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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Do not enter Social Security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A I	or the	2013 calendar year, or tax year beginning	JUL 1, 2013 and	ending (JUN 30, 2014					
В	Check if applicable	C Name of organization			D Employer identific	cation number				
	Addres	S CARL SANDBURG COLLEGE	FOUNDATION							
	Name change Initial Initial Initial Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number									
L										
Ļ	Termin	7400 IOM D WIDSOM BDV	D		309-	<u>341-5327 </u>				
Ļ	Amend	City or town, state or province, country, and	d ZIP or foreign postal code		G Gross receipts \$	540,236.				
L	Application pendin				H(a) Is this a group re					
	politan.	F Name and address of principal officer MA			for subordinates	? Yes X No				
		2400 TOM L WILSON BLVD		<u> 2695</u>	H(b) Are all subordinates in	cluded? Yes No				
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)				
		e: WWW.SANDBURG.EDU			H(c) Group exemption					
		organization: X Corporation Trust // Summary	Association Other	L Year	of formation: 1969 N	State of legal domicile; IL				
		Briefly describe the organization's mission or mo-	et eignificant activities: TO S	IIDDOR!	T THE EDUCAT	TONAT.				
Governance	1	ENDEAVORS OF THE STUDENTS								
nar	1	Check this box I if the organization disc								
Ver	1	Number of voting members of the governing bod		364 01 11101	3	18				
: ဗိ	1	Number of independent voting members of the g			4	16				
S S		Total number of individuals employed in calendar	= ::		5	0				
Activities		Total number of volunteers (estimate if necessary			6	45				
媡		Total unrelated business revenue from Part VIII, o			7a	0.				
ĕ		Net unrelated business taxable income from Forr			7b	0.				
_		Total Caron Such 1999 taxable in Series (1911)	1, 1110 0 1		Prior Year	Current Year				
4	8	Contributions and grants (Part VIII, line 1h)			362,467.	306,854.				
Revenue		Program service revenue (Part VIII, line 2g)	•		0.	0.				
eve		Investment income (Part VIII, column (A), lines 3,		132,908.	202,625.					
ď	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8	21,334.	14,982.						
	1	Total revenue - add lines 8 through 11 (must equi			516,709.	524,461.				
		Grants and similar amounts paid (Part IX, column			194,031.	342,676.				
	1	Benefits paid to or for members (Part IX, column	• • •		0.	0.				
ģ	l	Salaries, other compensation, employee benefits	• • •		0.	0.				
Expenses	16a	Professional fundraising fees (Part IX, column (A)	•		0.	0.				
ĝ	Ь	Total fundraising expenses (Part IX, column (D), li	·	22.						
û	17	Other expenses (Part IX, column (A), lines 11a-11	· · · · · · · · · · · · · · · · · · ·		127,167.	73,430.				
		Total expenses Add lines 13-17 (must equal Part			321,198.	416,106.				
	19	Revenue less expenses Subtract line 18 from lin			195,511.	108,355.				
200			11	-> (> 1 B)	eginning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)	P NOV 2 I 2014		4,670,044.	5,372,794.				
AS	21	Total liabilities (Part X, line 26)	2 4 4 CU14		71,358.	122,220.				
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 fro	m line 20		4,598,686.	5,250,574.				
	art II	Signature Block	LUGICEN IN	-=						
Unc	ler pena	lties of perjury, I declare that I have examined this retur	n, including accompanying schedule	s and stater	nents, and to the best of my	knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than offi	cer) is based on all information of w	hich prepare	er has any knowledge.					
		Marcia K. Belli								
Sig	n	Signature of officer			Date					
He	re	MARCIA BULLIS, PRESID	ENT	_	<u> </u>	-14				
		Type or print name and title			<u> </u>					
		Print/Type preparer's name	Preparer's signature	}	Date Check	PTIN				
Pai		RICHARD WELLS	RICHARD WELLS		11/13/14 self-employe					
	parer	Firm's name WIPFLI LLP			Firm's EIN	<u> 39-0758449</u>				
Use	Only		REET							
		STERLING, IL 61			Phone no. (8	15)626-1277				
<u>Ma</u>	y the IF	RS discuss this return with the preparer shown al			 .	X Yes No				
3320	001 10-2	9-13 LHA For Paperwork Reduction Act Not	tice, see the separate instructi	ons.		Form 990 (2013)				

