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Form 990

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

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

<u>A I</u>	or the	2013 calendar year, or tax year beginning JUL 1, 2013 and c	ل enaing	<u>UN 30, 2014</u>					
В	Check (f applicable	C Name of organization		D Employer identific	cation number				
	Addres change	S COE COLLEGE							
	Name change	Doing Business As		42-0	686467				
\vdash	Initial		Room/suite	te E Telephone number					
F	Termin	·			399-8643				
Ī	ated Amend		-	G Gross receipts \$	83,148,117.				
	⊾return ∏Applica			H(a) Is this a group re					
_	tion pendin			for subordinates					
			2402						
				H(b) Are all subordinates in					
		mpt status: X 501(c)(3) 501(c) ()	or 527	· ·	list. (see instructions)				
		e: WWW.COE.EDU	1	H(c) Group exemption					
		organization: X Corporation Trust Association Other	L Year	of formation: 1881 N	State of legal domicile: IA				
P	art I	Summary							
ė		Briefly describe the organization's mission or most significant activities $\ \ { t COE} \ \ \ ($		E IS A PRIV	ATE,				
Activities & Governance		FOUR-YEAR CO-EDUCATIONAL LIBERAL ARTS COI							
Ë	2 (Check this box 🕨 📖 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as					
8	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	39				
<u>ح</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	36				
Se	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	1498				
Viţi.	6	Total number of volunteers (estimate if necessary)		6	200				
Ę	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	<7,505.>				
⋖	ь	Net unrelated business taxable income from Form 990-Time 34 FILES		7b	<7,505.>				
)	Prior Year	Current Year				
41	8	Contributions and grants (Part VIII, line 1h)		9,710,962.	5,018,363.				
Revenue	1	Program service revenue (Part VIII, line 1h)		51,960,086.	55,069,620.				
Š		investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,231,281.	3,146,301.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, (Ocano Line)		<2,937.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	_	66,899,392.	63,222,458.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		24,296,433.	26,524,502.				
		Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.				
	1		-	20,598,080.	21,271,439.				
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	79,200.	10,330.				
en	Iba	Professional fundraising fees (Part IX, column (A), line 11e)	11	19,200.	10,330.				
X	b	Total fundraising expenses (Part IX, column (D), line 25) 1,366,73		16 057 036	17 710 217				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	16,957,036.	17,710,217.				
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	├	61,930,749.	65,516,488.				
	19	Revenue less expenses Subtract line 18 from line 12		4,968,643.	<2,294,030.>				
Net Assets or Fund Balances				ginning of Current Year	End of Year				
Sset	20	Total assets (Part X, line 16)	1	73,795,163.	176,710,719.				
A P	21	Total liabilities (Part X, line 26)	<u> </u>	40,297,226.	39,748,318.				
		Net assets or fund balances Subtract line 21 from line 20	1	<u>.33,497,937.</u>	<u>136,962,401.</u>				
	art II	Signature Block							
		lties of periory, I declade that shave examined this return, vicluding accompanying schedule:			y knowledge and belief, it is				
true	, correc	t, and contrigete. Decoration of preparer (other that office) is based on all infor mation of wh	nich preparei	has any knowledge.					
		11 4/hr 7 // hr		7-1	- 2013				
Sig	ın	Signature of Officer		Date					
He	re	MICHAEL L WHITE, EXEC VP - ASST SECY/	TREAS						
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai	d	CARLEY UMSTEAD Calley Umstea	d	7-20-15 II self-employe	P00982177				
	parer	Firm's name MCGLADREY LLP		Firm's EIN	42-0714325				
	Only	Firm's address 221 THIRD AVENUE SE, STE 300							
	,	CEDAR RAPIDS, IA 52401-1512		Phone no. 31	9-298-5333				
Ma	v the IC	RS discuss this return with the preparer shown above? (see instructions)		[X Yes No				
			one -/	\					
332	001 10-2	9-13 LID FOI Fapel work neulction Activotice, see the separate instruction	ons. 🆼	\	Form 990 (2013)				

<u>Form</u>	990 (2013) COE COLLEGE	<u>42-0686467</u>	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission	· · · · · · · · · · · · · · · · · · ·	
•	SEE SCHEDULE O		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
_			X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	LX No
	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 other	ers, the total expenses,	and
	revenue, if any, for each program service reported		
4-	10 500 105	. 46 775	<u>612 \</u>
4a			<u>017°</u>)
	EDUCATIONAL - COE COLLEGE IS A SELECTIVE, PRIVATE AND NA		
	RECOGNIZED FOUR-YEAR COEDUCATIONAL LIBERAL ARTS INSTITUT	<u> PION, PROVID</u>	<u>ING</u>
	SUPERIOR EDUCATIONAL EXPERIENCES FOR STUDENTS SINCE 1851	1. TO EACH	OF
		E ADVANTAGES	
	A SMALL COLLEGE THAT IS DEDICATED TO ACADEMIC EXCELLENCE		
			<u> </u>
		CLASS SIZE I	
	· · · · · · · · · · · · · · · · · · ·	<u>E HIGHEST DE</u>	GREE
	IN THEIR RESPECTIVE FIELDS. STUDENTS CAN THUS RECEIVE A	A LEVEL OF	
	PERSONALIZED ATTENTION THAT HAS ALMOST DISAPPEARED ELSEV	WHERE IN MOD	ERN
	ACADEMIA. THE CAMPUS PRESENTS AN INVITING ENVIRONMENT TO	O STUDENTS B	ОТН
	INSIDE AND OUTSIDE THE CLASSROOM, OFFERING A VARIETY OF		
	FOR GROWTH AND PERSONAL ENRICHMENT IN THE MANY INTELLECT		
4b	(Code) (Expenses \$5 , 427 , 080 . including grants of \$) (Revenue)		
	AUXILIARY ENTERPRISES - THIS INCLUDES THE COLLEGE'S RESI	<u>IDENCE HALLS</u>	
	COLLEGE RENTAL HOUSING, FOOD SERVICES, THE STUDENT UNION	N AND SUMMER	
	CONFERENCES. WITH MORE THAN 1,200 STUDENTS IN CAMPUS HO	DUSING,	
	RESIDENTIAL LIFE IS CENTRAL TO THE COE EXPERIENCE FOR ST		
	ADDITION, THE COLLEGE DERIVES SOME REVENUE FROM HOSTING		
		DOMMEN	
	CONFERENCES IN ITS FACILITIES.		
	6 006 206		
4c)
	PROGRAM SERVICES - THIS INCLUDES EXPENDITURES FOR THE OF		
	MAINTENANCE OF COLLEGE FACILITIES. WITH 37 BUILDINGS ON	N MORE THAN	60
	ACRES, MAINTENANCE OF COLLEGE FACILITIES IS AN IMPORTANT	r considerat	ION
	FOR THE COLLEGE. SIGNIFICANT CAMPUS IMPROVEMENTS OVER		
			7 NT
	DECADES HAVE BEEN COMPLETED SO THAT STUDENTS AND FACULTY		
	ENVIRONMENT CONDUCIVE TO LEARNING, WITH THE FACILITIES T	<u>ro support t</u>	HE
	MISSION OF THE COLLEGE.		
		<u> </u>	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 60,083,931.		

Form 990 (2013) COE COLLEGE
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		100	110
•	If "Yes," complete Schedule A	1	х	
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			
3	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			
7	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
3	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			
Ü	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			
0	Schedule D, Part III	8	х	
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		Х
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	х	
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	Х	
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	х	
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		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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		ĺ	
	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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	Х	
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		X
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,"			
	complete Schedule G, Part III	19		X
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	\Box	(0.5 : -
		Form	990 ((2013)

Form \$90 (2013) COE COLLEGE
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			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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	Х	
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		X
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		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
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		Х
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		ļ	
	Schedule L, Part I	25b		Х
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		X
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).		٦,	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	37
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	ļ	X
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	000	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	X	
30	Did the organization receive more than \$25,000 in non-cash contributions? In Test, complete schedule Wi	29	<u> </u>	
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
٠.	If "Yes," complete Schedule N, Part I	31		х
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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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	Х	
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	Х	
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?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2013)

Form	990 (2013) COE COLLEGE 42-0686	467	Р	age 5
Pa	t V 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	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 234			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 2a 1498			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
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		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.			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	If "Yes," did the organization notify the donor of the value of the goods or services provided?	.7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			٠,,
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	,		v
e 4	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	 -	_	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<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 The who are such of recovery as a bond.			
C 14a	Enter the amount of reserves on hand Did the exercisation reserves any payments for indeer tenang convers during the tay year?	44.5		Х
	Did the organization receive any payments for indoor tanning services during the tax year? If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	لــــا	L

Form 990 (2013) COE COLLEGE 42-0686467 Page
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.			77				
<u>~~</u>	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management		V					
4	Enter the number of voting members of the governing body at the end of the tax year 1a 39		Yes	No				
та	, , , , , , , , , , , , , , , , , , , ,							
	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 0. Enter the number of voting members included in line 1a, above, who are independent 1b							
b	•							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		v					
_	officer, director, trustee, or key employee?	2_	X	 				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ٔ ۔ ا						
_	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		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	l _ '		1,7				
	more members of the governing body?	7a		X				
p	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l ˈ		3.7				
_	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		77					
a	The governing body?	8a	X	\vdash				
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							
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X				
<u>3ec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No				
40-	Did the organization have local chapters, branches, or affiliates?	10a	165	X				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa						
D		10b		l				
110	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	12a	х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X					
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
Ŭ	in Schedule O how this was done	12c	Х					
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?							
а	The organization's CEO, Executive Director, or top management official	15a	Х					
	Other officers or key employees of the organization	15b	Х					
_	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		х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ►MA, MD, MI, MN, NH, NY, SC							
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) a	ıvaılat	le					
•	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)							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d fınar	icial					
,	statements available to the public during the tax year							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	·					
	MICHAEL L WHITE, EXEC VP - ASST SECY/TREAS - (319)399-8643							
	COP COLLEGE 1220 10m AVE NE CEDAR RAPIDS TA 52402		-					

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

X

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, 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order. individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

