	•	, ssional fundraising fees (Part IX,	column (A), line 11e)			0	0
훘	Ь		indraising expenses (Part IX, column (D)					
Ш	17			ines 11a-11d, 11f-24e)		9,340,	785	10,356,508
	18	Total	expenses Add lines 13-17 (mus	st equal Part IX, column (A), line 25)		30,906,	520	33,500,486
	19	Reven	ue less expenses Subtract line	18 from line 12		3,278,	551	8,095,970
8%					Begi	nning of Curre	ent	End of Year
Par Tar		-			<u> </u>	Year		
Not Assets or Fund Balances	20		assets (Part X, line 16)		<u> </u>	71,395,		80,560,749
35 25	21		ssets or fund balances Subtract		-	15,480, 55,914,		14,549,949
	22 11 111		nature Block	illine 21 from line 20		55,914,	950	86,010,800
Unde my k	r pen nowle	alties of dge and	perjury, I declare that I have exa	mined this return, including accompa				
						12045 00 00		
Sigr		**** Signa	*** ature of officer			2015-03-07 Date		
Sigr Her			QUELINE R STEADMAN VP FOR BUSINESS	S AND FINANCE				
			e or print name and title	, AND I MANUEL				
			Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	2024
Paid	d	<u> </u>	CHAD KISNER		2015-03-07	self-employed	•	
	pare		Firm's name F BLACKBURN CHILDERS	& STEMBALL PEC		Firm's EIN 🕨 6	·z-ub4/· 	
	On		Firm's address 🕨 801B SUNSET DRIVE			Phone no (423	3) 282-4	4511

JOHNSON CITY, TN 37604

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

✓ Yes ☐ No

4e Total program service expenses ►

26,141,894

Part IV	Checkli	st of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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^{\bullet}	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νo
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e		No
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
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	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
16	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? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? 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		No
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
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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		No
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 $2 \cdot$	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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 990	(2013)

аı	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•	 Yes	. J No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,836		163	140
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
		1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
I	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 account)?	4a	1 00	N
				- ' '
	If "Yes," enter the name of the foreign country 🕨			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			N
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ı	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h	Yes	
	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	1	
	Sponsoring organizations maintaining donor advised funds.			
		9a		
	Did the organization make any taxable distributions under section 4966?			
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)....................................		1	
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand	ļ		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
9	ection B. Policies (This Section B requests information about policies not required by the Internal R		·a Cad	- \
36	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>event</u>	ie coa	e.)
36	ection b. Policies (This Section B requests information about policies not required by the Thermal R	evenu	Yes	e.) No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶JACQUELINE R STEADMAN 1 BLOWERS BOULEVARD MILLIGAN COLLEGE, TN 37682 (423) 461-8686

Form 990	(2013	
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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 d r/tru	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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	c	(F) Estima mount of compens from t	other ation ne
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizatio relate organiza	d
1b	Sub-Total					<u> </u>		>					
c	Total from continuation sheet	s to Part VII, S	ection A	٠.			•	•					
d 	Total (add lines 1b and 1c) . Total number of individuals (in	cluding but not	limited	to the		licto	d abov	₽- 	644,906		ם		73,476
2	\$100,000 of reportable compe						u abov	e) w	no received more tr	la II			
										_		Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee,	or highest compen	sated employee			N. s
4	For any individual listed on line					-	nsatio	- n and	d other compensation	on from the	3		No_
	organization and related organ										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	. 33	No No
	ation D. Indonesias Co												
1	ection B. Independent Co Complete this table for your five	ve highest comp											
	compensation from the organiz	zation Report co	ompens	ation	fort	the o	alend	arye	ar ending with or wi	thin the organization	n's t	ax year	1

(A) Name and business address	(B) Description of services	(C) Compensation
BURLESON CONSTRUCTION COMPANY P O BOX 1735 JOHNSON CITY TN 37605	CONSTRUCTION SERVICES	2,203,462
PIONEER CATERERS INC 303 GLENROSE AVENUE NASHVILLE TN 37210	CAFETERIA SERVICES	1,250,897
THOMAS CONSTRUCTION COMPANY INC 9 WESLEY COURT JOHNSON CITY TN 37601	CONSTRUCTION SERVICES	538,928
BEESON LUSK AND STREET INC P O BOX 1909 JOHNSON CITY TN 37605	ARCHITECT SERVICES	129,342
APPALACHIAN COLLEGE ASSOCIATION 210 CENTER STREET BEREA KY 40403	LIBRARY SERVICES	125,509

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part V	/++1	Statement of	of Revenue ule O contains a respo	nco or note to any liv	o in this Part VIII			
		Check if Sched	uie O concants a respo	inse of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fro tax under sections 512-514
10	1a	Federated cam	paigns 1a					312 311
nts	ь	Membership du	ues 1b					
Gra	c	Fundraising ev						
F. A.	d	Related organiz						
ĭia ĭia		Government grant						
Contributions, Giffs, Grants and Other Similar Amounts	e							
utie er	f	All other contributions in the similar amounts in	ons, gifts, grants, and 1f ot included above	8,933,392				
를	g	Noncash contributi 1a-1f \$	ions included in lines	2,848,507			İ	
Coma	h	Total. Add line:	s 1 a - 1 f		8,933,392			
				Business Code				
anu.	2a	TUITION AND FEES	S	611710	26,670,629	26,670,629		
es Se	ь	AUXILIARY ENTER	PRISES	611710	4,122,132	4,122,132		
Se F	c	OTHER INCOME		611710	364,815		142,474	222,
Program Serwce Revenue	d	SUMMER CAMPS		611710	295,622	295,622		
	e	STUDENT AID		611710	108,177	108,177		
∑. 26	f	All other progra	am service revenue		92,070	92,070		
Ě	g	Total. Add line:	s 2a-2f		31,653,445			
	3	Investment inc	ome (ıncludıng dıvıder	nds, interest,	1,009,619			1,009,
	4		ar amounts)		1,003,013			1,003,
	5	Royalties .		•				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
		Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other						
		than inventory						
	b	Less cost or other basis and						
	c	sales expenses Gaın or (loss)						
	d	Net gain or (los	ss)					
	8a		from fundraising					
Other Revenue		events (not inc	iruaing 					
⊕ >•		of contributions See Part IV, lir	s reported on line 1c)					
Ţ.		See rare iv, iii	a					
the	ь	Less direct ex	penses b					
0	C		(loss) from fundraising	events 🛌				
	9a		from gaming activities ne 19					
		,	а					
	ь		penses b					
			(loss) from gaming act	ivities				
	10a	Gross sales of returns and allo						
			а					
	Ь		oods sold b	L _.				
	<u>c</u>	Net income or Miscellaneou	(loss) from sales of inv	entory				
	11a	macenaneou	3 Nevellue	Dualifeas Code				
	ь							
	С							
	d	All other reven	ue					
	e	Total. Add line	s 11a-11d	🕨				
	12	Total revenue.	See Instructions .		41,596,456	31,288,630	142,474	1,231,
					71,330,430	51,200,030	174,414	1,231,

Grants and other assistance to individuals in the

Compensation of current officers, directors, trustees, and

Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .

and 403(b) employer contributions) Other employee benefits

Pension plan accruals and contributions (include section 401(k)

Grants and other assistance to governments, organizations, and individuals outside the United

United States See Part IV, line 22

States See Part IV, lines 15 and 16

Benefits paid to or for members

key employees .