	† III Statement of Program Service Accomplishments	<u>, 2</u>
rai	Check if Schedule O contains a response or note to any line in this Part III	\neg
1	Briefly describe the organization's mission.	<u> </u>
'	TO SUPPORT THE EDUCATIONAL ENDEAVORS OF THE STUDENTS AND TO ENHANCE	
	THE COLLEGE'S EFFORTS TO BENEFIT THE COMMUNITIES OF THE COLLEGE	—
	DISTRICT.	—
		—
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	lo.
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	4o
•	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$311,379. including grants of \$311,379.) (Revenue \$	<u> </u>
	SCHOLARSHIPS -TO PROVIDE FINANCIAL SUPPORT TO CARL SANDBURG COLLEGE	_ ′
	(SANDBURG) STUDENTS. APPROX 225 SCHOLARSHIPS WERE AWARDED BASED ON	—
	GENERAL NEED AND/OR ACADEMIC REQUIREMENTS. SCHOLARSHIPS ARE APPLIED TO	—
	THE STUDENT ACCOUNTS AT CSC. SCHOLARSHIP AWARDS ARE DIVIDED EQUALLY	—
	BETWEEN THE FALL AND SPRING SEMESTERS.	—
	DELINDER THE THE TEND STREET SERVICES.	—
		—
		—
		—
		—
4b	(Code) (Expenses \$17,347. Including grants of \$17,347. (Revenue \$	
70	MINI-GRANTS - PREFERENCE IS GIVEN TO ONE-TIME PROJECTS AND EQUIPMENT	- '
	REQUESTS THAT DIRECTLY IMPACT A LARGE NUMBER OF PERSONS, PARTICULARLY	
	STUDENTS. NEED, MEASURABLE OUTCOMES, AND LIKELIHOOD OF SUCCESS ARE	
	IMPORTANT FACTORS. ORGANIZED SANDBURG STUDENT GROUPS, FACULTY, AND	—
	INSTRUCTIONAL DEPARTMENTS OF CSC MAY SUBMIT APPLICATIONS.	—
	INDIROCTIONED BEI ARTEMENTO OF COC MAI BODMIT ATTEMENTORS.	—
		—
		—
		—
	-	—
		—
4-	(Code) (Expenses \$ 13,950 . including grants of \$ 13,950 .) (Revenue \$	
4c	(Code) (Expenses \$13,950. including grants of \$13,950.) (Revenue \$ CONTRIBUTIONS TO COLLEGE PROGRAMS - TO HELP ENHANCE THE COLLEGE'S	_ ′
	EFFORTS TO BENEFIT THE COMMUNITIES OF THE COLLEGE DISTRICT.	—
	EFFORTS TO BENEFIT THE COMMONITIES OF THE COLLEGE DISTRICT.	—
		—
		—
		—
		—
		—
		—
		—
		—
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 342,676.	
<u>4e</u>		
	Form 990 (20	J13)

23-7098	820	P	age 3
		Yes	No
	1	x	
	2	X	
candidates for	3		X
n) election in effect			
ssessments, or	4		X
, , , , , , , , , , , , , , , , , , , ,	5		X
ave the right to Schedule D, Part I	6		х
),	7		х
," complete	·		
custodian for on services?	8		<u> </u>
	9		<u>x</u>
nents, permanent	10	х	
VII, VIII, IX, or X			
ete Schedule D,	11a		x
of its total	IIa		_
e of its total	11b		<u> </u>
	11c		_X_
s reported in	11d		x
Part X	11e		X
addresses			
D, Part X	11f	Х	
omplete	12a	х	
ptional	12b		<u> </u>
	13		<u>х</u> х
	14a		_X_
ising, business,			
ed at \$100,000	14b		X
or for any			

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	X	
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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_4	<u> </u>	<u> </u>
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9_		<u>X</u>
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	X	
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			v
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		<u>X</u> _
٠	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<u>X</u>
J	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		X
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		X
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		<u>X</u>
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	17		X
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	_X_	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u>X</u>
	11 165 to line 202, did the diganization attach a copy of its addited illiantial statements to this feturit:		990 (2013)
		. 01111	220 (

Form 990 (2013) CARL SANDBURG COLLEGE FOUNDATION
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		103	140
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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_		_X_
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		X
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		<u> </u>
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		_X_
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)			37
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
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	00-		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		Λ
-	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
•	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
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	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		,	ı
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2013)

	Check if Schedule O contains a response or note to any line in this Part V										
			Yes	No							
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0									
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7									
	(gambling) winnings to prize winners?	1c									
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		X							
þ	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	ļ	L_							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_	<u> </u>	X							
b	If "Yes," enter the name of the foreign country.										
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts										
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_	ļ	X							
b		5b	<u> </u>	X							
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	├								
6a		0-	х								
.	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	_6a	<u>-</u> ^_								
D	were not tax deductible?	6b	x								
7	Organizations that may receive deductible contributions under section 170(c).	-00	** -								
a	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	X								
b	Market and delivery and a second of the department of the second of the	7b	X								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required										
	to file Form 8282?	7c	l '	X							
d	If "Yes," indicate the number of Forms 8282 filed during the year										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	X							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	X							
g	· · · · · · · · · · · · · · · · · · ·	7 g	ļ	X							
h		7h	<u> </u>	X							
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting										
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_8_	├	 							
9	Sponsoring organizations maintaining donor advised funds.										
a	Did the organization make any taxable distributions under section 4966?	9a		 							
10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b									
а	Initiation fees and capital contributions included on Part VIII, line 12			ļ							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┪	[ļ							
11	Section 501(c)(12) organizations. Enter	7									
а	Gross income from members or shareholders										
ь				l							
	amounts due or received from them)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	_12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		\	1							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Ļ'	<u> </u>							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>							
	Note. See the instructions for additional information the organization must report on Schedule O										
b	Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans	4									
C		+	 								
14a	· · · · · · · · · · · · · · · · · · ·	14a	 	X							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	/2011							

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

Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			X					
000	non / a do to ming Dody and Management		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 18		res	140					
	If there are material differences in voting rights among members of the governing body, or if the governing	ĺ							
	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 1b 16								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ŀ							
_	officer, director, trustee, or key employee?	2		х					
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		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6		X					
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_ <u> </u>							
	more members of the governing body?	7a		Х					
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		х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	·							
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		_X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c							
13	Did the organization have a written whistleblower policy?	_13	Х						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15a		_X_					
b	Other officers or key employees of the organization	15b		_X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
<u></u>	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed LL								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at for public inspection, indicate how you made those explained. Check all that explain	ıvaılab	ie						
	for public inspection Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O)								
40		J. 65							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	tinar	icial						
20	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.								
20	MAUREEN DICKINSON - 309-341-5327	ion 🏲	_	_					