(A)	(B)	Orga	111126))	npei	isat	(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi	ition		one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week (list any	_				T T		from the	from related organizations	other compensation
	hours for	direct				8		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC)	,	organization
	organizations	al trus	nal tr		loyee	e com				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DAVID MCINALLY	40.00	_=	드	Į,	¥	₹ 5	8			
TRUSTEE-PRESIDENT	40.00	x		х				144,647.	0.	36,118.
(2) R DARRYL BANKS	1.00									
TRUSTEE		x						0.	0.	0.
(3) KIM BENJAMIN	1.00									
TRUSTEE		X						0.	0.	0.
(4) PETER BIRKEY	1.00									
TRUSTEE		X						0.	0.	0.
(5) J DAVID CARSON	1.00									
TRUSTEE - CHAIRMAN		X		X				0.	0.	0.
(6) STEVEN CAVES	1.00								_	_
TRUSTEE	1 00	X				<u> </u>	_	0.	0.	<u> </u>
(7) ROBERT CHIUSANO	1.00									•
TRUSTEE	1 00	X	_					0.	0.	0.
(8) NIKKI CLAUSSEN	1.00	,,								0
TRUSTEE	1.00	X				┢		0.	0.	0.
(9) HEATHER DANIELS	1.00	x						0.	0.	0.
TRUSTEE	1.00	^				╁		0.	U•	<u> </u>
(10) TOM ELLIS TRUSTEE	1.00	x						0.	o.	0.
(11) SAM FREITAG	1.00					<u> </u>		•	•	
TRUSTEE		x						0.	o.	0.
(12) DAVID GEHRING	1.00									
TRUSTEE - SECRETARY		Х		Х		ŀ		0.	0.	0.
(13) KEN GOLDER	1.00									
TRUSTEE - 2ND VICE CHAIR		X		X				0.	0.	0.
(14) TONY GOLOBIC	1.00									
TRUSTEE		X						0.	0.	0.
(15) DENNIS GREENSPON	1.00					ļ				
TRUSTEE		X						0.	0.	0.
(16) KEITH HALL	1.00					ł		 		
TRUSTEE	4 2 2	X	-	_	├-	ļ	<u> </u>	0.	0.	0.
(17) GENE HENDERSON	1.00									_
TRUSTEE		Х	<u> </u>		<u></u>	<u> </u>		0.	0.	0. Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)		,	((C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than s bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) KENT HERINK	1.00									
TRUSTEE	1 00	X				-		0.	0.	0.
(19) SHIRLEY HUGHES TRUSTEE	1.00	х						0.	0.	0.
(20) DOUG HYDE	1.00									
TRUSTEE		X						0.	0.	0.
(21) WILLIAM JOHNSON TRUSTEE	1.00	x						0.	0.	0.
(22) SANDY KALOUPEK TRUSTEE	1.00	х						0.	0.	0.
(23) STEVEN KLINE TRUSTEE	1.00	x			_			0.	0.	0.
(24) MARY JEANNE KROB TRUSTEE	1.00	x						0.	0.	0.
(25) JOAN LIPSKY TRUSTEE	1.00	х						0.	0.	0.
(26) JULIE MCLEAN TRUSTEE	1.00	х						0.	0.	0.
1b Sub-total							<u> </u>	144,647.	0.	36,118.
c Total from continuation sheets to Part VII, Section A \\ \bigsim \bigsim 1,754,499. \\ 0. \\ 282,13										282,134.
d Total (add lines 1b and 1c)								1,899,146.	0.	318,252.
Total number of individuals (including but r compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wt	no re	eceived more than \$100	0,000 of reportable	14

compensation from the organization

Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on 3 line 1a? If "Yes," complete Schedule J for such individual 3 Х For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(B) (C) Name and business address Description of services Compensation SODEXO INC, 9801 WASHINGTON BLVD, GAITHERSBURG, MD 20878 FOOD SERVICE 2,395,249. WEITZ COMPANY LLC 2801 6TH ST SW #A, CEDAR RAPIDS, IA 52404 1,379,620. CONSTRUCTION ROYALL & COMPANY 1920 E PARHAM RD, RICHMOND, VA 23228 MARKETING 295,454. CULVER'S LAWN & LANDSCAPNG 1682 DUBUQUE RD, MARION, IA 52302 LAWN SERVICE 236,924. SECURITAS SECURITY SERVICES 160 SOUTHGATE, IOWA CITY, IA 52240 228,580. SECURITY SERVICE 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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			((C)			(D)	(F)		
Name and title	Average	1			ition			Reportable	(E) Reportable	Estimated	
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of	
	per							from	from related	other	
	week		! .			loyee		the .	organizations	compensation	
	(list any	or director				d ma		organization	(W-2/1099-MISC)	from the	
	hours for related	90.0	eg.			sated		(W-2/1099-MISC)		organization and related	
	organizations	truste	al trus		yee	mper				organizations	
	below	Individual trustee	Institutional trustee	<u>ا</u>	Key employee	Highest compensated employee	-5				
	line)	lu de	Instit	Officer	Keye	High	Former				
(27) DAVID MEHAFFY	1.00										
TRUSTEE		X						0.	0.	0.	
(28) CURT MENEFEE	1.00										
TRUSTEE		Х						0.	0.	0.	
(29) PAUL MEYER	1.00									_	
TRUSTEE - TREASURER	-	X		X				0.	0.	0.	
(30) LIZA OVROM	1.00										
TRUSTEE		X						0.	0.	0.	
(31) CHUCK PETERS	1.00										
TRUSTEE		X						0.	0.	0.	
(32) SIGI REYNOLDS	1.00										
TRUSTEE		X						0.	0.	0.	
(33) BRETT RULE	1.00										
TRUSTEE		X					L	0.	0.	0.	
(34) LARRY SHRYOCK	1.00										
TRUSTEE		X						0.	0.	0.	
(35) STAN SMITH	1.00										
TRUSTEE		X					<u> </u>	0.	0.	<u> </u>	
(36) JOHN STROHM	1.00										
TRUSTEE		X					<u> </u>	0.	0.	0.	
(37) LORI STURDEVANT	1.00	}						_	_		
TRUSTEE - VICE CHAIR		X		X				0.	0.	0.	
(38) CARSON VEACH	1.00								_	_	
TRUSTEE		Х						0.	0.	<u> </u>	
(39) ED WALSH	1.00								_	_	
TRUSTEE	40.00	Х						0.	0.	0.	
(40) MICHAEL WHITE	40.00							450 600		00 454	
EXEC VP - ASST SECY & ASST TRES	40.00			Х				173,680.	0.	<u>29,451.</u>	
(41) MARIE BAEHR TIMKO	40.00							4.5.400			
VP ACADEMIC AFFAIRS & DEAN OF STUDEN	40.00	<u> </u>		Х				147,120.	0.	<u>56,902.</u>	
(42) FRANCIS MARY MISKIMEN	40.00							60 456		4.0 0	
ASST TO PRESIDENT - ASST SECY	40.00			X			_	62,156.	0.	10,872.	
(43) DAVID HAYES	40.00					'		04 654		4 4 54 6	
VP ADVANCEMENT	40.00			X				94,654.	0.	14,716.	
(44) ERIK ALBINSON	40.00			, ,				75 001		10 015	
VP STUDENT AFFAIRS	40.00	-		Х				75,081.	0.	10,917.	
(45) RICHARD MEISTERLING	40.00							174 260		10 054	
VP ADVANCEMENT	40.00			Х	-			174,369.	0.	10,854.	
(46) RICHARD RHEINSCHMIDT	40.00			.				159 199	_	10 525	
CONTROLLER	5.00			X				157,177.	0.	<u> 19,535.</u>	
Total to Doct VIII. Continue A. London											
Total to Part VII, Section A, line 1c											

Part VII Section A. Officers, Directors, True	npic	уее	S, a	nu r	nign	est	Compensated Employ	ees (continuea)			
(A)	(B)				2)			(D)	(E)	(F)	
Name and title	Average	ا		Pos			.11	Reportable	Reportable	Estimated	
	hours per	(6)	neck	l	mai	app	ייי) ד	compensation from	compensation from related	amount of other	
	week	ļ				a		the	organizations	compensation	
	(list any	çjo				l glo		organization	(W-2/1099-MISC)	from the	
	hours for	rgre				ted er		(W-2/1099-MISC)	,	organization	
	related	stee (ruste			bensa				and related	
	organizations	lal Tr	onal t		ploye	E 05				organizations	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
	40.00	=	트	0	ž	=	- E		-		
(47) EVELYN MOORE REGISTRAR & PROF OF NURSING	40.00					x		106,233.	0.	13,877.	
(48) ROBERT MARRS	40.00					1		100,233.	0.	15,077	
PROFESSOR OF RHETORIC	40.00					x	1	103,711.	0.	12,288.	
(49) STEVEN FELLER	40.00					1		100//1110	0.	12/2000	
PROFESSOR OF PHYSICS	10.00					x		135,598.	0.	23,949.	
(50) MARIO AFFATIGATO	40.00					<u></u>					
PROFESSOR OF PHYSICS						x		115,506.	0.	13,542.	
(51) WENDY DUNN	40.00							•			
PROF/DIR OF INST PLANNING						X		118,093.	0.	26,703.	
(52) JAMES PHIFER	0.00										
FORMER OFFICER						<u> </u>	X	291,121.	0.	38,528.	
						ļ					
						_					
						ļ				· ·-· · ·	
											
					_	_		<u>-</u> .			
										-	
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				\vdash	-	-	-				
				\vdash		 -					
	-										