10

11

12 13

14

15

16

17

18

19

20

21

22

23

24

b

C d

25

26

Other salaries and wages

166,961

396,025

19,456

39,404

43,068

9,311

10,509,824

523,034

48,964

7,176,338

349,841

667,645

453,127

507,098

1,821,132

55,027

179,613

178,110

9,311

10,509,824

523,034

723,023

9,393,495

424,324

886,662

674,305

10111 330 (2013)				raye 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns A	II other organizat	ions must comp	lete column (A)	
Check if Schedule O contains a response or note to any line in this	s Part IX			
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0.211	0.211		

Part X Balance Sheet

Pali	't X	Check if Schedule O contains a response or note to any line in	thıs P	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			4,557,452	1	4,966,629
	2	Savings and temporary cash investments			6,650,047	2	4,733,703
	3	Pledges and grants receivable, net			478,420	3	3,451,431
	4	Accounts receivable, net			1,015,581	4	1,067,840
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	of		5		
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	buting employers		6		
82	7	Notes and loans receivable, net			647,982	H - H	934,666
ď	8	Inventories for sale or use			221,304	H	231,425
	9	Prepaid expenses and deferred charges			53,962	H	93,825
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		58,544,277	,		
	ь	Less accumulated depreciation	10b	22,011,753	31,508,127	10c	36,532,524
	11	Investments—publicly traded securities	<u> </u>			11	
	12	Investments—other securities See Part IV, line 11			26,188,252	12	28,400,131
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			74,811	15	148,575
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			71,395,938	16	80,560,749
	17	Accounts payable and accrued expenses			600,425	17	77,352
	18	Grants payable				18	
	19	Deferred revenue			791,842	19	740,484
	20	Tax-exempt bond liabilities			11,766,743	20	11,235,080
φ.	21	Escrow or custodial account liability Complete Part IV of Sch		21	<u> </u>		
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	ors, tı				
qe		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	es .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X o	f Schedule	2,321,978	25	2,497,033
	26	D			15,480,988	\vdash	14,549,949
აი ტ	26	Total liabilities. Add lines 17 through 25			13,460,966	26	14,549,949
ဋ်	27	Unrestricted net assets			27,146,319	27	29,624,261
<u>ප</u>	28	Temporarily restricted net assets	9,839,402	-	16,461,361		
	29	Permanently restricted net assets			18,929,229	\vdash	19,925,178
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.			15,525,225		10,020,
<u> </u>	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
\$ S.	32	Retained earnings, endowment, accumulated income, or other		- • • •		32	
Net /	33	Total net assets or fund balances			55,914,950		66,010,800
ž	34	Total liabilities and net assets/fund balances			71,395,938	\vdash	80,560,749
	1	rotal habilities and net assets/land balances	· ·	• •	1 1,595,936		50,300,749

Par	t XI Reconcilliation of Net Assets				-g
	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		41,5	596,456
2	Total expenses (must equal Part IX, column (A), line 25)	2		33,5	500,486
3	Revenue less expenses Subtract line 2 from line 1	3		8,0	95,970
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		55,9	914,950
5	Net unrealized gains (losses) on investments	5		2,0	25,873
6	Donated services and use of facilities	6			-
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-25,993
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		66,0	10,800
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 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 required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version:

EIN: 62-0535755

Name: MILLIGAN COLLEGE INC

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, ι an o ⁄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 trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		_,,	related organizations	
CHARLES ALLCOTT III	1 00	х		х				0	0	0	
W SCOTT KENT	1 00	×		х				0	0	0	
VICE CHAIR RONALD G DOVE JR	1 00	х		х				0	0	0	
SECRETARY WILLIAM R CLEM TREASURER	1 00	х		х				0	0	0	
THOMAS BANKS	1 00	х						0	0	0	
THOMAS J BURLESON	1 00	х						0	0	0	
MEMBER DAVID CLARK	1 00	х						0	0	0	
MEMBER HARRY E FONTAINE JR MEMBER	1 00	х						0	0	0	
JAMES FRASURE MD	1 00	х						0	0	0	
MEMBER BRENDA GREEN	1 00	х						0	0	0	
MEMBER PATRICIA GREEN	1 00	х						0	0	0	
MEMBER AT LARGE W B GREENE JR MEMBER	1 00	х						0	0	0	
DAVID HAMILTON MEMBER	1 00	х						0	0	0	
MARSHALL W HAYDEN MEMBER	1 00	х						0	0	0	
C DANNY JOHNSON MEMBER	1 00	х						0	0	0	
GREG JOHNSON MEMBER	1 00	х						0	0	0	
LEROY LAWSON MEMBER	1 00	х						0	0	0	
JOHN MEDING MD MEMBER AT LARGE	1 00	х						0	0	0	
CAMERON PERRY MEMBER	1 00	х						0	0	0	
RICHARD W PHILLIPS MEMBER	1 00	х						0	0	0	
JO ANN RICHARDSON MEMBER	1 00	х						0	0	0	
J DONALD SAMS MEMBER	1 00	х						0	0	0	
RONALD F SEWELL MEMBER	1 00	х						0	0	0	
MARVIN SWINEY MEMBER	1 00	х						0	0	0	
MARK H WEBB MEMBER AT LARGE	1 00	х						0	0	0	
	_							l		1	

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

	Compensated Employees, and Independent Contractors											
Page	(A) Name and Title	hours per week (list any hours	more the perso	ion (nan o n is b	do no ne b ooth ctor,	ox, ι an o /trus	inless fficer tee)		compensation from the organization (W-	compensation from related organizations (W-	Estimated amount of other compensation from the	
MEMBER CALVEN LWISON IR 100 X		organizations below	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M15C)	related	
CAMPIL MUSISON RR		1 00	х						0	0	0	
MEMBER		1.00					<u> </u>					
TAMINY MEDICENCE TRUSTER ROTATION 100		1 00	х						0	0	0	
RUSIFE ROTATION		1.00										
MARIES EARL GREEN			×						0	0	0	
TRUSTER FORTATION DAMPO HAMIN 100 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1 00										
DAVID D HAMLIN	TRUSTEE ROTATION		X						0	0	0	
TRUSTER PROTATION DENINY MAYES 100 X 100		1 00										
TRUSTEE ROTATION	TRUSTEE ROTATION		×						0	0	0	
TRUSTER ROTATION	DENNY MAYES	1 00							0	0	0	
TRUSTEE ROTATION			^						Ů	Ů		
TRUSTEE ENERTIUS	DANIEL W MCMAHAN	1 00	×						0	0	0	
TRUSTEE ROTATION												
AMES R RICE		1 00	×						0	0	0	
TRUSTEE ROTATION		1.00					-					
DENNIS A BRATTON		100	×						0	0	0	
TRUSTEE EMERITUS		1.00										
W EDWARD FINE			×						0	0	0	
TRUSTEE EMERITUS OMER HAMILIN TRUSTEE EMERITUS N JEANNE STARKEY	1 00											
X	TRUSTEE EMERITUS		×						0	0	0	
TRUSTEE EMERITUS DONALD B MARSHALL 1 00	OMER HAMLIN	1 00	,,									
X	TRUSTEE EMERITUS		×						0	0	0	
TRUSTEE EMERITUS	DONALD B MARSHALL	1 00	v						0	0	0	
X									Ů	Ŭ		
WILLIAM B GREER	N JEANNE STARKEY	1 00	×						0	0	0	
Name												
R GARLAND YOUNG		40 00			х				187,530	0	21,363	
X		40.00	-									
MARK P FOX 40 00 X 91,230 0 6,428 VP FOR STUDENT DEVELOPMNT 40 00 X 101,796 0 7,199 VP FOR BUSINESS AND FINANC 40 00 X 90,050 0 9,567 VP OF MARKETING, ENROLLMEN 40 00 X 90,050 0 9,567 JACK SIMPSON 40 00 X 89,495 0 15,586		40 00			х				84,805	0	13,333	
VP FOR STUDENT DEVELOPMNT X 91,230 0 6,428 JACQUELINE R STEADMAN 40 00 X 101,796 0 7,199 VP FOR BUSINESS AND FINANC 40 00 X 90,050 0 9,567 VP OF MARKETING, ENROLLMEN X 90,050 0 9,567 JACK SIMPSON 40 00 X 89,495 0 15,586		40 00										
JACQUELINE R STEADMAN 40 00 X 101,796 0 7,199 VP FOR BUSINESS AND FINANC 40 00 X 90,050 0 9,567 VP OF MARKETING, ENROLLMEN X 90,050 0 9,567 JACK SIMPSON 40 00 X 89,495 0 15,586	VP FOR STUDENT DEVELOPMENT				Х				91,230	0	6,428	
VP FOR BUSINESS AND FINANC 40 00 X 90,050 0 9,567 VP OF MARKETING, ENROLLMEN 40 00 X 89,495 0 15,586		40 00										
VP OF MARKETING, ENROLLMEN X 90,050 0 9,567 JACK SIMPSON 40 00 X 89,495 0 15,586	VP FOR BUSINESS AND FINANC				X				101,796	0	7,199	
VP OF MARKETING, ENROLLMEN 40 00 X 89,495 0 15,586		40 00			Ţ				00.050	^	0.567	
X 89,495 0 15,586	VP OF MARKETING, ENROLLMEN								90,050	0	9,56/	
	JACK SIMPSON	40 00]		×				89 495		15 586	
	VP FOR INSTITUTIONAL ADVAN	_			<u> </u>				03,133		13,350	

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As Filed Data -

DLN: 93493066004165

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.