CARL SANDBURG COLLEGE 2400 TOM L WILSON BLVD,

61401

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Form 990 (2013)	 CARL	SANDBURG	COLLEGE	FOUNDATIO	N	

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

	Check if Schedule O	contain <u>s a respo</u> nse	or <u>no</u> te to any line in	this Part VII
Section A.	Officers, Directors,	Trustees, Key Emp	oloyees, 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, and 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

(A) Name and Title	(B) Average hours per week	box	(C) Position (do not check more than one cox, unless person is both an officer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARCIA BULLIS	1.00							_	_	_
PRESIDENT		X	_	X		_	-	0.	0.	0
(2) SUSAN THOMPSON	0.10	ļ				1			_	
DIRECTOR		X				<u> </u>	<u>.</u>	0.	0.	0
(3) GARY BANER	0.10	.								_
DIRECTOR	0.10	X		<u> </u>		<u> </u>		0.	0.	0
(4) TIFFANY COLE	0.10									
SEC/TREAS	0.10	X	-	X		├-		0.	0.	0
(5) JACKIE FLATER	0.10									•
DIRECTOR	0.30	X						0.	0.	0
(6) WAYNE GREEN	0.30	X							0	0
DIRECTOR	0.50	^			<u> </u>	-		0.	0.	0
(7) JOHN HENNENFENT	0.50	X				ļ		0.	0.	0
DIRECTOR	0.30	^	-			1		- 0.		<u></u>
(8) TRAVIS HIEL	0.50	X						0.	0.	0
DIRECTOR (9) MICHELLE HOFFMAN	0.30	A	\vdash	_				- 0.		
DIRECTOR	0.50	x]			0.	0.	0
(10) HAMSA JAGANNATHAN	0.50	-							- 0.	
DIRECTOR	0,00	X						0.	0.	_ 0
(11) JON SIBLEY, SR	0.30					T				
DIRECTOR		X						0.	0.	0
(12) DEBORA MAY-RICKARD	0.30									
DIRECTOR		X						0.	0.	0
(13) ERIC DILTS	0.10									-
DIRECTOR		X						0.	0.	
(14) DENA MUMMEY	0.10	1								
DIRECTOR		X			L			0.	0.	0
(15) JOHN SCHLAF	0.30									
DIRECTOR		X	_		L.	<u>L</u>		0.	0.	0
(16) ROBERT JURACO	0.30									
DIRECTOR		X		<u> </u>	_	-	<u> </u>	0.	0.	0
(17) PATRICIA KINNEY	0.30							_		_
DIRECTOR		X	L		L_		L	0.	0.	Form 990 (2012

CARL SANDBURG COLLEGE FOUNDATION

23-7098820

Form 990 (2013)

		Check if Schedule O cont	tains a response	or note to any lin	e in this Part VIII			
	•			, , , , , , , , , , , , , , , , , , , ,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
	С	Fundraising events	1c	905.				
		Related organizations	1d					
		Government grants (contribut	- 1					
	f	All other contributions, gifts, gran	· ———					
	•	similar amounts not included abo		305,949.				
ĒŌ	a	Noncash contributions included in lines		00075-50				
ago	_	Total. Add lines 1a-1f			306,854.			
		Votation in the state of the st		Business Code	000,0010			
a l	2 a			Daginioso Godo				
Program Service Revenue	b							
Ser	c							
E S	d							
P. B.	e							-
Pr			2016					
		Total. Add lines 2a-2f	Silde	•				
	3	Investment income (including	dividends inter					
ŀ	Ū	other similar amounts)	Gividorido, inico	▶	202,625.			202,625.
İ	4	Income from investment of ta	x-exempt bond i	-			-	202,023.
1	5	Royalties	ix exempt bond ;	brocceds -				
	•	rioyanios	(ı) Real	(II) Personal			•	
	6 a	Gross rents	(ly r lear	(ii) i cisonai				
	b							
		Rental income or (loss)						
		Net rental income or (loss)	L	.				
ļ		Gross amount from sales of	(i) Securities	(II) Other				
	/ a		(i) Securities	(ii) Other				
	_	assets other than inventory Less: cost or other basis						
	b							
	_	and sales expenses		 				
		Gain or (loss)						
ŀ		Net gain or (loss) Gross income from fundraisin	(t					
<u> </u>	o a		-					
Other Reven		contributions reported on line	905. of					
8		Part IV, line 18	•	30,757.				
<u> </u>		Less. direct expenses	a b	4				
ō		Net income or (loss) from fund	_	1 13,113.	14,982.			14,982.
ŀ		Gross income from gaming a	-		14,302.			14,304.
	<i>5</i> d	Part IV, line 19]				
		Less direct expenses	. a b					
		Net income or (loss) from gan	_	•				
		Gross sales of inventory, less	-					
	io a	and allowances						
	L	Less: cost of goods sold	a b			-		
			_					
1	<u> </u>	Net income or (loss) from sale		Business Cart				
}	44 -	Miscellaneous Revenu		Business Code				
	11 a							-
	b							_
	C	All other revenue						_
İ		Total. Add lines 11a-11d					· - · · · · · · · · · · · · · · · · · ·	
	12	Total revenue See instructions.	•		524,461.	0.		217,607.
	14	LOTAL LEAGURE DEC HIRT REGIONS.					U •	Z I/, UU/•