	-	Check if Schedule O conti	ains a respons	e or note to any line	e in this Part VIII			
	-	SHOOK II GOHEGGIO G GOH.	amo a roopone	o i noto to uny mit	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a		-			
ig a	b		1b					
ا ڳڙي	С		1c	14,250.				
# j	d	Related organizations	1d					
S,E	е	Government grants (contribut	ions) 1e	771 154.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gran	ts, and			·		
돌림		similar amounts not included above	ve 1f	4 232 959				
g g	g	Noncash contributions included in lines	1a-1f \$	992 390.				
ರ್ ಕ	h	Total. Add lines 1a-1f		>	5,018,363.			
				Business Code				
မွ	2 a	STUDENT TUITION/FEES		611600	46,129,274.	46,129,274.		
e Ķ	b	AUXILIARY ENTERPRISES	611600	8 294 008	8,294,008.			
Selle	С	MISC FEES & CHARGE	611710	646,338.	646,338.			
ev ev	d	l						
Program Service Revenue	е							
4	f	All other program service reve	nue					
_	g	Total. Add lines 2a-2f		•	55,069,620,			
	3	Investment income (including	dıvıdends, ınte	erest, and				
		other similar amounts)		▶ [3,380,613.			3,380,613,
-	4	Income from investment of tax	x-exempt bond	I proceeds 🕨				
ŀ	5	Royalties						
			(ı) Real	(II) Personal				
	6 a							
	b	•		_				
		` ,						
		Net rental income or (loss)		>			 	
	7 a	Gross amount from sales of	(i) Securities					
		assets other than inventory	19,615,11	53,438.				
	b	Less: cost or other basis						
		and sales expenses	19,863,16					
		Gain or (loss)	<248,04					
		Net gain or (loss)		•	<234,312,	<u> </u>		<234_312.>
e n	8 а	Gross income from fundraising	•	1				
Other Revenu			<u>,250</u> of					
Re		contributions reported on line	ic) See					
her		Part IV, line 18		a 18,470.				
ŏ		Less direct expenses	J	b 22,791.	4 204			
		Net income or (loss) from fund	-		<4,321,	>		<4,321.>
	9 а	Gross income from gaming ac Part IV, line 19	tivities See					
	h	Less: direct expenses		a				
		•	una notuution	b				
		Net income or (loss) from gam Gross sales of inventory, less						
	ю а	and allowances	returns					
	h	Less: cost of goods sold		a b				
		Net income or (loss) from sale	s of inventory					
ľ		Miscellaneous Revenu		Business Code		<u>. </u>		
ŀ	11 >	K-1 PLAINS ALL AMERICA	-		<561.	L l	<561	
		K-1 LINN ENERGY LLC	- TITEUINE	900099	<2.029.		<2.029	
		c K-1 ENTERPRISE PRODUCT PARTNERS L 900099			<2.104.		<2,029	
	d	• • • •	TAKINERS I	900099	<2.811.		<2.104	
	_	Total, Add lines 11a-11d	<7,505.		<u> </u>			
	12	Total revenue See instructions.		•	63 222 458	55,069,620,	<7.505	3 141 980
33200					- 93, 222, 1 30.	33,003,040.	21,000	J. 131, 300.

Form 990 (2013) COE COLLEGE Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b,		(B)	(C)	(D)							
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and											
	organizations in the United States. See Part IV, line 21											
2	Grants and other assistance to individuals in											
	the United States See Part IV, line 22	26,524,502.	26,524,502.									
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	1,356,283.		986,141.	370,142.							
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	15,947,965.	14,597,278.	948,523.	402,164.							
8	Pension plan accruals and contributions (include											
	section 401(k) and 403(b) employer contributions)	847,290.	758,351.	61,536.	27,403.							
9	Other employee benefits	1,994,117.	1,423,151.	470,083.	100,883.							
10	Payroll taxes	1,125,784.	1,014,097.	72,298.	39,389.							
11	Fees for services (non-employees):											
а	Management											
b	Legal	22,674.		22,674.								
С	Accounting	111,655.		111,655.								
d	Lobbying											
е	Professional fundraising services. See Part IV, line 17	10,330.			10,330.							
f	Investment management fees	45,808.		45,808.								
g	Other (If line 11g amount exceeds 10% of line 25,											
	column (A) amount, list line 11g expenses on Sch O.)											
12	Advertising and promotion	409,003.		125,541.	66,020.							
13	Office expenses	944,543.		172,650.	127,142.							
14	Information technology	263,901.	420,960.	<201,487.	<u>44,428.</u>							
15	Royalties											
16	Occupancy	3,312,334.	3,215,841.	96,493.								
17	Travel	693,717.	576,508.	37,684.	<u>79,525.</u>							
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials			·· · ·								
19	Conferences, conventions, and meetings		04 = = = =									
20	Interest	917,599.	917,599.									
21	Payments to affiliates	0.006.005	2 006 005									
22	Depreciation, depletion, and amortization	2,996,825.		222 252	2 400							
23	Insurance	359,132.	125,959.	230,053.	3,120.							
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)											
а	CONTRACTED SERVICES	2,655,830.	2,563,247.	92,583.	0.							
b	INSTRUCTIONAL EXPENSE	2,328,471.	2,276,254.	0.	52,217.							
c	RECRUITING	569,481.	569,481.	0.	0.							
d	EQUIP, RENTAL & MAINT	451,181.	280,624.	170,557.	0.							
	All other expenses	1,628,063.		623,054.	43,948.							
25	Total functional expenses. Add lines 1 through 24e	65,516,488.	60,083,931.	4,065,846.	1,366,711.							
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)				- 000							

Form 990 (2013)
Part X | Balance Sheet

Pal	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1 .		Degining of year	_	Life of year
	1	Cash - non-interest-bearing	0 026 570	1	4,954,674.
	2	Savings and temporary cash investments	8,826,578. 1,431,583.	2	
	3	Pledges and grants receivable, net		3	537,295
	4	Accounts receivable, net	586,399.	4	600,392
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		_	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
, 0		employers and sponsoring organizations of section 501(c)(9) voluntary		۰	
Assets	١,,	employees' beneficiary organizations (see instr) Complete Part II of Sch L Notes and loans receivable, net		6 7	
As	7	Inventories for sale or use	, <u>.</u> .	8	
	8	Prepaid expenses and deferred charges	516,960.	9	334,974
	9	Land, buildings, and equipment, cost or other	310,300.	9	334,374
	10a	basis Complete Part VI of Schedule D 10a 94,070,251.			
	۱ ,	Less. accumulated depreciation 10b 33,797,542.	60,163,236.	10c	60,272,709.
	11	Investments - publicly traded securities	65,812,300.	11	66,837,025.
	12	Investments - other securities See Part IV, line 11	23,354,691.	12	30,069,212.
	13	Investments - program-related. See Part IV, line 11	7,256,142.	13	7,210,591
	14	Intangible assets	7,230,1120	14	7,220,352.
	15	Other assets See Part IV, line 11	5,847,274.	15	5,893,847.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	173,795,163.	16	176,710,719
	17	Accounts payable and accrued expenses	4,736,418.	17	4,287,596.
	18	Grants payable		18	
	19	Deferred revenue	223,013.	19	220,652.
	20	Tax-exempt bond liabilities	22,369,217.	20	21,370,803.
	21	Escrow or custodial account liability Complete Part IV of Schedule D	•	21	
Ş	22	Loans and other payables to current and former officers, directors, trustees,			
<u>I</u> te		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	1,447,408.	23	1,395,769.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D .	11,521,170.	25	12,473,498.
	26	Total liabilities. Add lines 17 through 25	40,297,226.	26	39,748,318.
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
es		complete lines 27 through 29, and lines 33 and 34.			
and	27	Unrestricted net assets	40,724,296.		41,742,217.
Bal	28	Temporarily restricted net assets	8,035,149.		7,405,264.
В	29	Permanently restricted net assets	84,738,492.	29	87,814,920.
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
S OF		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	122 407 027	32	126 060 461
_	33	Total net assets or fund balances	133,497,937.		136,962,401.
	34	Total liabilities and net assets/fund balances	173,795,163.	34	176,710,719.

F <u>orm</u>	990 (2013) COE COLLEGE	42-	-06864	167	Pag	ge 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		, 222		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,516		
3	Revenue less expenses Subtract line 2 from line 1	3		,294		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	133			
5	Net unrealized gains (losses) on investments	5_	5_	<u>, 525</u>	<u>5,2</u>	<u>83.</u>
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		233	<u>3,2</u>	<u>11.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	136	<u>,962</u>	2,4	<u>01.</u>
Par	t XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	-				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		-	2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		1		
	separate basis, consolidated basis, or both					
	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 separate	e basis	,			
	consolidated basis, or both					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		.	
	review, or compilation of its financial statements and selection of an independent accountant?		,	2c	Х	
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		1			
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igie Au	ait	_	x	
L	Act and OMB Circular A-133? If "Yes " did the example the undergo the required audit or outlite? If the example the required the required audit or outlite?	rad a		3a	^	
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	reu au	uit	3b	x	
	or addits, explain why in Schedule O and describe any steps taken to undergo such addits			Form 9		2012)
				LOIM 5) DEC	2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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. Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		COE COL							4	2-0686	467	,
Part I			ity Status (All organiz			_		tructions.				
he organ	ızatıon ıs not a	private foundation	because it is: (For lines 1	1 through ⁻	11, check (only one b	ox)					
1 🖳	A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2 <u>X</u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3 🖳	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4 🔲	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 🔲	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)											
6 🖳	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 📖	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
	section 170(b)(1)(A)(vi). (Comple	te Part II.)									
8 🖳	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🔲	An organizati	on that normally rec	eives (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershi	p fees, a	ind gross re	ceipts	from
	activities rela	ted to its exempt fui	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	1/3% of its	support	t from gross	invest	tment
	income and u	inrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon	after June 3	30, 197	75.
	See section	509(a)(2). (Complete	e Part III)									
10	An organizati	on organized and op	perated exclusively to te	st for publ	c safety S	See sect io	on 509(a)(4	1).				
11 📖	_		perated exclusively for th		•				•			or
	more publicly	supported organiza	ations described in section	on 509(a)(⁻	1) or section	on 509(a)(2	2) See sec	ction 509(a)(3). Ch	eck the box	that	
			organization and comple		-							
	a L Type I	-	•	ype III - Fu	-	-				n-functional		
e			at the organization is not									เท
			han one or more publicly						9(a)(1) or	section 509)(a)(2)	
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting or	rganization, check th	nis box									
g	-		organization accepted ar			•		• •				1
		-	lirectly controls, either al	one or tog	ether with	persons o	described	ın (ıı) and (ııı) below	',	Yes	No
	_		upported organization?							11g(i)	├	
	• •	·	n described in (i) above?							11g(ii)	—	_
	• •	•	ı person described in (i) o							11g(iiı)		L
h	Provide the fo	ollowing information	about the supported org	ganization	(s).							
			T									
(i) Name	of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organization	the on in col.	(vii) Amount	t of mo	netary
orga	anization		(2000)	in col. (i) lis governing :	-		non in col. r support?	(i) organiz U.S	ed in the	sup	port	
			(see instructions))									
		-		Yes	No	Yes	No	Yes	No			
							-					
									-			
				 								
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<u>[otal</u>		İ					1	L				

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

Schedule A (Form 990 or 990-EZ) 2013

Scheifule A	(Form 990 or 990-EZ) 2013	COE	COLLEGE

Part II

42-0686467 Page 2

(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 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 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 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011(d) 2012 (e) 2013 (f) Total 7 Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2012 Schedule A, Part II, line 14 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 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 supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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 COE COLLEGE 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 b	elow, please com	plete Part II.)				
Section A. Public Support		1		T		
Calendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
 Gifts, grants, contributions, and 						
membership fees received (Do not						
include any "unusual grants.")				<u> </u>		
2 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-				-		
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		:				
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>				
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organiz	ation,
check this box and stop here						
Section C. Computation of Publ						
15 Public support percentage for 2013 (line 8, column (f) d	livided by line 13, o	column (f))		15	%
16 Public support percentage from 2012					16	%
Section D. Computation of Inve	stment Incom	e Percentage				
17 Investment income percentage for 20)13 (line 10c, colu	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from	2012 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2013. If the	organization did i	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box a	nd stop here. The	e organization qual	ifies as a publicly	supported organ	zation	▶□
b 33 1/3% support tests - 2012. If the	organization did i	not check a box or	line 14 or line 19a	a, and line 16 is n	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	eck this box and s	top here. The orga	anization qualifies	as a publicly sup	ported organization	▶□
20 Private foundation, If the organization	on did not check a	box on line 14, 19	a, or 19b, check tl	his box and see i	nstructions	ightharpoons

Part IV	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)						
 -							
•							
-							
							
	<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.