2013

Open to Public Inspection

Name	of	the	orga	niza	tio
MILLIGA	AN (COLLE	GE IN	IC.	

Employer identification number

62-0535755

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganization	is must com	nlete this	part.) See i			
				e foundation becaus						nou double	<u> </u>	
1	Ĕ		· ·	on of churches, or as	· ·			•	•			
2	Ē		· ·	in section 170(b)(1								
3	Ē			perative hospital se			•	on 170(b)(1	D(A)(iii).			
4	Ė	•		n organization operat	=					(1)(A)(iii).	Enter the	
-	•			ty, and state			p			(-)()		
5	\sqcap	An orga	ınızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)							
6	Γ	A feder	al, state, or	local government or	governmen	tal unıt des	cribed in sec	tion 170(b)((1)(A)(v).			
7	▽	An orga	inization tha	at normally receives	a substanti	al part of its	s support fror	n a governm	ental unit or	from the ger	eral publ	ıc
	_			n 170(b)(1)(A)(vi).	•	•						
8	<u> </u>		•	described in section			•	•				
9		=		at normally receives	-		* *		•	-	-	SS
		receipts	s from activ	ities related to its e	xempt functi	ons—subje	ct to certain	exceptions,	and (2) no m	ore than 33:	L/3 % of	
		ıts supp	ort from gr	oss investment inco	me and unre	lated busin	ess taxable ı	ncome (less	section 511	tax) from b	usinesses	5
		acquire	d by the org	janization after June	30,1975	See section	509(a)(2).(Complete Pa	art III)			
10	Γ			ganized and operated ganized and operated								
		one or r the box a	nore public that descri Type I	y supported organız bes the type of supp b Type II c	ations desci orting organ Type II	ribed in sec nization and II - Functio	tion 509(a)(1 complete lin nally integrat	l) or sectior es 11e thro ed d	n 509(a)(2) S ugh 11h Type III - N	See section ! on-function	509(a)(3) ally integ	.Check rated
e	Γ	other th		ox, I certify that the on managers and ot								
f				received a written de	etermination	from the I	RS that it is a	Type I, Ty	pe II, or Type	III support	ing organ	ıızatıon,
		check t										Γ
g			,	2006, has the organi	zation acce	pted any gi	ft or contribut	tion from an	y of the			
			g persons?	rectly or indirectly o	controls auth	aer alone or	together with	n nersons de	scribed in (ii	`	Yes	No
				governing body of th			_	i persons de	escribed iii (ii		g(i)	110
		• •	·	er of a person descri		_	JII ·				y(ii)	+
				•			a boyo?					+
L				lled entity of a perso						119	(iii)	
h		Provide	the following	ng information about	the Support	eu organiza	ition(s)					
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A	mount of
	suppo		(11) = 111	organization	organizat		the organ		organiza			netary
	rganiz			(described on	coľ (i) lıs		ın col (i)		col (i) or			pport
				lınes 1- 9 above	your gove	_	suppo	rt?	ın the U	JS?		
				or IRC section	document?							
				(see instructions))							_	
				macructions))	Yes	No	Yes	No	Yes	No		
Tota	I					1	1		1	1	1	

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 4,846,326 4,920,712 7,571,980 3,710,995 8,933,392 29,983,405 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4,846,326 4,920,712 7,571,980 3,710,995 8,933,392 29,983,405 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 14,123,167 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 15,860,238 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 4,846,326 4,920,712 7,571,980 3,710,995 8,933,392 29,983,405 Amounts from line 4 Gross income from interest, dividends, payments received on 378,184 429,404 619,812 866,631 1,009,619 securities loans, rents, royalties 3,303,650 and income from similar sources Net income from unrelated business activities, whether or 80,000 142,474 222,474 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 33,509,529 through 10) Gross receipts from related activities, etc (see instructions) 12 12 140,081,670 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here $\ldots\ldots\ldots\ldots\ldots$ Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 47 330 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

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						
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	(1) 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 **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test								
Return Reference	Explanation							
SCHEDULE A, PART I, LINES 2 AND 7	MILLIGAN COLLEGE RECEIVED AN IRS DETERMINATION LETTER APRIL 3, 1947 STATING THAT THE ORGANIZATION WAS RECOGNIZED AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ADDITIONALLY, THE ORGANIZATION WAS ALSO DETERMINTED NOT TO BE A PRIVATE FOUNDATION AS DEFINED IN SECTION 509(A) OF THE CODE BECAUSE IT WAS AN ORGANIZATION DESCRIBED IN SECTION 509(A)(1) AND SECTION 170(B)(1)(A)(II), WHICH IS IDENTIFIED IN SCHEDULE A, PART I, LINE 2 AS A SCHOOL IT IS AN EDUCATIONAL ORGANIZATION WHICH NORMALLY MAINTAINS A REGULAR FACULTY AND CURRICULUM AND NORMALLY HAS A REGULARLY ENROLLED BODY OF PUPILS OR STUDENTS IN ATTENDANCE AT THE PLACE WHERE ITS EDUCATIONAL ACTIVITIES ARE REGULARLY CARRIED ON PER THE 2013 INSTRUCTIONS FOR SCHEDULE B, SCHEDULE OF CONTRIBUTORS, THE INTERNAL REVNEUE SERVICE HAS CLARIFIED THAT IN ORDER FOR THE COLLEGE TO REPORT ITS CONTRIBUTIONS UNDER THE SPECIAL RULE, THE ORGANIZATION MUST NOW CHECK BOX 7 OF SCHEDULE A, PART I, AND COMPLETE SCHEDULE A, PART II, SUPPORT SCHEDULE FOR ORGANIZATIONS DESCRIBED IN SECTIONS 170(B)(1)(A)(IV) AND 170(B)(1)(A)(VI)							