Secti	on.501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 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	317,634.	317,634.		
2	Grants and other assistance to individuals in		-		<u>=</u> :
	the United States. See Part IV, line 22	25,042.	25,042.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				·
9	Other employee benefits				···
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management .				
b	Legal				
С	Accounting	16,715.		16,715.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		·		
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	15,663.		15,663.	
12	Advertising and promotion				
13	Office expenses	4,910.		4,910.	
14	Information technology	18,062.		18,062.	
15	Royalties .		-		
16	Occupancy	01.5		21.5	
17	Travel	216.		216.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 450		4 450	·
19	Conferences, conventions, and meetings	1,452.		1,452.	
20	Interest		-		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Other expanses Itemize expanses not covered				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSES	16,412.		1,890.	14,522.
b					
C				-	<u>.</u>
d				7	·
	All other expenses			-	•
25	Total functional expenses. Add lines 1 through 24e	416,106.	342,676.	58,908.	14,522.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2013)
Part X | Balance Sheet

Par	T X	Balance Sneet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments	<u> </u>	162,151.	2	110,649 10,000
	3	Pledges and grants receivable, net	1,000.	3	10,000	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compensation	ated employees. Complete			
		Part II of Schedule L			5	· · · · · · · · · · · · · · · · · · ·
	6	Loans and other receivables from other disquali				
		section 4958(f)(1)), persons described in section	• • • • • • • • • • • • • • • • • • • •			
		employers and sponsoring organizations of sections	• • •			
ets		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	 .
Assets	7	Notes and loans receivable, net	-		7	
`	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		· · · · · · · · · · · · · · · · · · ·	9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b	4 -05 -00	10c	
	11	Investments - publicly traded securities		4,506,893.	11	5,252,145
	12	Investments other securities See Part IV, line		12	···	
	13	Investments - program-related See Part IV, line		13	<u> </u>	
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		4 670 044	15	- 3EO EO A
\dashv	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	4,670,044.	16	5,372,794.
	17	Accounts payable and accrued expenses	3,033.	17	6,005	
	18	Grants payable	68,325.	18	116,215	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	Sout IV of Oak adula D		20	
.	21	Escrow or custodial account liability. Complete	F		21	
ļ j	22	Loans and other payables to current and former				
Liabilities		key employees, highest compensated employee Complete Part II of Schedule L	s, and disqualified persons		-	
	23	Secured mortgages and notes payable to unrela	stad third parties		22	
	23 24	Unsecured notes and loans payable to unrelate	· · · · · · · · · · · · · · · · · · ·	· · · ·	23	 -
	25	Other liabilities (including federal income tax, pa	· · · · · · · · · · · · · · · · · · ·		24	
- 1	20	parties, and other liabilities not included on lines			ŀ	
		Schedule D	17 24). Complete Fait X of		25	
	26	Total liabilities. Add lines 17 through 25		71,358.	26	122,220.
		Organizations that follow SFAS 117 (ASC 958	check here X and	71,3300		122,220
က္က		complete lines 27 through 29, and lines 33 an				
Fund Balances	27	Unrestricted net assets		81,589.	27	23,205.
a a	28	Temporarily restricted net assets	Ī	1,756,342.	28	1,928,803.
9 8	29	Permanently restricted net assets	Ī	2,760,755.	29	3,298,566.
5		Organizations that do not follow SFAS 117 (A	SC 958). check here ▶			0,20,000
		and complete lines 30 through 34.				
နွှဲ	30	Capital stock or trust principal, or current funds			30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed	uipment fund	<u>, , , , , , , , , , , , , , , , , , , </u>	31	-
¥	32	Retained earnings, endowment, accumulated in	· ·		32	·
ž	33	Total net assets or fund balances	·	4,598,686.	33	5,250,574.
ı,	3 3					

	990 (2013) CARL SANDBURG COLLEGE FOUNDATION	23-	<u>-70988</u> 2	20	Page	e 12
Pa	rt XI Reconciliation of Net Assets					
	. Check if Schedule O contains a response or note to any line in this Part XI				[
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		524	,46	51.
2	Total expenses (must equal Part IX, column (A), line 25)	2			,10	
3	Revenue less expenses. Subtract line 2 from line 1	3	1	L08	, 35	55.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,5	598	, 68	36.
5	Net unrealized gains (losses) on investments	5	ŗ.	543	, 53	33.
6	Donated services and use of facilities	6				
7	Investment expenses	7			_	
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	5,2	250	,57	14.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				[X
				Y	es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>_</u> 2	2a		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:			ł		
	Separate basis Consolidated basis Both consolidated and separate basis			-		
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,	,	Ì		
	consolidated basis, or both:			İ		
	X Separate basis Consolidated basis Both consolidated and separate basis				H	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	ı			
	review, or compilation of its financial statements and selection of an independent accountant?			<u>2c </u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	dit			
	Act and OMB Circular A-133?			Ba 📗	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				X L	
			Fc	rm 9	90 (2	(013

SCHEDULE A

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number CARL SANDBURG COLLEGE FOUNDATION 23-7098820 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II c ____ Type III - Functionally integrated d Type III · Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s)

(i) Name of supported organization	above or IRC section 9		in col. (i) listed in your		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
		(see instructions))	Yes	No	Yes	No	Yes	No	
							i		
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 CARL SANDBURG COLLEGE FOUNDATION 23-7098820 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)