Open to Public

Name of the organization

Employer identification number

COE COLLEGE 42-0686467 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Vac In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 14,206,483. (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	Schedule D (Form 990) 2013 COE COLLEGE 42-0686467 Page 2									
Par	t III Organizations Maintaining C		•		_					
3										
	(check all that apply)		. चिक्री .							
а	Public exhibition	d	X Loan or exc							
b	X Scholarly research	е	X Other EI	DUCATIO	NAL					
С	X Preservation for future generations									
4	Provide a description of the organization's c							Part XIII		
5	During the year, did the organization solicit of				er sımılaı	r assets	·	-	Ty.	٦
Par	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes X No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
1 41	reported an amount on Form 990, Pa		ete ir trie organizatio	on answered	res to	Form 9	90, Part i	v, line 9, or		
	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included									
	on Form 990, Part X?		inally lot continuous				<u> </u>	Yes] No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					163		J 140
-	ii roo, explain the arrangement in rate xiii	and complete the to	nowing table.					Amount		
С	Beginning balance					10		7 4770 4770		
	Additions during the year					1d				
	Distributions during the year					1e	1			
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
	If "Yes," explain the arrangement in Part XIII	•		provided in f	Part XIII]
Par						10				
		(a) Current year	(b) Prior year	(c) Two year	rs back	(d) Thre	e years ba	ck (e) Four	years	back
1a	Beginning of year balance	89,263,799.	85,306,396	78.484			721,14			609.
b	Contributions	2,065,554.	1,699,631	4.908	8 284		590 16			959,
С	Net investment earnings, gains, and losses	8,219,113.	7,224,931	1	4 108	6	618 17	1		167,
d	Grants or scholarships	2,739,756,	1,416,797	1	3 107		346.09	-	•	966.
е	Other expenditures for facilities									
	and programs	2,981,567,	3,550,362	<512	2.560.	> 3	098.84	4. 3.	835.	620.
f	Administrative expenses		· · · · · · · · · · · · · · · · · · ·				•			
g	End of year balance	93,827,143.	89,263,799	85,306	6.396.	78	484.55	1. 75	721	149.
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (•						
а	Board designated or quasi-endowment	2.00	%							
b	Permanent endowment ► 91.80	%	_							
С		6.2 0 %								
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	and administe	red for ti	he orga	nization			
	by	-				_			Yes	No
	(i) unrelated organizations							3a(i)	х	
	(ii) related organizations							3a(ii)		X
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule R?					3b		
_4	Describe in Part XIII the intended uses of the	e organization's endo	wment funds.							
Par	Part VI Land, Buildings, and Equipment.									
	Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10.									
	Description of property	(a) Cost or of	ther (b) Cos	t or other	(c) A	ccumula	ated	(d) Book	value	е
		basis (investr		(other)	dep	preciation	on			
1a	Land		12,16	8,144.				12,168	3,1	<u>44.</u>
b	Buildings			34,041.		<u>443,</u>		41,840		
С	Leasehold improvements		2,06	1,056.	1,	732,	400.	328	3,6	56.
d	Equipment		12,30	4,139.	8,6	621,	524.	3,682	2,6	<u> 15.</u>
<u>e</u>	Other		2,25	2,871.				2,252		
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c))	, ,		>	60,272	2,7	09.
							Sched	ule D (Form	990)	2013

Schedule D (Form 990) 2013 COE COLLEGE		42-0686467 Page
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" t	to Form 990, Part IV, line 1	1b See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CASH VALUE OF LIFE		
TAIGUD ANGE	070 073	END OF YEAR MARKET VALUE

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CASH VALUE OF LIFE		
(B) INSURANCE	879,973.	END-OF-YEAR MARKET VALUE
(C) TRUST AGREEMENTS	14,883,904.	END-OF-YEAR MARKET VALUE
(D) ALTERNATIVE INVESTMENTS	1,687,151.	END-OF-YEAR MARKET VALUE
(E) REAL EST, LAND & MNRL		
(F) RIGHTS	1,697,402.	END-OF-YEAR MARKET VALUE
(G) COLLATERIZED DEBT		
(H) OBLIGATIONS	2,165,782.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	30,069,212.	
Part VIII Investments - Program Related.		

(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 15.)	>

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO US GOVT-PERKINS LOAN	5,489,182.
(3) ANNUITY PAYABLE	1,380,870.
(4) DEPOSITS HELD ON BEHALF OTHERS	264,444.
(5) LIABILITY TO LIFE INCOME	
(6) BENEFICIARIES	1,582,266.
(7) ACCRUED PENSION COST	1,906,020.
(8) ACCRUED LOSS ON INTEREST RATE	
(9) SWAPS	905,499.
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	12,473,498.

^{2.} 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. X

Sche	dule D (Form 990) 2013 COE COLLEGE					0686467	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements	Wit	th Revenue per l	Retur	n.	-
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a.			_,		
1	Total revenue, gains, and other support per audited financial statements				1	42,184	<u>,936.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.						
а	Net unrealized gains on investments	2	<u>2a</u>	5,525,283	<u>.</u>		
b	Donated services and use of facilities	_2	<u>2b</u>		4		
c	Recoveries of prior year grants	2	2c		_		
d	Other (Describe in Part XIII)	_2	2d		4		
е	Add lines 2a through 2d				2e	5,525	<u>,283.</u>
3	Subtract line 2e from line 1				3	36,659	<u>,653.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4	la	45,808	<u>.</u>		
b	Other (Describe in Part XIII)	4	lb	26,516,997	4		
С	Add lines 4a and 4b				4c	26,562	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	63,222	<u>,458.</u>
Pai	t XII Reconciliation of Expenses per Audited Financial St		s W	ith Expenses pe	r Retu	ırn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a.					
1	Total expenses and losses per audited financial statements				1	38,946	<u>,178.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	_2	?a		4		
b	Prior year adjustments	2	2b				
С	Other losses	2	<u>2c </u>				
d	Other (Describe in Part XIII.)	_2	<u>?d</u>		_		
е	Add lines 2a through 2d				2e		<u> </u>
3	Subtract line 2e from line 1				3	38,946	<u>,178.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					-	
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4	a	45,808	<u>.</u>		
b	Other (Describe in Part XIII.)	4	b	26,524,502			
С	Add lines 4a and 4b				4c	26,570	<u>,310.</u>
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	8)			5	65,516	<u>,488.</u>
<u> </u>	t XIII Supplemental Information.						
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4				4, Parl	X, line 2, Part	XI,
lines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide ar	ny additiona	al info	ormation			
						· · · -	
ם אם	m tit iine 4.						
PAI	T III, LINE 4:						
тиг	COMMITTEE ON THE PERMANENT COLLECTION	. OF AE	ייייכ	СПУТ.Т.			
****	COMMITTED ON THE TEMPERATURE CONDUCTION	01 111		UIIIIII			
DET	ERMINE IF THE PROPOSED GIFT OF ARTWORK	is su	JIT	ABLE FOR A	CEP	TANCE B	Y
							
CON	SIDERING WHETHER THE FOLLOWING CONDITI	ONS HA	VE	BEEN MET:			
						-	
					_		
						,	
THE	ARTWORK FURTHERS THE MISSION OF COE C	OLLEGE	<u> </u>				
THE	ARTWORK IS COMPATIBLE WITH OR COMPLEM	ENTARY	<u> T</u>	O THE CURRI	INT	ART	
COT	LEGITON						
COL	LECTION.						
тнь	DONOR HAS VALID OWNERSHIP OF THE ARTW	ORK. A	MD	TS FREE TO	o do	NVEY TH	FC:
	201011 1110 111111 11111111111111111111	01111/					
<u>WOI</u>	K.						
THE	RE ARE NO UNTENABLE RESTRICTIONS, RESE	RVATIC	<u>NS</u>	OR LIMITAT	ION	S PLACE	D ON
mur	ADMMODE OF THE DIEDLAY						
332054	ARTWORK OR ITS DISPLAY.				Sah.	dula D /Earry C	200) 2010
09-25-	រេទ				Sche	dule D (Form 9	2012013

THE COSTS FOR RESTORATION, MAINTENANCE AND INSURANCE ARE REASONABLE AND APPROPRIATE.

THE COMMITTEE ON THE PERMANENT COLLECTION OF ART PROVIDES THE PRESIDENT WITH A RECOMMENDATION FOR ACCEPTANCE OR REFUSAL.

THE COE COLLEGE ENDOWMENT FUND HAS BEEN ESTABLISHED BY THE

PART V, LINE 4:

BOARD OF TRUSTEES AS AN INVESTMENT PORTFOLIO FOR THE ASSETS CONTRIBUTED BY

DONORS FOR THE CONTINUING SUPPORT OF THE COLLEGE AND OTHER DONOR

DESIGNATED PURPOSES. THE DEVELOPMENT AND EXPANSION OF THIS FUND IS AN

IMPORTANT PART OF THE COLLEGE'S OBJECTIVES FOR MAINTAINING QUALITY IN

FACULTY, STUDENTS AND FACILITIES.

THE FUND IS COMPRISED OF PERMANENT, TERM AND QUASI ENDOWMENT ASSETS.

ALL ENDOWMENT INCOME SUPPORTS THE COLLEGE OPERATIONS AND PROVIDES

SCHOLARSHIPS FOR STUDENTS.