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493066004165

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

	me of the organization LIGAN COLLEGE INC		Emp	Employer identification number					
_				0535755					
Ρē	organizations Maintaining Donor Ad organization answered "Yes" to Form 990		unas	or Accounts. Complete if th					
	organization unoncrea record to reministra	(a) Donor advised funds		(b) Funds and other accounts					
	Total number at end of year								
<u> </u>	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
ļ	Aggregate value at end of year								
;	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		nor adv	rised Yes No					
i	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?								
Pa	rt II Conservation Easements. Complete i	f the organization answered "Yes" t	to Forr	m 990, Part IV, line 7.					
!	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of a	certifie	rically important land area ed historic structure m of a conservation					
	easement on the last day of the tax year			Held at the End of the Year					
a	Total number of conservation easements			neid at the End of the Year					
a b	Total acreage restricted by conservation easements		2b						
c	Number of conservation easements on a certified hist	toric structure included in (a)	2c						
d	Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/17/06, and not on a	2d						
}	Number of conservation easements modified, transfer	rred, released, extinguished, or terminat	ed by th	he organization during					
	the tax year 🛌								
ļ	Number of states where property subject to conserva	tion easement is located .							
;	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	idling of	f violations, and Yes No					
,	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ments (during the year					
	A mount of expenses incurred in monitoring, inspectin	age and enforcing conservation easement	c durin	og the year					
•	► \$	ig, and emorting conservation easement	.s uuiiii	ig the year					
3	Does each conservation easement reported on line 21 and section 170(h)(4)(B)(II)?	(d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)					
)	In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financia							
ar	Complete if the organization answered "		or Ot	ther Similar Assets.					
.a	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education,	orrese	earch in furtherance of public					
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	ets held for public exhibition, education,							
	(i) Revenues included in Form 990, Part VIII, line 1			* \$					
	(ii) Assets included in Form 990, Part X			▶ \$					
!	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS			ncial gain, provide the					
а	Revenues included in Form 990, Part VIII, line 1			► \$					
Ь	Assets included in Form 990, Part X			<u></u>					
	7,000co meradea mirorini 200,1 altiA			r Ψ					

Part	•••• Organizations Maintaining Co	llections of Art,	His	torio	al Treas	<u>sures, or O</u>	<u>the</u>	<u>r Similar As</u>	sets (d	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	neck a	ny of the f	following that a	re a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan or e	xchange progr	ams			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n hov	w they	further th	e organization	's ex	empt purpose i	n	
5	During the year, did the organization solicit								_	_
Do	assets to be sold to raise funds rather than t	·							Yes	│ No
Раг	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ion answered	J Y	es to Form s	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ns or other ass	ets n		Yes	
b	If "Yes," explain the arrangement in Part XI	I and complete the f	follow	ving ta	ble	_				
								An	nount	
C	Beginning balance						1 c			
d	Additions during the year					<u> </u>	1d			
e	Distributions during the year					<u></u>	1e			
f	Ending balance					L	1 f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I Check here if the	expla	anatıo	n has bee	n provided in F	art >	KIII		Γ
Pa	rt V Endowment Funds. Complete									
_		(a)Current year	(b)	Prior ye		Two years back	_		(e)Four	years back
1a	Beginning of year balance	24,581,881			75,559	21,587,356		15,862,911		12,715,413
b	Contributions	2,979,229		1,1	55,781	721,994		2,316,476		1,726,463
С	Net investment earnings, gains, and losses	975,959		3,4	75,667	-1,463,516		3,634,060		1,474,982
d	Grants or scholarships	-826,081		-6	25,126	-270,275		-226,091		-53,947
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	27,710,988		24,5	81,881	20,575,559		21,587,356		15,862,911
2	Provide the estimated percentage of the cur	rent year end balanc	e (lın	e 1g,	column (a)) held as				
а	Board designated or quasi-endowment ►	0 470 %								
b	Permanent endowment ► 71 630 %									
c	Temporarily restricted endowment > 27 The percentages in lines 2a, 2b, and 2c sho	900 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiza	tıon t	that a	re held an	d administered	for	the		
	organization by							<u> </u>	Yes	+
	(i) unrelated organizations			•			•	3a(No No
b	(ii) related organizations						٠	31		1
4	Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·					-			
Par	t VI Land, Buildings, and Equipme		he o	rganı	zatıon ar	nswered 'Yes	' to	Form 990, Pa	rt IV,	ine
	11a. See Form 990, Part X, line Description of property	10.		(a)	Cost or othe	r (b) Cost or ot	her	(c) Accumulated	(d) B	look value
	, , , , , , , , , , , , , , , , , , ,				(investment			depreciation		
1a	Land					1,648	,480		+	1,648,480
Ь	Buildings					49,928	703	17,351,87	0	32,576,833
c	Leasehold improvements									
d I	Equipment					5,274	,671	3,273,21	5	2,001,455
	Other					1,692	,423	1,386,66	7	305,756
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colu	ımn (E), line 10(d	c).)		►		36,532,524
								Schedule [(Form	990) 2013

Part VIII Investments—Other Securities. Comp See Form 990, Part X, line 12.	plete if the organization a	answered 'Yes' to For	m 990, Part IV, line 11b.			
(a) Description of security or category	(b)Book value	(c) Method of va				
(including name of security) (1)Financial derivatives		Cost or end-of-year	market value			
(2)Closely-held equity interests						
(3)Other		_				
(A) STOCKS AND MUTUAL FUNDS	27,997,899	F				
(B) CORPORATE BONDS	50,336	F				
(C) CASH AND CASH EQUIVALENTS HELD FOR LONG-						
TERM INVESTMENT	351,896	F				
Total. (Column (b) must equal Form 990. Part X. col (B) line 12)	20 400 121					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Con			orm 990. Part IV. line 11c.			
See Form 990, Part X, line 13.						
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year				
		,				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization is		Dart IV line 11d See I	Form 990 Part V June 15			
(a) Descrip		, raitiv, ille ille See i	(b) Book value			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)					
Part X Other Liabilities. Complete if the organ			ıne 11e or 11f. See			
Form 990, Part X, line 25. (a) Description of liability	(b) Book value					
1 (a) Description of Hability Federal Income taxes	(B) Book value					
ACCRUED SALARIES AND WAGES	1,045,805					
ADVANCES FROM FEDERAL GOVT FOR STUDENT	202.252					
OTHER ACCRUED LIABILITIES AND PAYABLES	902,863					
ANNUITY PAYMENT LIABILITIES	320,127					
	,					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	2,497,033					

Part XI		venue per Audited Financial Statements With Revenue po ered 'Yes' to Form 990, Part IV, line 12a.	er Ro	eturn Complete if
1 To		support per audited financial statements	1	32,563,478
2 A	mounts included on line 1 but	not on Form 990, Part VIII, line 12		
a N	et unrealized gains on investn	nents 2a 2,025,873		
b D	onated services and use of fac	cilities		
c Re	ecoveries of prior year grants	2c		
d 0	ther (Describe in Part XIII)			
e A	dd lines 2a through 2d .		2e	1,999,880
3 St	ubtract line 2e from line 1 .		3	30,563,598
4 A	mounts included on Form 990	, Part VIII, line 12, but not on line 1		
a In	nvestment expenses not inclu	ded on Form 990, Part VIII, line 7b . 4a		
b 0	ther (Describe in Part XIII)	4b 11,032,858		
c A	dd lines 4a and 4b	 	4c	11,032,858
5 To	otal revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	41,596,456
Part XI		penses per Audited Financial Statements With Expenses wered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1 To		audited financial statements	1	22,467,628
2 Ar	mounts included on line 1 but	not on Form 990, Part IX, line 25		
a Do	onated services and use of fac	:ilities		
b Pr	nor year adjustments	2b		
c 01	therlosses			
d 01	ther (Describe in Part XIII)			
e A (dd lines 2a through 2d		2e	0
3 Su	ubtract line 2e from line 1 .		3	22,467,628
4 Ar	mounts included on Form 990	, Part IX, line 25, but not on line 1:		
a In	vestment expenses not inclu	ded on Form 990, Part VIII, line 7b 4a		
b 01	ther (Describe in Part XIII)	4b 11,032,858		
c A	dd lines 4a and 4b		4 c	11,032,858
5 To	otal expenses Add lines 3 and	l 4c. (This must equal Form 990, Part I, line 18)	5	33,500,486
Part XI	III Supplemental Info	rmation		
	ine 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p		de any additional
	Return Reference	Explanation		

Return Reference	Explanation					
PART V, LINE 4	THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS FOR GENERAL USE, SCHOLARSHIPS, TECHNOLOGY, CHAIRS AND OTHER					
PART X, LINE 2	NOTE 1(L) - UNCERTAIN TAX POSITIONS THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS THE COLLEGE FOLLOWS THE FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION (FASB ASC), WHICH PROVIDES GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS AS OF MAY 31, 2014, THE COLLEGE HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COLLEGE'S FINANCIAL STATEMENTS THE COLLEGE'S POLICY IS TO RECOGNIZE INTEREST AND PENALTIES ON UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE IN THE FINANCIAL STATEMENTS NO INTEREST OR PENALTIES WERE RECORDED DURING THE YEAR ENDED MAY 31, 2014 GENERALLY, THE TAX YEARS BEFORE 2011 ARE NO LONGER SUBJECT TO EXAMINATION BY FEDERAL TAXING AUTHORITIES					
PART XI, LINE 2D - OTHER ADJUSTMENTS	NET ADJUSTMENT OF ANNUITY PAYMENT LIABILITY -25,993					
PART XI, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS OFFSETTING STUDENT TUITION AND FEES 11,032,858					
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS OFFSETTING STUDENT TUITION AND FEES 11,032,858					

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

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493066004165

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

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.