<u>Sec</u>	ction 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						
	include any "unusual grants.")	378,115.	484,425.	289,462.	362,467.	313,319.	1827788.
2	Tax revenues levied for the organ-	<u> </u>	•				
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to					i	
	the organization without charge						
4	Total. Add lines 1 through 3	378,115.	484,425.	289,462.	362,467.	313,319.	1827788.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		İ				
	column (f)						133,450.
6	Public support. Subtract line 5 from line 4						1694338.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	378,115.	484,425.	289,462.	362,467.	313,319.	1827788.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	148,870.	128,434.	125,568.	132,908.	202,625.	738,405.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	25,334.	26,840.	14,850.	21,334.	14,982.	103,340.
11	Total support. Add lines 7 through 10					·	2669533.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here			·		
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	column (f))		14	63.47 %
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	66.46 %
16a	33 1/3% support test - 2013. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright \mathbf{X}$
t	33 1/3% support test - 2012. If the	organization did no	t check a box on	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check ti	nis box and stop h	i <mark>ere.</mark> Explain in Pai	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	dorganization		
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, c	heck this box and	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test	The organization of	qualifies as a publi	cly supported orga	anization .	ightharpoons
18	Private foundation. If the organization	on did not check a	<u>box on line 13, 16</u>	a, 16b, 17a, or 17t	o, check this box a	ind see instructions	s •
					0-1-	-1.1. A (F) - 000	

Schedule A (Form 990 or 990-EZ) 2013 CARL SANDBURG COLLEGE FOUNDATION 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)

Sec	ction A. Public Support	olow, please com	pioto i art ii j				
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 include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					,	
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization'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						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
•	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	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						
12	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)	<u>.</u>	<u> </u>				
14	First five years. If the Form 990 is for	the organization'	s first, second, thu	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organız	zation,
	check this box and stop here	: O					<u> </u>
	ction C. Computation of Publ						
	Public support percentage for 2013 (•	column (f))		15	%
16						16	%
	ction D. Computation of Inve					1 1	
17	•			ne 13, column (t))		17	
18	Investment income percentage from:			on line 14 and lin	o 15 io mara th	18 33 1/30/ and line 1	<u>%</u>
198	a 33 1/3% support tests - 2013. If the more than 33 1/3%, check this box a						I / IS NOT
t	o 33 1/3% support tests - 2012. If the	-			• •		and
	line 18 is not more than 33 1/3%, che						
_20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

Schedule A	(Form 990 or 990-E	Z) 2013 CARL	<u>SANDBURG</u>	COLLEGE	FOUNDATION	23-7098820 Page
Part IV	Supplemental	Information. P	rovide the expla	nations required	by Part II, line 10; Part II,	line 17a or 17b; and Part III, line 12
	Also complete this	part for any addition	nal information.	(See instruction	s)	
	<u> </u>					
	 					
						
	_ _	_			 ·	
						
						
						
						
			· · · · · · · · · · · · · · · · · · ·		····	
_						
	···-				-	
	· —					
		· <u> </u>				
						
				_ 		
	 					
						
	 					

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

CARL SANDRURG COLLEGE FOUNDATION

Employer identification number 23-7098820

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	unds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
•	for charitable purposes and not for the benefit of the donor		-
	impermissible private benefit?	or donor advisor, or for any other purpose conte	
Pa		ganization answered "Yes" to Form 990, Part IV	YesNo
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or	`	ally important land area
	Protection of natural habitat	Preservation of a certified I	
	Preservation of open space	r roservation of a continue	nistorio structuro
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a	consequation ecoment on the last
_	day of the tax year	med conscivation continuation in the form of a c	conservation easement on the last
	ady or the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
_	listed in the National Register	and 9,17700, and not on a historic structure	2d
3	Number of conservation easements modified, transferred, re	eleased extinguished or terminated by the orga	
_	year ▶	included by the organization	anzation daming the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements	-	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		-gameation o accounting for
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement a	and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b	If the organization elected, as permitted under SFAS 116 (As	SC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	,	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under SFAS 1	-	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		> \$

	edule D (Form 990) 2013 CARL SAN	NDBURG COL	LEGE FOUND	ATION		23-70	98820) Page 2		
Pa	rt III Organizations Maintaining C									
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are a	significant	use of its	collection	items		
	(check all that apply)									
a	Public exhibition	d		hange programs						
b	Scholarly research	е	Other							
	c Preservation for future generations									
4	The state of the s									
5										
Pai	to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Part		ste ii tile Organizatio	manswered res to	1 FOIIII 990	J, ⊢ait iv, i	ine 9, or			
1a	is the organization an agent, trustee, custodia		liary for contribution	s or other assets no	t included					
	on Form 990, Part X?		nary for continuation	is or other assets no	i incidaca		Yes	☐ No		
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing table.			<u> </u>	J 163			
	. ,	,					Amount			
С	Beginning balance				1c					
d	Additions during the year				1d					
e	Distributions during the year				1e					
f	Ending balance				1f					
2a	Did the organization include an amount on Fo						Yes	No No		
	If "Yes," explain the arrangement in Part XIII.									
Pai	rt V Endowment Funds. Complete if	the organization an	swered "Yes" to Fo	rm 990, Part IV, line	10					
	-	(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four	years back		
1a	Beginning of year balance	4,598,686.	4,028,301.	3,935,054.	2,9	982,519.	3,	008,040.		
b	Contributions	422,690.	480,091.	373,063.	1,0	010,742.	<u> </u>	<u>475,058.</u>		
C	Net investment earnings, gains, and losses	746,158.	507,782.	186,019.	486,063.			<u>449,818.</u>		
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	516,960.	417,488.	465,835,	544,270.		<u>'</u>	<u>950,397,</u>		
T	Administrative expenses						_			
9	End of year balance Provide the estimated percentage of the curre	5,250,574.	4,598,686.	4,028,301.	3,9	935,054.	2.	982,519 <u>.</u>		
2 a	Board designated or quasi-endowment	• 40	e (line 1g, column (a	a)) neid as						
h	Permanent endowment > 62.90	%								
c		5.70 %								
·	The percentages in lines 2a, 2b, and 2c should									
За	Are there endowment funds not in the posses	·	ation that are held a	nd administered for	the organi	zation				
	by:						,	Yes No		
	(i) unrelated organizations							X		
	(ii) related organizations						3a(ii)	X		
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?				3b			
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.		_					
Pai	rt VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	1 "Yes" to Form 990	, Part IV, line 11a S	ee Form 990, Part X,	line 10					
	Description of property	(a) Cost or o	ther (b) Cost	or other (c) A	ccumulate	ed	(d) Book	value		
		basis (investr	nent) basis	(other) de	preciation)				
	Land									
b	Buildings									
C	Leasehold improvements									
	Equipment									
	Other I Add lines 1a through 1e (Column (d) must ed	<u> </u>								
1040	i nag iinge 19 through 10 // 'gluma (d) muet o/	TURE FORM DOOR DOOR	Y column (D) line 1	(((a))		_		Λ		