PART X, LINE 2:

THE COLLEGE IS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAXES

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE COLLEGE MAY BE

SUBJECT TO FEDERAL AND STATE INCOME TAXES ON ANY NET INCOME FROM UNRELATED

BUSINESS ACTIVITIES. THE COLLEGE FILES A FORM 990 (RETURN OF ORGANIZATION

EXEMPT FROM INCOME TAX) ANNUALLY AND UNRELATED BUSINESS INCOME (UBI) IS

REPORTED ON FORM 990-T, AS APPROPRIATE. MANAGEMENT HAS EVALUATED THEIR

MATERIAL TAX POSITIONS, WHICH INCLUDE SUCH MATTERS AS THE TAX EXEMPT

STATUS AND VARIOUS POSITIONS RELATIVE TO POTENTIAL SOURCES OF UBI. AS OF

JUNE 30, 2014 AND 2013, THERE WERE NO UNCERTAIN TAX BENEFITS IDENTIFIED

AND RECORDED AS A LIABLITY. FORMS 990 AND 990-T FILED BY THE COLLEGE ARE

Schedule D (Form 990) COE COLLEGE

Part XIII | Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.	<u> </u>	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
ARTWORK	8,755,000.	FMV
<u> </u>		
		· · · · · · · · · · · · · · · · · · ·
 		
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	+	
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332451 05-01-13

Schedule D (Form 990)

SCHEDULE E

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

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

Employer identification number

_	COE COLLEGE 4	2-0686	467	,
Pai				
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			i i
	other governing instrument, or in a resolution of its governing body?	1	x	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		1	T
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarsh	ips? 2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the	'		İ .
	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	X	
	THE RACIALLY NONDISCRIMINATORY POLICY IS PUBLISHED THROUGH			
	THE NEWSPAPER IN EMPLOYMENT ADVERTISEMENT AND IN THE COLLEGE			
	HANDBOOK.	<u> </u>		
	-			i
4	Does the organization maintain the following?	_		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	? 4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with studer	nt		
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II			ļ
			Ì	
			1	
				i
5	Does the organization discriminate by race in any way with respect to	İ		l
а		<u>5a</u>	ļ	X
b	·	<u>5b</u>	<u> </u>	X
С		5c	ļ	X
d		<u>5d</u>	<u> </u>	X
е	Educational policies?	<u>5e</u>		X
f	Use of facilities?	5f	ļ .	X
g		_5g		X
h	Other extracurricular activities?	<u>5</u> h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II			
			1	
		<u> </u>		
		—		
e -	Does the organization receive any financial aid as acceptance from a parameterial acceptance	— I _	.	
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	v
D	Has the organization's right to such aid ever been revoked or suspended?	6b	-	Х
-	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of	- 1	1	l

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

Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," explain on Part II

Schedule E (Form 990 or 990-EZ) (2013)

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable	Page 2
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.	
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:	
COE COLLEGE RECEIVES FEDERAL AND STATE FINANCIAL AID AND	
GRANTS.	
	

SCHEDULE F

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

COE COLLEGE				42-06864	67
	rmation on A	Activities Ou	tside the United States. Compl	lete if the organization answered	Yes" on
Form 990, Part I					
1 For grantmakers. Does	s the organization	n maintain recor	ds to substantiate the amount of its gr	rants and other assistance,	<u> </u>
the grantees' eligibility f	for the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes No
United States			procedures for monitoring the use of it		tside the
	i .		an 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
SUB-SAHARAN AFRICA	١ .	,	PROGRAM SERVICE	STUDY ABROAD	66,117,
EAST ASIA AND THE					00,117.
PACIFIC - AUSTRALIA, BRUNEI, BURMA,					
CAMBODIA.	0	0	PROGRAM SERVICE	STUDY ABROAD	82,714.
EUROPE (INCLUDING ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,					
AUSTRIA BELGIUM	0	0	PROGRAM SERVICE	STUDY ABROAD	93,610.
<u> </u>	_			21021	33,010.
					<u> </u>
3 a Sub-total	0	0			242 441
b Total from continuation	9				242,441.
sheets to Part I		0			
c Totals (add lines 3a					0.
and 3b)	o	0			242,441,

Schedule F (Form 990) 2013

Part !! | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV appraisal, other)				
(h) Description of non-cash assistance				
(g) Amount of non-cash assistance				
(e) Amount (f) Manner of of cash grant cash disbursement				
(e) Amount of cash grant				
(d) Purpose of grant				
(c) Region				
(b) IRS code section and EIN (if applicable)				
1 (a) Name of organization				

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2013

42-0686467

Page 3

COE COLLEGE

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
-						
					Schedu	Schedule F (Form 990) 2013

Sched	ule F (Form 990) 2013 COE COLLEGE	42-0686467	Page 4
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)	X Yes	☐ 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)	Yes	X 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)	Yes	X 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)	Yes	X 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)	Yes	X 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		

Schedule F (Form 990) 2013

Yes X No

for Form 5713)

Schedule F	(Form 990) 2013 COE COLLEGE	42-0686467	Page 5
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account		
	investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method)		1
	(estimated number of recipients), as applicable Also complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete this part to provide any additional information of the complete	nation	
	-		
			-
		-	
		· · · · · · · · · · · · · · · · · · ·	

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

➤ 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.

OMB No 1545-0047

2013

Open To Public Inspection

Name of the organization	-	-				Employer ide	ntification number
COE COL	LEGE					42-0686	467
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" to	Form 990, Part IV, I	ne 17	7. Form 990-EZ	filers are not
Indicate whether the organization rais Mail solicitations Internet and email solicitations	e Solicitat f Solicitat	ion of	non-g gover	overnment grants nment grants	•		
c Phone solicitations d In-person solicitations	g Special		_				
 2 a Did the organization have a written of key employees listed in Form 990, P. b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	art VII) or entity in connection with p ividuals or entities (fundraisers) pursi	rofess	onal f	undraising services?	ı	Yes	
	organization.						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribi	trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
					!		
							· · · · · · · · · · · · · · · · · · ·
Total			>				
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit of	contrib	utions	s or has been notified	d it is	exempt from re	egistration
							- ·
							
							

Sch	, edu	e G (Form 990 or 990-EZ) 2013 COE COL	JEGE		42-	-0686467 Page 2
Pa			e organization answered		rt IV, line 18, or reported	more than \$15,000
		or rainer aloning over contributions and give	(a) Event #1 GOLF EVENT	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	32,720.			32,720.
	2	Less Contributions	14,250.			14,250.
	3	Gross income (line 1 minus line 2)	18,470.			18,470.
	4	Cash prizes	1,970.			1,970.
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	13,891.			13,891.
	7	Food and beverages				
Q	8	Entertainment				
	9	Other direct expenses	6,930.			6,930.
	_	Direct expense summary. Add lines 4 through	n 9 ın column (d)		>	22,791.
		Net income summary. Subtract line 10 from li	ne 3, column (d)	,	<u> </u>	<4,321.>
Pa	rt l		answered "Yes" to Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a		(b) Pull tabs/instant	Τ	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c))
Be Be	1	Gross revenue				
ses	2	Cash prizes				
Direct Expens	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				<u> </u>
	6	Volunteer labor	Yes % No	Yes % No	Yes% No	
	7	Direct expense summary Add lines 2 through	n 5 in column (d)		•	

	Net gaming income summary Subtract line 7 from line 1, column (d)	.]	
а	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? If "No," explain:	Yes	□ No
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? of "Yes," explain	Yes	□ No

<u>Sche</u>	edule G (Form 990 or 990-EZ) 2013 COE COLLEGE 4	<u>2-068646</u>	7 Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	☐ 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?	Yes	□ No
	Indicate the percentage of gaming activity operated in:	1 1	
		40-	0.4
	The organization's facility	13a	%
	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?	Yes	☐ No
	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amoun	ıt	
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party		
	Name		
	Address ►		
16	Gaming manager information		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		_
	retain the state gaming license?	Yes	L∐ 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 > \$		
	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Par	t III. lines 9. 9h	10h 15h
	15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instruction		,,
			•

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

Complete if the organization answer

Attach to Form 990.

VICUAIS IN THE UNITED STATES ed "Yes" to Form 990, Part IV, line 21 or 22.	

OMB No 1545-0047 2013

Open to Public

Inspection

² | Employer identification number 42-0686467 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 non-cash assistance (g) Description of ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Part I General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? COE COLLEGE 1 (a) Name and address of organization or government Name of the organization

332101 10-29-13

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)

42-0686467

Page 2

Schedule I (Form 990) (2013) COE COLLEGE

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
ENDOWED PRIZES	41	18,541,	0	N/A	N/A
GIFT PRIZES	18	8,071,	0.	N/A	N/A
				•	N/A
GIFT SCHOLARSHIPS	67	1,494,029,	0	N/A	
ENDOWED SCHOLARSHIPS	355	2,721,215,	o	N/A	N/A
GENERAL SCHOLARSHIPS	1179	21, 200,	0	. N.A.	N/A
Part IV Supplemental Information. Provide the information required		e 2, Part III, column	(b), and any other ac	in Part I, line 2, Part III, column (b), and any other additional information	

PART I, LINE 2:

OF. DEPT FEDERAL GRANTS FROM NSF, COE COLLEGE RECEIVES VARIOUS SEPARATE EDUCATION AND OTHER AGENCIES OR BRANCHES OF THE US GOVERNMENT.

THE ACCOUNTS ARE USED FOR EACH GRANT TO MONITOR RECEIPTS AND DISBURSEMENTS.

COLLEGE FOLLOWS APPROPRIATE ACCOUNTING AND INTERNAL CONTROL PROCEDURES. ALL

REQUIRED FINANCIAL REPORTING TO THE GRANT PROVIDER ARE COMPLETED TIMELY AND

AUDITS BY AN INDEPENDENT CPA FIRM ARE DONE WHEN REQUIRED. THE COLLEGE

ANNUALLY FILES AN A-133

Page 2		sh assistance					:	Schedule (Form 990)
42-0686467		(f) Description of non-cash assistance						Schedi
		(e) Method of valuation (book, FMV, appraisal, other)	/A					
	I (Form 990), Part III	(d) Amount of non- cash assistance	0,N/A					
	ed States (Schedule	(c) Amount of cash grant	1,082,646,					
	uals in the Unite	(b) Number of recipients	278,					
Schedule I (Form 990) COE COLLEGE	Part III Continuation of Grants and Other Assistance to Individe	(a) Type of grant or assistance	TUITION DISCOUNTS					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on 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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

COE COLLEGE

Employer identification number 42-0686467

Pa	art 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 X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			İ
b	If any of the boxes on 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	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
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.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	_X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<u> </u>
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations 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		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III	i l		
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		X
b	, ,	6b		X
	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		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued 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		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?			Ī

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 (ii) and from related organizations, described in the instructions, on row (iii) 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

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	appe	(E) Total of columns	(F) Compensation
(A) Name and Trtle		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Denefits	(C)·(O)(B)	reported as deferred in prior Form 990
(1) DAVID MCINALLY	(9)	139,881.	0	4,766.	8,925.	27,193.	180,765.	0.
- 5	€		0	J		0	0.	0
(2) MICHAEL WHITE	Ξ	165,940	0	7,740.	12,139.	17,312.	203,131.	0.
EXEC VP - ASST SECY & ASST TRES	<u> </u>	0	0	0			0.	0.
	Ξ	146,308.	0.	812.	10,67	46,226.	204,022.	0.
VP ACADEMIC AFFAIRS & DEAN OF STUDEN (ii)	(E)	0.	0	0.		0.		0.
(4) RICHARD MEISTERLING	Ξ	163,27	0	11,090.	1,63	9,222.	185,223.	0.
DVANCEMENT	€	0	0	0.		0	0.	0.
HEINSCHMIDT	Ξ	148,706.	0.	8,471.	10,594.	8,941.	176,712.	0
	Ξ		0	0.	0 0	0.	0.	0.
(6) STEVEN FELLER	Ξ	109,485.	0.	26,113.	8,103.	15,846.	159,547.	0
띭	<u> </u>		0	0.	0	0.	0.	0.
(7) JAMES PHIFER	Θ	254,293.	0	36,828.	17,850.	20,678.	329,649.	0.
FORMER OFFICER	(ii)	0	0.	0.	0	0	0.	0
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	<u> </u>							
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Schedule J (Form 990) 2013

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.