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

Open to Public Inspection

Name of the organization MILLIGAN COLLEGE INC

Employer identification number

62-0535755

Da	rt I		YES	NO
•			1.23	-110
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?	1		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
-	Statemes rights of privileges	54		110
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
e	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		1		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	- 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
_	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 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information. 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	THE COLLEGE'S RACIALLY NONDISCRIMINATORY POLICY IS PUBLICIZED THROUGH RADIO ADVERTISEMENTS, PRINT PUBLICATIONS SUCH AS THE COLLEGE CATALOG, AND FINANCIAL AID AND RELATED MATERIALS, AND ADS FOR EMPLOYMENT
SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES FINANCIAL ASSISTANCE FOR STUDENT FINANCIAL AID PROGRAMS SUCH AS THE FEDERAL PELL GRANT PROGRAM, AND MANY OTHERS FROM THE UNITED STATES DEPARTMENT OF EDUCATION THE COLLEGE ALSO RECEIVES STUDENT FINANCIAL ASSISTANCE FROM THE STATE OF TENNESSEE IN THE FORM OF VARIOUS GRANTS AND LOTTERY SCHOLARSHIPS

Schedule E (Form 990 or 990-EZ) 2013

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As Filed Data -

DLN: 93493066004165

Employer identification number

62-0535755

OMB No 1545-0047

2013

Open to Public Inspection

No

Statem

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.

Name of the organization MILLIGAN COLLEGE INC

SCHEDULE F

Department of the Treasury

Internal Revenue Service

Part I

(Form 990)

	02 0333733
General Information on Activities Outside the United States. Complete	e if the organization answered
"Yes" to Form 990, Part IV, line 14b.	_

- **2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			0
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			0

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	ganizations 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. (g) Description (a) Type of grant or (c) Number of (b) Region (d) A mount of (e) Manner of cash (f) Amount of (h) Method of assistance recipients cash grant disbursement non-cash of non-cash valuation assistance assistance (book, FMV, appraisal, other) (1) CASH SCHOLARSHIPS CENTRAL AMERICA 7 96,290 SCHOLARSHIPS ARE 0 N/A N/A FOR FOREIGN AND THE CREDITED DIRECTLY STUDENTS CARIBBEAN TO THE STUDENT'S ATTENDING THE ACCOUNT MILLIGAN COLLEGE **CAMPUSIN THE UNITED STATES** (2) CASH SCHOLARSHIPS EAST ASIA AND THE 12,000 SCHOLARSHIPS ARE 0 N/A 1 N/A CREDITED DIRECTLY FOR FOREIGN PACIFIC STUDENTS TO THE STUDENT'S ACCOUNT ATTENDING THE MILLIGAN COLLEGE CAMPUS IN THE **UNITED STATES** (3) CASH SCHOLARSHIPS EUROPE 7 119,250 SCHOLARSHIPS ARE 0 N/A N/A FOR FOREIGN KINCLUDING CREDITED DIRECTLY STUDENTS ICELAND & TO THE STUDENT'S GREENLAND) ACCOUNT ATTENDING THE MILLIGAN COLLEGE **CAMPUS IN THE** UNITED STATES (4) CASH SCHOLARSHIPS NORTH AMERICA 3 12,750 SCHOLARSHIPS ARE 0 N/A N/A FOR FOREIGN CREDITED DIRECTLY STUDENTS TO THE STUDENT'S ATTENDING THE ACCOUNT MILLIGAN COLLEGE **CAMPUS IN THE UNITED STATES** (5) CASH SCHOLARSHIPS SOUTH AMERICA 5 0 N/A 114,830 SCHOLARSHIPS ARE N/A FOR FOREIGN CREDITED DIRECTLY STUDENTS TO THE STUDENT'S ACCOUNT ATTENDING THE MILLIGAN COLLEGE **CAMPUS IN THE** UNITED STATES (6) CASH SCHOLARSHIPS SUB-SAHARAN 13 167,914 SCHOLARSHIPS ARE 0 N/A N/A AFRICA CREDITED DIRECTLY FOR FOREIGN STUDENTS TO THE STUDENT'S ATTENDING THE ACCOUNT MILLIGAN COLLEGE **CAMPUS IN THE** UNITED STATES (7) (8) (9) (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	THE COLLEGE DOES NOT GIVE ANY NON-CASH SCHOLARSHIPS SCHOLARSHIPS TO FOREIGN STUDENTS ATTE NDING THE MILLIGAN COLLEGE CAMPUS IN THE UNITED STATES ARE CREDITED DIRECTLY TO THE STUDEN T'S ACCOUNT THE COLLEGE'S PROCEDURES FOR MONITORING GRANT FUNDS FOR FOREIGN STUDENTS ATTE NDING MILLIGAN COLLEGE ARE AS FOLLOWS THE COLLEGE HAS APPOINTED DIRECTORS, WHO REPORT TO THE APPROPRIATE VICE-PRESIDENTS, OVER ALL FOREIGN SCHOLARSHIPS THESE DIRECTORS ARE CHARGE D WITH PERFORMING ALL GRANT-RELATED ACTIVITIES INCLUDING APPLICATIONS, MONITORING OF EXPENDITURES AND REPORTING DOCUMENTATION IS MADE OF ALL DIRECT AND INDIRECT PROGRAM EXPENSES A SINGLE AUDIT IS PERFORMED ANNUALLY BY THE COLLEGE'S INDEPENDENT AUDITORS

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Schedule I

(Form 990)

DLN: 93493066004165

OMB No 1545-0047

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.

Open to Public **Inspection**

► Attach to Form 990 Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

Employer identification number

MILLIGAN COLLEGE INC						62-0535755	
Part I General Information 1 Does the organization maintain the selection criteria used to a Describe in Part IV the organization part IV the org	records to substanti ward the grants or as	ate the amount of the sistance?					F Yes Γ ۱
Part II Grants and Other <i>A</i> Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 5	I 01(c)(3) and govern	l ment organizations list	ed in the line 1 table .			▶ _	
3 Enter total number of other org	anızatıons lısted ın th	ne line 1 table				<u>-</u>	
For Paperwork Reduction Act Notice, se	e the Instructions for	Form 990.		Cat No. 50055P		Schedu	le I (Form 990) 2013