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

	dule D (Form 990) 2013 CARL SANDBURG COLLEGE FOUN	DATION	<u> </u>	23-7	7098820 Page 4
Par	• • • • • • • • • • • • • • • • • • • •		Revenue per R	eturn	l .
	. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				4 4 4 4 4 4 4 4
1	Total revenue, gains, and other support per audited financial statements			1	1,168,848.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments	2a	543,533.		
a	Donated services and use of facilities	2a 2b	85,079.		
c	Recoveries of prior year grants	2c	03,073.		
d	Other (Describe in Part XIII)	2d	15,775.	1	
	Add lines 2a through 2d		20,,,00	2e	644,387.
3	Subtract line 2e from line 1			3	524,461.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	524,461.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	ents Wit	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	<u>516,960.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	t i			
а	Donated services and use of facilities	2a	85,079.		
þ	Prior year adjustments	2b			
C	Other losses	2c	4		
d	Other (Describe in Part XIII)	2d	15,775.		
_	Add lines 2a through 2d			2e	100,854.
3	Subtract line 2e from line 1			3	416,106.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			0
_	Add lines 4a and 4b			4c	416,106.
Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) t XIII Supplemental Information.			5	410,100.
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part	· IV lines 1h	and 2h Part V line	1. Dort	V line 2 Port VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add			+, rait /	A, IIII e 2, Fait Ai,
		iniona inion	That ion.		
			_		·
PAF	T V, LINE 4:				
					``
EXI	LANATION: THE INTENDED USE OF THE ENDOWME	NT FUN	D IS FOR S	TUDE	ENT
SCI	OLARSHIPS AND COLLEGE PROGRAMS.				
PAL	T X, LINE 2:				· · · · · · · · · · · · · · · · · · ·
DVI	TANAMION. AC CMAMED IN BOOMNOME (A) MUR	HOIDIDA		~	
<u>EVI</u>	PLANATION: AS STATED IN FOOTNOTE (A), THE	FOUNDA	TION IS OR	GAN	LZED AS A
NON	I-PROFIT CORPORATION UNDER SECTION 501(C)(31 OE	יישי דאיייים או	אד ד	O EXTENITIE
MOI	FROITI CORFORATION UNDER SECTION SUITCH	3 / OF	IDE INIEKN	AL I	XE VENUE
COI	DE. THE FOUNDATION PAYS NO INCOME TAX ON	TTS RE	T.ATED FINC	ሞፐ⊜ኑ	U TNCOME AS
<u> </u>	The roombillion line in allocate line on	<u> </u>	DATED TONG	1101	INCOME AS
LO	IG AS IT STAYS WITHIN THE GUIDELINES OF SE	CTION	501(C)(3).	TH	HE
			002(0)(0)		
FOU	INDATION IS SUBJECT TO INCOME TAX ON ITS "	NON-RE	LATED" FUN	CTIC	ON INCOME.
		-			
FOI	R THE TAX YEAR, THE FOUNDATION DID NOT HAV	E ANY	"NON-RELAT	ED"	FUNCTION
					
	OME. ACCORDINGLY, THE FOUNDATION HAD NO	<u>TAXABI</u>	E INCOME F	OR 7	THE YEAR.
33205 09-25-	13			Sched	iule D (Form 990) 2013

CARL SANDBURG COLLEGE FOUNDATION

Schedule D (Form 990) 2013 CARL SANDBURG COLLEGE FOUNDATION 23-7098820 Page 5 Part XIII Supplemental Information (continued)
ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA
PROVIDES DETAILED GUIDANCE FOR THE FINANCIAL STATEMENT RECOGNITION,
MEASUREMENT AND DISCLOSURE OF UNCERTAIN TAX POSITIONS RECOGNIZED IN AN
ENTERPRISE'S FINANCIAL STATEMENTS. GENERALLY ACCEPTED ACCOUNTING
PRINCIPLES REQUIRE AN ENTITY TO RECOGNIZE THE FINANCIAL STATEMENT IMPACT
OF A TAX POSITION WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL
BE SUSTAINED UPON EXAMINATION.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
DIRECT FUNDRAISING EXPENSE
PART XII, LINE 2D - OTHER ADJUSTMENTS:
DIRECT FUNDRAISING EXPENSE
PART XII, LINE 2D
EXPLANATION: 15,775.
PART XIII, LINE 2D:
EXPLANATION: 15,775.