PRESIDENT LIVE IN A PRESIDENT'S HOUSE OR MANOR OWNED BY THE COLLEGE BECAUSE RESIDENCE LOCATED AT 370 34TH STREET SE, CEDAR RAPIDS, LOWA, WHICH IS OWNED ACTIVITIES AND COLLEGE RELATED ENTERTAINMENT ON COLLEGE PROPERTY. THE OF ITS REQUIREMENT THAT THE PRESIDENT CONDUCT SIGNIFICANT BUSINESS EMPLOYMENT AGREEMENT STATES COE COLLEGE REQUIRES THAT ITS BY THE COLLEGE, IS DESIGNATED THE OFFICIAL COLLEGE MANOR. PART I, LINE 1A:

COUNTRY CLUB DUES ARE INCLUDED IN TAXABLE INCOME ON W-2S.

THE PRESIDENT AND EXECUTIVE VICE PRESIDENT PARTICIPATE IN A 457(F) DEFERRED COMPENSATION PLAN. PART I, LINE 4B:

FORMER PRESIDENT RECEIVED PAYOUT OF DEFERRED COMPENSATION

Schedule J (Form 990) 2013

ENTITY

~1

OMB No 1545-0047

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

explanations, and any additional information in Part VI.

Department of the Treasury Internal Revenue Service

SCHEDULEK

(Form 990)

2013 Open to Public Inspection

Employer identification number ► Attach to Form 990. ► See separate instructions. ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

851. 582,149. ž (i) Pooled financing 23,929. 6,106,078 500,000 × × × × 2010 Yes ŝ ŝ 598, (g) Defeased (h) On behalf 42-0686467 ŝ × × × × Ω of Issuer 4 Yes × × × ŝ × × × × 34,326. 465,674. 500,000 801,039 Yes × ŝ × × ٩ 2008 CONSTRUCTION/RENO (f) Description of purpose O 4, 7 Yes \bowtie SEE PART VI 6,100,000.SEE PART VI SEE PART VI 517 59,192 861,846 507 3,849,147 4,500,000.VATION × × ŝ N٥ 2005 953, 575, Φ 513,333. 819,543. വ Yes Yes X × (e) Issue price 333, 386,667 41,461 471,872 × × × ŝ ŝ 2 <u>7</u> 2002 513, 07/22/09 07/22/09 07/22/09 20/80/90 (d) Date Issued ς, Yes Yes × (c) CUSIP# NONE NONE NONE NONE Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of 1 Was the organization a partner in a partnership, or a member of an LLC, 42-0887558 42-0887558 42-6025060 42-0887558 (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? COE COLLEGE Working capital expenditures from proceeds IOWA IOWA IOWA IOWA Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds OF HIAWATHA, Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name B CITY OF ROBINS, Part III Private Business Use A CITY OF ROBINS, OF ROBINS, bond-financed property? Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds Bond Issues Proceeds CCLTY DCITY Part I Part II 9 2 N က 4 ω 유 σ Ξ 12 t 4 5 9

332121 10-09-13 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2013

N ENTITY

OMB No 1545-0047

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Name of the organization

SCHEDULE K

(Form 990)

Employer identification number Department of the Treasury

Particle | Attach to Form 990. See separate instructions. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

2013 Open to Public Inspection

(i) Pooled Yes No × ŝ (g) Defeased (h) On behalf 42-0686467 ž × of Issuer Δ Yes Yes Yes ŝ × Yes ŝ ŝ CONSTRUCTION/RENO (f) Description of purpose O Yes Yes 4,800,000.NATION ŝ ٩ 8 Yes Yes (e) Issue price 319. 24,124 778,195 × × × 읟 ဍ 2012 802, 08/05/11 (d) Date issued 4 Yes Yes ヸ × (c) CUSIP# NONE Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, 42-0887558 (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? COE COLLEGE Working capital expenditures from proceeds IOWA Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use ROBINS bond-financed property? Other unspent proceeds Amount of bonds retired Total proceeds of issue Other spent proceeds Bond Issues Proceeds OF. A CITY Part II Part 9 ა 9 8 6 F 42 13 4 5 9 4 В C

332121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2013

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Schedule K (Form 990) 2013 COE COLLEGE			42-	42-0686467		X.T.T.T.NS	- 1	Page 2
Use (Continued)								
3a Are there any management or service contracts that may result in private	A Voc	2	X	2	\ \ \	S S	Vec	2
		×	×		3	X	22.	×
 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? 			×					
c Are there any research agreements that may result in private business use of bond-financed property?		×		×		×		×
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		% 00.	4	.18 %	;	° 00°	•	% 00
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		- 1		0		00.		00
6 Total of lines 4 and 5		000.	4	.18 %		% 00.	•	% 00
7 Does the bond issue meet the private security or payment test?		×		×		×		×
8a Has there been a sale or disposition of any of the bond-financed property to a non-		;		!		ļ		;
governmental person other than a 501(c)(3) organization since the bonds were issued?		×		×		×		×
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
If "Ves" to line 8a was any remedial action taken pursuant to Beginations sections								
9 Has the organization established written procedures to ensure that all nongualified								
Regulations sections 1.141-12 and 1.145-2?	×		×		×		×	
Part IV Arbitrage								
						C		
1 Has the issuer filed Form 8038-T. Arbitrade Rebate. Yield Reduction and	Yes	No	Yes	N _O	Yes		Yes	S.
		×		×		×		×
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		×
b Exception to rebate?	X		×		×		X	
c No rebate due?	×		×		×		×	
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								
computation was performed								Ĩ
3 Is the bond issue a variable rate issue?	×		×	_		×		×
4a Has the organization or the governmental issuer entered into a qualified		;		;		:		;
hedge with respect to the bond issue?		×		×		×		×
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
332722 10-09-13						Sch	Schedule K (Form 990) 2013	n 990) 2013

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г.		

0			42-(42-0686467		ENT.T.T.X	7	Page 2
Part III Private Business Use (Continued)								
],			B	;		Δ :	
3a Are there any management or service contracts that may result in private business use of hand-financed property?	Yes	۶×	Yes	8	Yes	0	Yes	No
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?								
c Are there any research agreements that may result in private business use of bond-financed property?		×						
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		% 00.		%		%		%
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		.00 %		%	:	%		%
6 Total of lines 4 and 5		.00 %		%		%		%
7 Does the bond issue meet the private security or payment test?		×			·			
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
of		%		%		%		%
c 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 1 145-27	×							
Part IV Arbitrage						•		
			8	_	S			
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	N _o
Penalty in Lieu of Arbitrage Rebate?		×						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		×						
b Exception to rebate?	×							
c No rebate due?	×							
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?	×							
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?	×							
b Name of provider		Α,						
c Term of hedge	10.	.0000000						
d Was the hedge superintegrated?		×						
e Was the hedge terminated?		×						
332122 10-09-13						Sch	Schedule K (Form 990) 2013	n 990) 2013

ENTITY

42-0686467

COE COLLEGE

Schedule K (Form 990) 2013

Page 3

Part IV Arbitrage (Continued)	A			60		C		
	Yes		Yes	٤	Yes	N	Yes	Ş
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		×		X		×
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?	3	×		×		×		×
7 Has the organization established written procedures to monitor the requirements of			;		;		;	
section 1482	×		×		×		×	
Part V Procedures To Undertake Corrective Action								
	¥			8		O	٥	
	Yes	N	Yes	٩	Yes	No	Yes	N _o
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?	×		×		×		×	
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions)	on Schedule	K (see instr	uctions).					
						`		
								:

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Schedule K (Form 990) 2013 COE COLLEGE	B			42-	42-0686467				Page 3
Part IV Arbitrage (Continued)									
		'	A		В		C	a	
		Yes	No	Yes	No	Yes	No	SəX	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	tment contract (GIC)?		×						
b Name of provider									
c Term of GIC									
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	iir market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?	ble temporary period?		×						
7 Has the organization established written procedures to monitor the requirements of	to monitor the requirements of								
section 148?		×							
Part V Procedures To Undertake Corrective Action									
		'	A	1	В)	၁	a	
		Yes	No	Yes	N _o	Yes	٥N	Sə	No
Has the organization established written procedures to ensure that violations of	to ensure that violations of								
federal tax requirements are timely identified and corrected through th	rected through the voluntary								
closing agreement program if self-remediation is not available under applicable	available under applicable								
regulations?		×							
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions)	information for responses to questions	s on Schedul	e K (see instr	uctions).					
SCHEDULE K, PART IV, ARBITRAGE, LINE	E, LINE 2C:								
(A) ISSUER NAME: CITY OF ROBINS, IOWA	NS, IOWA								
DATE THE REBATE COMPUTATION WAS PERFORMED: 01/22/2010	ON WAS PERFORMED: 0	1/22/2	010						
							•		

DATE THE REBATE COMPUTATION WAS PERFORMED: 01/22/2010 IOWA ISSUER NAME: CITY OF ROBINS, ব্ৰ

DATE THE REBATE COMPUTATION WAS PERFORMED: 12/08/2008 IOWA CITY OF HIAWATHA, ISSUER NAME: (A)

DATE THE REBATE COMPUTATION WAS PERFORMED: 02/28/2011 ISSUER NAME: CITY OF ROBINS, IOWA (A)

DATE THE REBATE COMPUTATION WAS PERFORMED: 01/09/2013 IOWA ISSUER NAME: CITY OF ROBINS (A)