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

(a)Type of grant or assistance	(b) Number of recipients	(c) 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) CASH SCHOLARSHIPS FOR DOMESTIC UNITED STATES STUDENTS ATTENDING THE MILLIGAN COLLEGE CAMPUS IN CARTER COUNTY, TENNESSEE	786	10,509,824	0	N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part IV Supplemental II	normation. Provide the information required in Part 1, line 2, Part 111, column (b), and any other additional information.
Return Reference	Explanation
	THE COLLEGE DOES NOT GIVE ANY NON-CASH SCHOLARSHIPS SCHOLARSHIPS ARE DISBURSED TO STUDENTS THROUGH CREDITING THEIR STUDENT ACCOUNTS IF THE STUDENT HAS ANY EXCESS SCHOLARSHIP FUNDS OVER THEIR CHARGES, THESE FUNDS ARE DISBURSED TO THE STUDENT BY CHECK THE COLLEGE'S PROCEDURES FOR MONITORING GRANT FUNDS IN THE US ARE AS FOLLOWS THE COLLEGE HAS APPOINTED DIRECTORS, WHO REPORT TO THE APPROPRIATE VICE PRESIDENTS, OVER ALL FEDERAL GRANT PROGRAMS THESE DIRECTORS ARE CHARGED WITH PERFORMING ALL GRANT-RELATED ACTIVITIES INCLUDING APPLICATION, MONITORING OF EXPENDITURES AND REPORTING, WITH THE EXCEPTION OF DRAW-DOWNS OF FEDERAL FUNDS DRAW-DOWNS ARE PERFORMED BY THE COLLEGE'S CONTROLLER AFTER REQUESTS ARE MADE BY THE DIRECTOR TO THE CONTROLLER THE CONTROLLER REVIEWS THE REQUESTS FOR DRAW-DOWNS, WHICH INCLUDE DOCUMENTATION OF ALL DIRECT AND INDIRECT PROGRAM EXPENSES, BEFORE MAKING THE DRAW-DOWNS A SINGLE AUDIT IS PERFORMED ANNUALLY BY THE COLLEGE'S INDEPENDENT AUDITORS

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DLN: 93493066004165

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

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

Open to Public Inspection

Name of the organization MILLIGAN COLLEGE INC

Employer identification number

62-0535755

Pa	rt I Questions Regarding Compensation			
	_		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		No
2	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	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
	(i) (ii)	187,530 0	0 0	0 0	12,636 0	8,727 0	208,893 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

Miso complete this part for any ad	dictorial información
Return Reference	Explanation
PART I, LINE 1A	FOR THE YEAR ENDED 05/31/14, THE COLLEGE PAID FOR SOME MEALS AND AIRFARE FOR THE PRESIDENT'S WIFE WHEN SHE TRAVELED WITH HIM ON COLLEGE BUSINESS THE COLLEGE RECEIVED A HOME FOR THE PRESIDENT AS A GIFT FOR THE YEAR ENDED MAY 31, 2014 THE PRESIDENT BEGAN LIVING IN THE HOME IN JANUARY, 2014 OR FOR FIVE MONTHS OF THE FISCAL YEAR THE HOME IS LOCATED IN JOHNSON CITY, TENNESSEE FOR THE YEAR ENDED MAY 31, 2014, THE COLLEGE PAID A TOTAL OF \$1,250 FOR HOUSEKEEPING SERVICES ONE TME PER MONTH AND \$1,360 FOR LAWN CARE SERVICES AT THE HOME OF THE PRESIDENT
PART I, LINE 1B	APPROVAL FOR COMPANION TRAVEL EXPENSES WAS GIVEN BY THE BOARD OF TRUSTEES AND DOCUMENTED IN THE MINUTES, WHICH ARE AVAILABLE
PART I, LINE 4B	THE COLLEGE ESTABLISHED A NONQUALIFIED DEFERRED COMPENSATION PLAN IN 2011 THE FIRST CONTRIBUTION WAS MADE IN MARCH, 2012 ON BEHALF OF WILLIAM B GREER, PRESIDENT THE CONTRIBUTION FOR THEYEAR ENDED MAY 31, 2014 WAS MADE ON MARCH 19, 2014 FOR \$655

Schedule J (Form 990) 2013

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DLN: 93493066004165

OMB No 1545-0047

Schedule K (Form 990)

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

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

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

Open to Public **Inspection**

Name of the organization MILLIGAN COLLEGE INC

Department of the Treasury

Internal Revenue Service

Employer identification number

MIL	LIGAN COLLEGE INC									62-	05357	5 5								
Pa	art I Bond Issues									'										
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	orice	(f) Description of purpose			(g) De	(g) Defeased		On alf of uer		Pool ncing					
										Yes	No	Yes	No	Yes	No					
Α	THE HEALTH & EDUCATIONAL FACILITIES BD OF THE CITY OF ELIZABETHTON TN	62-6000283		12-05-2005	5,50	0,000 E	EQUI	STRUCTION PPING OF CATIONAL F	AND FACILITIES		х		х		х					
В	THE INDUSTRIAL DEVELOPMENT BOARD OF CARTER COUNTY TN	46-1322210		12-07-2012	7,50	0,000	LEGOTALING OF STODENT			CONSTRUCTION AND		CONSTRUCTION AND EQUIPPING OF STUDENT		CONSTRUCTION AND QUIPPING OF STUDENT		×		x		Х
Pa	rt III Proceeds				_															
						4		E			С		D							
1	A mount of bonds retired					1,308,	,865		456,055											
	A mount of bonds legally defeas	ea																		
	Total proceeds of issue					5,500,	,000		7,500,000											
4	Gross proceeds in reserve fund																			
5	Capitalized interest from procee	eds ————————————————————————————————————																		
6	Proceeds in refunding escrows																			
7	Issuance costs from proceeds					38,	38,851 47,840													
8	Credit enhancement from proce																			
9	Working capital expenditures fro	om proceeds																		
10	Capital expenditures from proce	eeds				5,461,149 7,452,160														
11	Other spent proceeds																			
12	Other unspent proceeds																			
13	Year of substantial completion				20	07		20	13											
					Yes	No		Yes	No	Yes	N	0	Yes		No					
14	Were the bonds issued as part of	of a current refundin	ig issue?			Х			Х											
15	Were the bonds issued as part o	of an advance refun	ding issue?			Х			Х											
16	Has the final allocation of proceeds been made?				Х			Х												
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							х												
Pai	Part III Private Business Use				•	ı	<u> </u>				1									
			-	1		В	3		Ç			D								
					Yes	No		Yes	No	Yes	N	0	Yes		No					

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Part III	Private	Business	Use	(Continued)

	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

		Α.		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х				
2	If "No" to line 1, did the following apply?					_			
а	Rebate not due yet?		Х		Х				
b	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?		X		Х				
ь	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
							Sc	hedule K (Forn	n 990) 2013

Pal	t IV Arbitrage (Continuea)								
		А	i	В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		х					
Pa	rt V Procedures To Undertake Corrective Action	•							
		Α	1	В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х	X			

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

Return Reference Explanation

Schedule K (Form 990) 2013

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DLN: 93493066004165

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the org MILLIGAN COLLEGE												tificatio	n numbe	r
						3) and section			organı	zatıor				
						0, Part IV, line	2 !							
1 (a) Name	e of disqual	ıfıed person	(b)		ship between n and organiz	n disqualified		(c) Desc	ription	of tra	nsactioi	n	(d) Corr	
				persor	Tallu Organia	2411011	┝						Yes	No
												+		
							L							
							┢					+		
2 Enterthe a	mount of ta	v incurred h	, oraș	anization n	nanagers or	disqualified pe	rec	ne during t	he vea	rundai	cectio	n .		
4958 .			, orga			aisquaimeu pe	150		ile year		> \$	'' <u> </u>		
3 Enter the a	mount of ta	x, if any, on l	line 2	., above, re	eimbursed by	y the organizat	ıon	1			▶ \$			
						-								
		nd/or Fron												
						990-EZ, Part V Iine 5, 6, or 22		ine 38a, or	Form 9	90, Pa	art IV, II	ine 26,	orifthe	
(a) Name of	(b)	(c)		(d) Loan t		(e)Original	_	f) Balance	(g) In		(h)		(i)Wri	tten
interested				or from th		principal	`	due	defaul		Approv	/ed	agreen	
person	with	loan	c	organızatıd	n?	amount					by .			
	organızat	ion									board or			
											commi	ttee?		
				То	From	1			Yes	No	Yes	No	Yes	No
													'	•
													_	
													_	
													<u></u>	
													_	
											ļ		_	
Total			\$											
						d Persons.		LTV long T	. 7					
	•	(b) Relatio			1	Form 990, P				ıctone) Durno	so of sec	ustansa
(a) Name of ir persoi		interested			(C) A moul	nt of assistanc	е	(d) Type	orass	istanc	.e (e	e) Purpo:	se of ass	istance
P	•	1	nızat											
(1) DR WILLIAM	B GREER	PRESIDENT				26,89		GRANT FO				ITION		
		MILLIGAN						DR WILLI						
(2) JACQUELIN	ER	VICE PRES				26,89	90	GRANT FO		HILD	OF TU	ITION		
STEADMAN		BUSINESS.						JACQUELI STEADMA						
		3						13. 200117	. •		I			
								-						
								-						
								-						
								-						
								-						