SCHEDULE G

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

CARL SA	MUDUKG COLLEGE FOR	<u> AUNA</u>	TIO	<u></u>	23-7090	<u>04U</u>				
Part I Fundraising Activities required to complete this part	Complete if the organization answert.	ered "Y	'es" to	Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not				
1 Indicate whether the organization rais	sed funds through any of the follows	no acti	vities	Check all that apply						
	· · —	-								
· · - -				overnment grants						
b Internet and email solicitations	i f ∭ Solicita	tion of	gover	nment grants						
c Phone solicitations	g Special	fundra	aising	events						
d In-person solicitations	-		•							
		l (.	#						
2 a Did the organization have a written of										
key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?										
b if "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be										
compensated at least \$5,000 by the	organization.		_							
										
		l (iii)	Did		(v) Amount paid					
(i) Name and address of individual	(ii) Activity	(iii) fundi	aiser	(iv) Gross receipts	to (or retained by)	(vi) Amount paid to (or retained by)				
or entity (fundraiser)	(ii) Activity	or cor	ustody itrol of	from activity	fundraiser	organization				
		contrib	utions?		listed in col. (i)	o gamzanon				
		Yes	No							
		163	110	4						
		 -	-	 						
		+	 							
		<u> </u>								
		- 								
			ļ							
		1								
	<u></u>	 		 		-				
		1	<u> </u>							
Total										
3 List all states in which the organization	on is registered or licensed to solicit	contrib	nution	s or has been notifie	d it is exempt from r	agistration				
or licensing.	on to registered of meetised to someth	COILLIE	Julion	3 Of Flad Deell Hotilie	a it is exempt nom i	egistration				
or licensing.					_					
	·									
										
					 -					
					_	· 				

Sch Pa	Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000								
		of fundraising event contributions and gre	oss income on Form 990	DEZ, lines 1 and 6b. List of	events with gross receir	ots greater than \$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events				
			ALUMNI GOLF	RAILROAD		(d) Total events			
			<u>OUTING</u>	DAYS TRAIN &	1	(add col. (a) through			
ō			(event type)	(event type)	(total number)	col (c))			
Revenue	1	Gross receipts	11,935.	17,652.	2,075.	31,662.			
	2	Less Contributions	905.			905.			
	3	Gross income (line 1 minus line 2)	11,030.	17,652.	2,075.	30,757.			
	4	Cash prizes							
es	5	Noncash prizes	880.	20.	_	900.			
Direct Expenses	6	Rent/facility costs	160.	910.	350.	1,420.			
Direct E	7	Food and beverages	1,485.		1,038.	2,523.			
_	8	Entertainment		400.		400.			
	9	Other direct expenses	3,612.		225.	10,532.			
	10	Direct expense summary. Add lines 4 through	h 9 ın column (d)	-	•	15,775.			
_	11					14,982.			
Pa	ırt		answered "Yes" to Form	990, Part IV, line 19, or r	eported more than				
	ı	\$15,000 on Form 990-EZ, line 6a.							
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
	1	Gross revenue							
ses	2	Cash prizes .							
t Expenses	3	Noncash prizes							
Direct	4	Rent/facility costs		_					
	5	Other direct expenses							
	6	Volunteer labor	Yes% No	Yes% No	Yes% No				
	7	Direct expense summary Add lines 2 through	h 5 ın column (d)		•				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						
а	ls t	ter the state(s) in which the organization opera the organization licensed to operate gaming ac No," explain:	ctivities in each of these	states?		Yes No			
		ere any of the organization's gaming licenses re Yes," explain			/ear?	Yes No			
	_								

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2013 CARL SANDBURG COLLEGE FOUNDATION 23-7	<u> 70988:</u>	20 Page 3
11	, a series manuelle	Ye	s No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	☐ Ye	s No
13	Indicate the percentage of gaming activity operated in.		
а	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Ye	s No
h	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
_	If "Yes," enter name and address of the third party		
·	; in res, entername and address of the tillid party		
	Name >		
	Name		
	Address >		
	Address		
16	Gaming manager information		
.0	Carming manager information		
	Name		
	Gaming manager compensation ▶ \$		
	<u> </u>		
	Description of services provided		
		-	
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Ye	s No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, li	nes 9. 9b	. 10b. 15b.
	15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instructions).	,	, 100, 100,
			
		-	
			
			

Schedule G (Form 990 or 990-EZ) 2013

332083 09-12-13

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.	on about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.
	► Information about 3

Open to Public Inspection

OMB No 1545-0047

Name of the organization	BURG COLL	CARI, SANDBURG COLLIEGE FOUNDATION	NOL				Employer identification number 23-7098820
Part General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	ıstance, and the select	tion X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	toring the use of grant	funds in the United	d States			
ᇤ	Governments and	d Organizations in the	e United States. C	omplete if the orga	anization answered "Y	'es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	\$5,000 Part II can	be duplicated if additi-	ional space is need	led.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARL SANDBURG COLLEGE							TO PROVIDE SCHOLARSHIPS
2400 TOM L WILSON BLVD							FOR STUDENTS AND PROGRAM
GALESBURG, IL 61401	37-0896983	501(C)(3)	317,634,	0.			NEEDS FOR CSC

332101 10-29-13

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

CARL SANDBURG COLLEGE FOUNDATION Schedule I (Form 990) (2013)