REISSUANCE OF 2002 BONDS (4/8/2002) WHICH WERE USED FOR COLUMN F, LINE A, ENTITY CONSTRUCTION/RENOVATION SCHEDULE K, PART I,

TO REFUND PRIOR REISSUANCE OF 2004 BONDS (6/29/2004) WHICH WERE USED ISSUE (6/6/2000) AND FOR CONSTRUCTION/RENOVATION SCHEDULE K, PART I, COLUMN F, LINE D, ENTITY 10-08-13 COLUMN F, LINE B, ENTITY SCHEDULE K, PART I,

Schedule K (Form 990) 2013 COE COLLEGE	Page 4
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued) REFUND PRIOR ISSUE (7/15/1998), CONSTRUCTION/RENOVATION	
SCHEDULE K, PART II, LINE 3, ENTITY 1 THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART 1, COLUMN(E) DUE TO INVESTMENT EARNINGS.	
PART IV, LINE 2C NOTE REGARDING THE REBATE COMPUTATIONS: SINCE THE BOND PROCEEDS HAVE BEEN SPENT A SPENDING EXCEPTION WAS MET OR THE BONDS WERE ISSUED ON A DRAWDOWN BASIS, AND THE DEBT SERVICE FUND WAS OPERATED ON A BONA FIDE	
NO FORTIER ABBRIE CAUCOLATIONS	
332 124 10-09-13	Schedule K (Form 990) 2013

SCHEDULE L

Transactions With Interested Persons

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 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 organization		<u>.</u>						Em	oloyer	ident	ificati	on nu	mber
	COE COLL				• •			42	-06	864	67		
					section 501(c)(4) org								
					art IV, line 25a or 25t	b, or	Form 990-EZ, P	art V,	ine 40	b	<u> </u>		
(a) Name of disqualified p	person (b)	Relationship bet person and o			lified (c	c) De	scription of trar	sactio	n				cted?
									-		- Y	es	No
							-				-		
-													
 -											\bot		
								-	·				
2 Enter the amount of tax section 4958	incurred by the	organization mar	nagers	or dis	qualified persons du	ring 1	he year under		•				
3 Enter the amount of tax,	if any on line 2	ahove reimburs	sed by	the or	rganization				• •				
o entor the amount of tax,	ii diiy, oii iiilo z	i, abovo, remibare	oca cy		gamzanon				Ψ				
Part II Loans to and	d/or From Ir	nterested Per	sons	· ·									
Complete if the o	organization an	swered "Yes" on	Form :	990-EZ	, Part V, line 38a or f	Form	990, Part IV, Irr	ne 26;	or If th	e orga	anızatı	on	
· · · · · · · · · · · · · · · · · · ·		90, Part X, line 5,	$\overline{}$		1					/L\ \ \ \ \	provind		
(a) Name of interested person	(b) Relationship		fror	oan to or m the	(e) Original principal amount	(f)	Balance due	(g) defa		l bv bo	proved ard or		ritten ment?
interested person	Willi Organizatio	01 10211		zation?	1						nittee?		
			То	From		-	•	Yes	No	Yes	No	Yes	No
	<u> </u>												\vdash
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	 		 	1					-		 		
			 	 									
Total	'	1	1		▶ \$								
Part III Grants or As	sistance Be	enefiting Inte	reste	d Pe	rsons.								
Complete if the c	organization an	swered "Yes" on	Form 9	990, Pa	art IV, line 27								
(a) Name of interested i	person	(b) Relationship			(c) Amount of		(d) Type			•) Purp		f
		interested pers the organiz		na	assistance		assistan	ice		•	assista	ance	
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(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's
				Yes	nues? No
US BANK	ENTITY FOR WHICH ST		BANKING SER		X
JOHN STROHM	TRUSTEE		JOHN STROHM		X
JANICE MCINALLY	SPOUSE OF DAVID MCI	15,000.	JANICE MCIN		X
Part V Supplemental Information					
" "	esponses to questions on Schedule L (see ii	nstructions)			
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVIN	NG INTEREST	ED PERSONS:		
(A) NAME OF PERSON: US B	ANK				
(B) DELATIONEUTO DETWEEN	TNMEDECMED DEDCON AND		ITON.		
(B) RELATIONSHIP BETWEEN	INTERESTED PERSON AND	ORGANIZAT	ION:		
ENTITY FOR WHICH STEVE C	AVES, TRUSTEE, SERVES	AS AN OFFI	CER		
(C) AMOUNT OF TRANSACTIO	N \$ 969,589.				
(D) DESCRIPTION OF TRANS	ACTION: BANKING SERVIC	CES, INCLUI	ING DEPOSIT	l	
ACCOUNTS AND DEBT FINANC	ING IN ADDITION TO TRU	JST SERVICE	S.		
(E) SHARING OF ORGANIZAT	ION REVENUES? = NO				
(A) NAME OF PERSON: JOHN	STROHM				
(B) RELATIONSHIP BETWEEN	INTERESTED PERSON ANI	ORGANIZAT	ION:		
TRUSTEE					_
(C) AMOUNT OF TRANSACTIO	N \$ -0-				
(D) DESCRIPTION OF TRANS	ACTION: JOHN STROHM AN	ND COE COLI	ÆGE HAVE GR	EATE	 R
THAN 10% OWNERSHIP INTER					
					
(E) SHARING OF ORGANIZAT	ION REVENUES? = NO		 ·		
					1
(A) NAME OF PERSON: JANI	CE MCINALLY		-		
(B) RELATIONSHIP BETWEEN	INTERESTED PERSON AND	ORGANIZAT	CION:		
SPOUSE OF DAVID MCINALLY	, TRUSTEE/PRESIDENT				

Sched	iule '	<u>L (Form 990</u>			OE CO	LLEGE				42-0686467	Page 2
Part	<u> V</u>	_ Supple	mental l	Informa	ation						
		Complete	this part t	to provide	<u>additiona</u>	ıl ınformatı	on for response	es to questions on	Schedule L (see ii	nstructions).	
<u>(C)</u>	A	MOUNT	OF TRA	ANSAC	TION	<u>\$ 15,</u>	000.				
<i>(</i> – <i>)</i>	_										
(D)	_D	ESCRIP	TION (OF TR	RANSAC	TION:	JANICE	MCINALLY	RECEIVED	COMPENSATION	
											
FROI	M	THE CO	<u> TPRGR</u>	AS A	N EMP	TOXEE	•		<u> </u>		
/ [- \	c.	UNDTNC		D C A NI I	7 3 M T ()	מוסו זא	ENTIRES.	NO.			
757	<u> </u>	DAKING	OF OI	KGANI	ZATIO	M KEV	ENUES?	= NO			
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

Open to Public Inspection

Employer identification number

	COE COLLEGE				42-0	686	467	
Pa	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermır	-	ts
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes .							
8	Intellectual property			- "				
9	Securities - Publicly traded	X	40	992,390.	STOCK EXCHA	NGE		
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							
16	Real estate - Commercial							
17	Real estate - Other	L						
18	Collectibles				_			
19	Food inventory							_
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens						_	
24	Archeological artifacts							
25	Other ()							
26	Other							
27	Other ()							
28	Other (<u> </u>				
29	Number of Forms 8283 received by the organ		-	I 1				
	for which the organization completed Form 82	283, Part IV,	Donee Acknowledg	gement 29			0	
							Yes	No
30a	During the year, did the organization receive b	•		•				
	at least three years from the date of the initial	contribution	, and which is not i	required to be used for exem	npt purposes for			
	the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II						:	
31	Does the organization have a gift acceptance	• •	•	•	utions?	31	_X_	<u> </u>
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	ı column (c) f	for a type of proper	ע זor which column (a) is ch	ecked.			i

describe in Part II

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.
SCHEDULE M, PART I, COLUMN (B):
REPORTING NUMBER OF CONTRIBUTIONS

SCHEDULE O

(Form 990 or 990-FZ)

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.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 42-0686467

COE COLLEGE FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: AND SERVICE PURSUITS AVAILABLE. COE IS RECOGNIZED AS ONE OF THE FINEST LIBERAL ARTS COLLEGES IN THE COUNTRY BY A VARIETY OF WIDELY RESPECTED COLLEGE RANKING PUBLICATIONS THAT WEIGH ACADEMIC OUALITY AND STUDENT SELECTIVITY. COE COLLEGE ENJOYS BOTH AN EXCELLENT REGIONAL REPUTATION AND NATIONAL RECOGNITION FOR THE STRENGTH OF ITS PROGRAMS. THROUGH CAREFUL PLANNING, SELECTIVE USE OF RESOURCES, AND THE EFFORTS OF A DEDICATED FACULTY AND STAFF, COE HAS NOT ONLY MAINTAINED BUT STRENGTHENED ITS POSITION AMONG LIBERAL ARTS COLLEGES IN THE MIDWEST. FORM 990, PART VI, SECTION A, LINE 2: JOHN STROHM - TRUSTEE, DAVID CARSON - TRUSTEE, KEN GOLDER -TRUSTEE AND RICHARD MEISTERLING - OFFICER HAVE A BUSINESS RELATIONSHIP. FORM 990, PART VI, SECTION B, LINE 11: THE COLLEGE'S BUDGET AND AUDIT SUBCOMMITTEE OF THE BOARD OF TRUSTEES CONDUCTS A THOROUGH REVIEW OF FORM 990'S FILED BY THE COLLEGE PRIOR TO BEING FILED WITH THE IRS. THE SUBCOMMITTEE RECEIVES THE RETURNS FROM THE PAID PREPARER, MCGLADREY LLP THE SUBCOMMITTEE AND A REPRESENTATIVE FROM MCGLADREY REVIEW THE RETURNS TOGETHER. ALL MEMBERS OF THE BOARD OF TRUSTEES ARE ADVISED OF THE REVIEW OF THE FORM 990S BY THE BUDGET AND AUDIT EACH MEMBER OF THE BOARD OF TRUSTEES RECEIVES AN EMAIL (1) SUBCOMMITTEE.

PROVIDING THE TRUSTEE WITH ACCESS TO A COMPLETE COPY OF THE RETURNS THROUGH

THE RETURNS ARE AVAILABLE FOR FURTHER REVIEW BY ANY BOARD MEMBER AND THAT RETURNS WILL BE FILED BY THE DUE DATES.