Business Transactions Complete if the organizati			ne 28a. 28b. or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
				Yes	No
See Additional Data Table					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L (Form 990 or 990-EZ) 2013

Software ID: Software Version:

EIN: 62-0535755

Name: MILLIGAN COLLEGE INC

Form 990, Schedule L, Part IV -	Business Transaction	s Involving Inter	ested Persons			
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
(1) DD WILLIAM B CREED	organization	21 571 002	IN MAY 2014 DR WILLIAM R	Yes	No	
(1) DR WILLIAM B GREER	PRESIDENT OF MILLIGAN COLLEGE	21,571,803	IN MAY 2014, DR WILLIAM B GREER, THE PRESIDENT OF MILLIGAN COLLEGE, WAS APPOINTED TO THE BOARD OF DIRECTORS OF CARTER COUNTY BANK, WHICH HOLDS A LINE OF CREDIT AND TWO TAX-EXEMPT BONDS OF THE COLLEGE, AND MOST OF THE CHECKING ACCOUNTS OF THE COLLEGE		No	
(2) CARTER COUNTY BANK	CARTER COUNTY BANK, OWNED BY MR W B GREENE, JR, TRUSTEE OF THE COLLEGE	10,336,723	MILLIGAN COLLEGE HAS MOST OF ITS CHECKING ACCOUNTS WITH CARTER COUNTY BANK, WHOSE BALANCES AT MAY 31, 2014 TOTALED APPROXIMATELY \$9,336,723 MILLIGAN COLLEGE HAS A \$1,000,000 LINE OF CREDIT WITH CARTER COUNTY BANK, OF WHICH THERE HAVE BEEN NO DRAWS AS OF MAY 31, 2014 THE LINE OF CREDIT MATURES NOVEMBER 30, 2014		Νο	
(3) CARTER COUNTY BANK	CARTER COUNTY BANK, OWNED BY MR W B GREENE, JR, TRUSTEE OF THE COLLEGE	880,904	ON DECEMBER 5, 2005, MILLIGAN COLLEGE OBTAINED A \$5,500,000 TAX- EXEMPT BOND FROM CARTER COUNTY BANK FOR THE CONSTRUCTION OF THE ELIZABETH LEITNER GREGORY CENTER FOR THE LIBERAL ARTS FOR THE YEAR ENDED MAY 31, 2014, THE BALANCE PAYABLE ON THE BOND WAS \$4,191,135 FOR THE YEAR ENDED MAY 31, 2014, THE COLLEGE PAID A TOTAL OF \$410,844 TO THE BANK - PRINCIPAL OF \$229,983 AND INTEREST EXPENSE OF \$180,861 ON DECEMBER 7, 2012, MILLIGAN COLLEGE OBTAINED A \$7,500,000 TAX-EXEMPT BOND FROM CARTER COUNTY BANK FOR THE CONSTRUCTION OF THE VILLAGE STUDENT RESIDENT HALLS FOR THE YEAR ENDED MAY 31, 2014, THE BALANCE PAYABLE ON THE BOND WAS \$7,043,945 FOR THE YEAR ENDED MAY 31, 2014, THE COLLEGE PAID A TOTAL OF \$470,060 TO THE BANK - PRINCIPAL OF \$301,681 AND INTEREST EXPENSE OF \$168,379		No	
(4) MR CALVIN L WILSON JR	MEMBER OF THE BOARD OF TRUSTEES	21,776,436	MR CALVIN L WILSON, JR, A SENIOR INVESTMENT ADVISOR WITH UBS FINANCIAL SERVICES, INC (UBS), IS A MEMBER OF THE BOARD OF TRUSTEES HE ALSO SERVES AS AN ADVISOR TO THE COLLEGE'S INVESTMENT COMMITTEE, BUT HE IS NOT A VOTING MEMBER OF THIS COMMITTEE AT MAY 31, 2014, THE COLLEGE HAS APPROXIMATELY SEVENTY FIVE PERCENT OF ITS INVESTMENTS (\$21,705,862) WITH UBS FEES CHARGED BY UBS ARE COMPATIBLE WITH OTHER COMPANIES FEES AVERAGE ABOUT 0 45% PER TRANSACTION FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2013, FEES CHARGED WERE \$70,574		No	
(5) MR THOMAS J BURLESON	MEMBER OF THE BOARD OF TRUSTEES	2,203,462	MR THOMAS J BURLESON, OWNER OF BURLESON CONSTRUCTION COMPANY,INC , IS A MEMBER OF THE BOARD OF TRUSTEES BURLESON CONSTRUCTION COMPANY, INC SERVED AS THE GENERAL CONTRACTOR FOR THE CONSTRUCTION OF THE VILLAGE STUDENT RESIDENCE HALLS, WHICH WAS STARTED IN JUNE 2012 AND WAS COMPLETED IN AUGUST 2013 BURLESON CONSTRUCTON COMPANY, INC WAS PAID \$2,203,462 FOR THE YEAR ENDED MAY 31,2014		No	
(6) DR MARSHALL W HAYDEN	MEMBER OF THE BOARD OF TRUSTEES	54,363	DR MARSHALL W HAYDEN IS A MEMBER OF THE BOARD OF TRUSTEES HIS SISTER IS EMPLOYED BY THE COLLEGE HER GROSS SALARY FOR THE 2013 CALENDAR YEAR WAS \$54,363		No	
(7) MR RONALD G DOVE JR	MEMBER OF THE BOARD OF TRUSTEES	34,814			No	
(8) MR DANIEL W MCMAHAN	MEMBER OF THE BOARD OF TRUSTEES	320,379	MR DANIEL W MCMAHAN IS A MEMBER OF THE BOARD OF TRUSTEES HE IS A SENIOR VICE-PRESIDENT OF BB&T (FORMERLY OLD COLONY INSURANCE) LOCATED IN LOUISVILLE, KENTUCKY FOR THE YEAR ENDED MAY 31, 2014, THE COLLEGE PAID A TOTAL OF \$320,379 FOR INSURANCE SERVICES (GENERAL LIABILITY COVERAGE) \$320,379 WAS PAID TO HARTFORD INSURANCE BB&T REPRESENTS MILLIGAN COLLEGE WITH HARTFORD INSURANCE MR DANIEL W MCMAHAN IS ON ROTATION IN 2014		No	
(9) MR THOMAS BANKS	MEMBER OF THE BOARD OF TRUSTEES	6,480			No	

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DLN: 93493066004165

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

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Internal Revenue Service Name of the organization MILLIGAN COLLEGE INC