Page 2

23-7098820

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

Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIP	7	25.042.	0		
Part IV Supplemental Information. Provide the information required in		e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	Iditional information	
PART I, LINE 2:					
EXPLANATION: THE FOUNDATION DIRECTOR		ARLY COMMU	REGULARLY COMMUNICATES WITH	TH THE	
RECORDING TREASURER TO ENSURE GRANT	FUNDS	ARE BEING	BEING UTILIZED IN	N THE MANNER	
INDICATED IN THE GRANT GUIDELINES.	ALL	NT FUNDS A	GRANT FUNDS ARE HELD IN THE CARL	THE CARL	
SANDBURG COLLEGE BUSINESS OFFICE AND DISTRIBUTION OF FUNDS ARE OVERSEEN BY	AND DISTRI	BUTION OF	FUNDS ARE	OVERSEEN BY	
THE BUSINESS OFFICE AND CFO. ALLOCATION OF GRANT DOLLARS	CATION OF	GRANT DOL	LARS ARE T	ARE TRACKED IN THE	
COLLEGE'S ACCOUNTING SOFTWARE AND	REPORTS A	ARE PROVIDED	년 2	THE FOUNDATION	
OFFICE.			1		

SCHEDULE 0

(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 990-EZ 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.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

CARL SANDBURG COLLEGE FOUNDATION

Employer identification number 23-7098820

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BENEFIT THE COMMUNITIES OF THE COLLEGE DISTRICT.
FORM 990, PART VI, SECTION A, LINE 4:
EXPLANATION: SUBSTANTIAL RESTRUCTURING OF COMMITTEES, MAKING THE COLLEGE'S
CFO A NON-VOTING BOARD MEMBER, AND MAKING THE COLLEGE'S PRESIDENT A VOTING
BOARD MEMBER.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: THE 990 IS REVIEWED BY THE RECORDING TREASURER AND FOUNDATION
DIRECTOR PRIOR TO REQUESTING THE PRESIDENT & TREASURER'S SIGNATURES.
FORM 990, PART VI, SECTION B, LINE 15:
EXPLANATION: FORM 990, PAGE 6, QUESTIONS 15A AND 15B - N/A THE FOUNDATION
DOES NOT HAVE ANY EMPLOYEES AND THE BOARD OF DIRECTORS DO NOT GET
COMPENSATED.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS & FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST DURING NORMAL OPERATING
HOURS.
FORM 990, PART XII, LINE 2C
EXPLANATION: THE PROCESS HAS NOT CHANGED SINCE PRIOR YEAR.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

► See separate instructions.

OMB No 1545-0047	2013

Open to Public Inspection

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

Employer identification number 23-7098820

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Part I

CARL SANDBURG COLLEGE FOUNDATION Name of the organization

(f) End-of-year assets Direct controlling entity		
(d) Total income		
(c) Legal domicile (state or foreign country)	;	
(b) Primary activity		
(a) Name, address, and EIN (if applicable) of disregarded entity		

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year Part

(6)	Section 512(bX13) controlled entity?	No			×				
	Section 6	Yes							
(4)	Direct controlling entity								
(e)	Public charity status (if section	501(c)(3))		170(B)(1)	(A)(VI)				
(0	Exempt Code section				501(C)(3)			 	
(၁)	Legal domicile (state or foreign country)				ILLINOIS				
(q)	Primary activity		TO PROVIDE ACCESSIBLE,	QUALITY EDUCATION IN THE	csc district				
(e)	Name, address, and EIN of related organization		CARL SANDBURG COLLEGE - 37-0896983	2400 TOM L WILSON BLVD	GALESBURG, IL 61401				

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

Schedule R (Form 990) 2013

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23-7098820

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Schedule R (Form 990) 2013 CARL SANDBURG COLLEGE FOUNDATION

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Part III

Code V-UBI General or Percentage amount in box managing ownership 20 of Schedule Partner? K-1 (Form 1065) Yes No Disproportionate allocations? Yes No Share of end-of-year assets Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) e (d)
| Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization

able as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related during the tax year	
Part IV Identification of Related Organizations Taxable as a Corporation or T organizations treated as a corporation or trust during the tax year	
•	

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	Ξ	512(b)(13) controlled entity?	Yes No	_	 		_					_	
			Yes							 	_		
	Ē	Percentage ownership										_	
		Share of end-of-year	dssets										
	9	Share of total income											
	(e)	Type of entity (C corp, S corp,	or trust)										
	(0)	Direct controlling entity											
	(o)	Legal domicile (state or	country)										
ing the tax year	(q)	Primary activity											
organizations troated as a corporation of their samples	(e)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2013

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

	r more related organizations listed in Parts II-IV?
listed in Parts II, III, or IV of this schedule.	nzation engage in any of the following transactions with one or more related orga
Note. Complete line 1 if any entity is listed in Par	1 During the tax year, did the organization

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Parts II	
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wing transactions with one or more relate	
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n any of	
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organization engage in any of th	
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tax year	
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1 Du	

- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(d) Method of determining amount involved					
(c) Amount involved	342,676.				
(b) Transaction type (a·s)	В				
(a) Name of related organization	(1) CARL SANDBURG COLLEGE	(2)	(3)	(4)	(9)

Schedule R (Form 990) 2013

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Schedule R (Form 990) 2013

<u>Schedule F</u>	R (Form 990) 2013CAR	<u>L SANDBURG</u>	COLLEGE	FOUNDATION	1	<u>23-7098820</u>	Page 5
Part VII	Supplemental Information	n					
	Provide additional information for	responses to quest	ions on Schedule	R (see instructions)			
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