Department of the Treasury

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

Employer identification number

162-0535755

- 6	Types of Property				T		
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of c noncash contril	letermining	ınts
1	Art—Works of art			- 3			
2	Art—Historical treasures .						
3	Art—Fractional interests						
4	Books and publications						
	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
	Intellectual property						
	Securities—Publicly traded .	Х	1	12,852	CLOSING STOCK	PRICES	
10	Securities—Closely held stock .						
11	Securities—Partnership, LLC, or trust interests						
12	Securities—Miscellaneous						
13	Qualified conservation contribution—Historic structures						
14	Qualified conservation contribution—Other						
15	Real estate—Residential .	Х	1	2,835,655	APPRAISAL		
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies .						
	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	O ther ► ()						
26	O ther ►()						
	O ther ▶()						
	Other ► ()						
29	Number of Forms 8283 received for which the organization comple				29	1	
30a	During the year, did the organiza					Yes	No No
	it must hold for at least three ye			ıtıon, and which is not requi	red to be used		
	for exempt purposes for the enti	re holding p	eriod?			30a	No
	If "Yes," describe the arrangeme						
31	Does the organization have a gif	τacceptano	ce policy that requires the	review of any non-standard	contributions?	31 Yes	<u> </u>
32a	Does the organization hire or us contributions?	e thırd partı • • •	es or related organizations	to solicit, process, or sell i	noncash • • •	32a	No
33	If "Yes," describe in Part II If the organization did not report describe in Part II	: an amount	ın column (c) for a type of	property for which column (a) ıs checked,		

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

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DLN: 93493066004165

OMB No 1545-0047

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization MILLIGAN COLLEGE INC

Employer identification number

62-0535755

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BRENDA GREEN, A MEMBER OF THE BOARD OF TRUSTEES, IS A SISTER-IN-LAW OF JAMES EARL GREEN, A MEMBER OF THE BOARD OF TRUSTEES
FORM 990, PART VI, SECTION B, LINE 11	A COMPLETE COPY OF THE COLLEGE'S FINAL FORM 990 (INCLUDING ALL REQUIRED SCHEDULES), AS ULT IMATELY FILED WITH THE INTERNAL REVENUE SERVICE, WAS PROVIDED TO EACH PERSON WHO WAS A VOT ING MEMBER OF THE GOVERNING BODY AT THE TIME THE FORM 990 WAS PROVIDED, WHETHER IN PAPER O R ELECTRONIC FORM, BEFORE ITS FILING WITH THE INTERNAL REVENUE SERVICE
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, EACH MEMBER OF THE BOARD OF TRUSTEES SUBMITS A SIGNED CONFLICT OF INTEREST AGREE MENT AT THIS TIME, ANY KNOWN CONFLICTS OR POTENTIAL CONFLICTS OF INTEREST ARE DISCLOSED T O THE GOVERNING BODY SHOULD THE POTENTIAL OF A CONFLICT OF INTEREST ARISE, THE SUBJECT WI LL BE DISCLOSED AND THE GOVERNING BOARD MEMBER WILL EXCUSE THEMSELVES FROM VOTING ON THE M ATTER IN QUESTION
FORM 990, PART VI, SECTION B, LINE 15	PRESIDENT THE BOARD OF TRUSTEES APPROVED THE SALARY OF THE PRESIDENT OF THE COLLEGE AND D D ID COMPARE THAT INFORMATION WITH PEER INSTITUTIONS AT THE TIME THE SALARY WAS DETERMINED O R HIRE DATE. THE BOARD OF TRUSTEES ALSO PASSED A RESOLUTION THAT THE PRESIDENT WOULD RECEIVE THE SAME PERCENTAGE INCREASE AS OTHER STAFF OF THE COLLEGE ON AN ANNUAL BASIS THE SALA RY OF THE PRESIDENT IS APPROVED AS PART OF THE BUDGETING PROCESS BY THE BOARD OF TRUSTEES ANNUALLY OTHER OFFICERS OR KEY EMPLOYEES SALARY INCREASES FOR OFFICERS ARE THE SAME PERC ENTAGE GIVEN TO OTHER STAFF OF THE ORGANIZATION THE PRESIDENT OF THE COLLEGE REVIEWS SALA RIES OF OTHER OFFICERS AND COMPARES THEM WITH DATA FROM PEER INSTITUTIONS THE PRESIDENT MAY RECOMMEND INCREASES OVER AND ABOVE THE PERCENTAGE INCREASES BASED ON MERIT OR TO MOVE SALARIES INTO MEDIAN RANGE OF PEER INSTITUTIONS THE PRESIDENT PRESENTS THESE RECOMMENDATIONS TO THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES THE SALARIES OF ALL OFFICERS ARE APPROVED AS PART OF THE BUDGETING PROCESS BY THE BOARD OF TRUSTEES ANNUALLY
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 9	NET ADJUSTMENT OF ANNUITY PAYMENT LIABILITY -25,993
FORM 990, PART XII, LINE 2C	THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FIANNCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT THI S PROCESS HAS NOT CHANGED FROM THAT OF THE PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493066004165 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** FORM 990 PAGE 10 Name(s) shown on return MILLIGAN COLLEGE INC 62-0535755 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . • 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 1,049,953 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 22 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 1,049,953 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	<u>nd Other I</u>	<u>nforma</u>	tion (C	aution	<u>: See</u>	the i	nstr	uctio	ns for	<u>limits</u>	for pa	asseng	<u>ier au</u>	tomol	oiles. 🕽
24a Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	Гио			24b	If "Yes,"	is the e	/ idence	written?	, Г _{уе}	s Γ_{N}	0
(a) Type of property (list vehicles first)	Type of property (list Date placed in Investment Cost o		(e) Basis for depreciation (business/investment use only)				(f) Recov perio	ery Method/			(h) Depreciation/ deduction			(i) Elected section 179 cost		
25Special depreciation allo	•		erty placed	in service (during the	tax yea	r and u	ised m	nore t	han 2!	_					
50% in a qualified busi	•		hueinaee	IICA						2:	<u>, </u>					
201 Toperty used more	1 1 1 1 1 1 1 1 1 1	%	Dusiness	usc					Т					\Box		
		%												\bot		
37 Dranarty used 500/		%														
27 Property used 50%	oriess in a	quanned bus	iness us	e	1				S	/L -				$\overline{}$		
		%							S,	/L -						
		%			<u> </u>					/L -						
28 Add amounts in co						ne 21,	page	1	2	8						
29 Add amounts in c	olumn (ı), lın					•	<u></u>	•	<u> </u>		• •		29			
Complete this section	for vehicles		ction B								or relat	مط مما	con			
If you provided vehicles to														se vehic	les	
30 Total business/in	vestment mi	les drıven du	rıng the				b)	(c)		-		(d) (e		-		f) icle 6
year (do not ınclu	de commutir	ng miles) .	•	Vehicle 1		ven	Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Ven	icie 6
31 Total commuting	mıles drıven	during the ye	ar .													
32 Total other person	nal(noncomn	nuting) miles	drıven													
33 Total miles driven	during the y	year Add line	s 30													
34 Was the vehicle a	vailable for p	personal use		Yes	No	Yes	No	Y	'es	No	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u owner or related p	•	y by a more tl	nan 5%													
36 Is another vehicle	available fo	or personal us	e? .													
Section Answer these question 5% owners or related	ns to determ	•	et an exc												not mo	re thar
37 Do you maintain a employees?	written poli	cy statement	that prof	nibits all	personal	use of	vehic	cles,	ınclı	uding co	mmutır	ng, by	your	Y	'es	No
38 Do you maintain a employees? See t																
39 Do you treat all us						213, un	cccor.	3,01	1 /0	or more	OWITCIS	•		-		
40 Do you provide mo						rmatio	n from	· •	ır or	· ·	about			-		
vehicles, and reta				· · ·		• • •	• •		ur en	ipioyees	• • •					
41 Do you meet the r	•	3	•					,			•					
Note: If your ansv	ver to 37, 38	3, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sec	tion B	fort	he c	overed v	/ehicle	s				
Part VI Amo	rtization															
(a) Description of c	osts	(b) Date amortizatio begins	n	A mort a mo	ızable		C	(d) Code ectioi		A mort	e) ization od or intage	A mortization for this year				
42 A mortization of co	sts that beg		ur 2013	tax year	(see ins	tructio	ns)			•		•				
43 A mortization of co	sts that beg	gan before you	ur 2013 t	ax year							43					
44 Total. Add amoun	ts ın column	(f) See the ı	nstructio	ns for wh	ere to re	port					44					· <u></u>