FORM 990, PART VI, SECTION B, LINE 12C:

THE COLLEGE REQUIRES ALL TRUSTEES, OFFICERS OR KEY EMPLOYEES AND SUBSTANTIAL CONTRIBUTORS TO ANNUALLY COMPLETE THE CONFLICT OF INTEREST OUESTIONNAIRE CONCERNING TRANSACTIONS WITH COE COLLEGE. THE EXECUTIVE VICE PRESIDENT FOR THE COLLEGE RECEIVES COMPLETED QUESTIONNAIRES AND REVIEWS AND SUBMITS COMMENTS AND FINDINGS TO THE PRESIDENT OF THE COLLEGE AND THE CHAIRMAN OF THE BOARD OF TRUSTEES. THE CHAIRMAN OF THE BOARD THEN REVIEWS AND INFORMS THE FULL BOARD OF ANY ISSUES OR ACTIONS REQUIRED INCLUDING MONITORING WITH AN OVERSIGHT COMMITTEE IF NECESSARY.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR THE PRESIDENT IS REVIEWED BY A BOARD OF TRUSTEES AD HOC COMMITTEE. THE COMMITTEE CONSIDERS THE PRESIDENT ON HIS MERITS, LENGTH OF SERVICE AND JOB RESPONSIBILITIES. THE PRESIDENT'S COMPENSATION IS THEN COMPARED TO SIMILAR POSITIONS AT OTHER COLLEGES USING SURVEYS AND BENCHMARKS FROM THE ACM (ASSOCIATED COLLEGES OF THE MIDWEST) AND IPCUA (IOWA PRIVATE COLLEGES AND UNIVERSITIES ASSOCIATION). THE COMMITTEE THEN REPORTS TO THE BOARD OF TRUSTEES THEIR DUE DILIGENCE THAT WAS PERFORMED AND DOCUMENTS THE REVIEW. THE DOCUMENTATION REGARDING THE COMPENSATION REVIEW IS RETURNED TO THE COLLEGE'S LEGAL COUNSEL FOR SAFEKEEPING.

FORM 990, PART VI, SECTION C, LINE 19:

THE COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

AND FINANCIAL STATEMENT ARE NOT MADE AVAILABLE TO THE PUBLIC. THE COLLEGE Schedule O (Form 990 or 990-EZ) (2013)

332212 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Employer identification number Name of the organization 42-0686467 COE COLLEGE DOES FILE VARIOUS REQUIRED REPORTS SUCH AS THE A-133 AND AUDITED FINANCIAL STATEMENTS WITH VARIOUS GOVERNMENTAL AGENCIES AND AUTHORITIES WHICH MAY THEN BECOME PUBLIC RECORD. THE IRS FORM 990 FILED BY COE COLLEGE IS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: 37,735. ADJUSTMENT FOR FACULTY RETIREMENT PLAN CHANGE IN FMV - INTEREST RATE SWAP 106,265. 81,706. CHANGE IN ANNUITY & LIFE AGREEMENTS BOOK / TAX DIFFERENCE PUBLICLY TRADED PARTNERSHIP INTERESTS 7,505. TOTAL TO FORM 990, PART XI, LINE 9 233,211. FORM 990, PAGE 2, PART III ORGANIZATION MISSION IT IS THE MISSION OF COE COLLEGE TO PROVIDE STUDENTS AN EDUCATION OF SUPERIOR OUALITY THAT AIMS AT PREPARING THEM FOR LIFE FOLLOWING GRADUATION. OUR REASON TO EXIST AS AN INSTITUTION IS TO READY STUDENTS INTELLECTUALLY, PROFESSIONALLY, AND SOCIALLY TO LEAD PRODUCTIVE AND SATISFYING LIVES IN THE GLOBAL SOCIETY OF THE 21ST CENTURY. AS SUCH, OUR SUCCESS AS A COLLEGE IS MEASURED ACCORDING TO THE SUCCESS OF OUR GRADUATES. WE BELIEVE THAT A LIBERAL ARTS EDUCATION IS THE BEST PREPARATION FOR LIFE. WE BELIEVE THAT SUCH AN EDUCATION ALLOWS STUDENTS TO DISCOVER WHAT THEIR REAL TALENTS AND INTERESTS ARE. AND THAT IT DEVELOPS IN THEM THE SKILLS, ABILITIES, AND HABITS OF MIND THAT WILL MAKE POSSIBLE A SUCCESSFUL CAREER IN ANY FIELD OF ENDEAVOR, INCLUDING ONES THAT DO NOT EXIST. INDEED, WE BELIEVE THAT WHAT DEFINES A LIBERAL ARTS

332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013)

EDUCATION IS ITS FOCUS ON CULTIVATING IN STUDENTS CERTAIN FUNDAMENTAL ABILITIES: THE ABILITY TO THINK LOGICALLY AND ANALYTICALLY; THE ABILITY TO COMMUNICATE CLEARLY, BOTH IN WRITING AND SPEAKING: THE ABILITY TO USE EFFECTIVELY COMPUTER TECHNOLOGY: THE ABILITY TO WORK PRODUCTIVELY AS A MEMBER OF A GROUP SEEKING TO ACHIEVE A COMMON OBJECTIVE: THE ABILITY TO MAKE INFORMED JUDGMENTS, WHETHER IN THE REALM OF ETHICAL BEHAVIOR OF IN THAT OF AESTHETIC APPRECIATION; THE ABILITY TO FOSTER AND SUSTAIN AN ATTITUDE OF INTELLECTUAL CURIOSITY AND CREATIVITY; AND THE ABILITY TO RECOGNIZE AND HONOR TRUE EXCELLENCE WHEN FOUND IN ANY FORM OR CONTEXT. FURTHERMORE, WE BELIEVE THAT IT IS IMPORTANT FOR A LIBERAL ARTS EDUCATION TO CULTIVATE IN STUDENTS A DESIRE TO UNDERSTAND, A CAPACITY FOR TOLERANCE, AND AN ABILITY TO APPRECIATE THE ETHNIC AND CULTURAL DIVERSITY THAT MAKE UP HUMAN KIND. IT IS THE MISSION OF THE COLLEGE TO DEVELOP IN STUDENTS THESE ABILITIES AND ATTITUDES, AND IN SO DOING TO PROVIDE THEM AN EDUCATION THAT DIRECTS THEM TOWARD A MEANINGFUL AND SUCCESSFUL LIFE.

COE'S ACADEMIC PROGRAM REFLECTS A COMMITMENT TO DEVELOPING THESE

ABILITIES BY ITS INSISTENCE THAT STUDENTS ACQUIRE CERTAIN EDUCATIONAL

EXPERIENCES. WE REQUIRE THAT STUDENTS COMPLETE BOTH OUR GENERAL

EDUCATION REQUIREMENTS, WHICH ENSURE BREADTH OF LEARNING, AND OUR

REQUIREMENTS FOR A MAJOR; WHICH GUARANTEE DEPTH OF KNOWLEDGE IN A

PARTICULAR FIELD. IN ADDITION, AS PART OF EACH STUDENT'S EDUCATION, A

SERIES OF INTENSIVE WRITING EXPERIENCES, SPREAD ACROSS THE FOUR YEARS

OF STUDY, IS REQUIRED. BEYOND THESE REQUIREMENTS, STUDENTS ARE

ENCOURAGED TO BEGIN PLANNING FOR THEIR LIVES AFTER COLLEGE EARLY ON IN

THEIR UNDERGRADUATE CAREERS, AND, THROUGH CAREFUL ADVISING, THEY ARE

GIVEN GUIDANCE AND DIRECTION IN THIS ENDEAVOR. INDEED, THE DEFINING

AND PARTICIPATE IN ONE OF THE FOLLOWING: A SIGNIFICANT EXPERIENTIAL

PROJECT, SUCH AS AN INTERNSHIP; A MAJOR SCHOLARLY UNDERTAKING; OR STUDY

ABROAD. THESE EXPERIENCES WILL OFTEN, THOUGH NOT INVARIABLY, OCCUR

DURING THE JUNIOR YEAR.

THE HALLMARK OF A COE EDUCATION IS OUR ATTENTION TO EACH STUDENT AS AN INDIVIDUAL. IT IS ALSO IMPORTANT THAT THE COLLEGE ENVIRONMENT AT COE REFLECTS OUR COMMITMENT TO A DIVERSE STUDENT BODY AND OVERALL COLLEGE COMMUNITY. WE BELIEVE THAT THROUGH LISTENING CAREFULLY TO EACH STUDENT AS HIS OR HER INTERESTS AND UNIQUE TALENTS ARE FORMED, AND THROUGH TAILORING AN ACADEMIC PROGRAM TO SUIT EACH STUDENT'S FUTURE, WE HELP THAT STUDENT DEVELOP ABILITIES THAT PROVIDE THE BEST PREPARATION FOR LIFE.

FORM 990, PART VII SALARY EXPLANATION

FRANCIS MARY MISKIMEN COMPENSATION LISTED IS FOR POSITION

AS EMPLOYEE OF COE COLLEGE NOT FOR POSITION AS ASSISTANT SECRETARY OF

BOARD. SHE IS A 40 HOUR PER WEEK EMPLOYEE OF THE COLLEGE.

MARIE BAEHR TIMKO OTHER COMPENSATION AMOUNT IN COLUMN (F) INCLUDES \$30,177 OF TUITION WAIVER FOR DEPENDENT.

DAVID MCINALLY OTHER COMPENSATION AMOUNT IN COLUMN (F) INCLUDES \$15,750 OF TUITION WAIVER FOR DEPENDENT.

FORM 990, PAGE 1, ITEM B

REASON FOR AMENDING - SCHEDULE K

332212 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization COE COLLEGE	Employer identification number 42-0686467
UPON REVIEW OF THE COLLEGE'S POST-ISSUANCE COMPLIANCE PRO	CEDURES, IT
WAS DISCOVERED THAT THE COLLEGE HAD INACCURATELY REPORTED	THE PRIVATE
BUSINESS USE PERCENTAGE RESULTING FROM A MANAGEMENT CONTR	ACT ON ITS
SCHEDULE K UNDER ITS 2009 BONDS IN COLUMN B. THE PERCENT	AGE THAT WAS
REPORTED WAS 11.4% AND THE PRIVATE BUSINESS USE THAT SHOU	LD HAVE BEEN
REPORTED WAS 4.18%. AS OF AUGUST 1, 2015, THE COLLEGE AM	ENDED ITS
MANAGEMENT CONTRACT TO COMPLY WITH A SAFE HARBOR STANDARD	UNDER REV.
PROC. 97-13 AND ANTICIPATES THAT THE PRIVATE BUSINESS AFT	ER SUCH DATE
WILL BE 0%.	

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

COE COLLEGE

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

➤ See separate instructions.

2013 Open to Public Inspection

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

Employer identification number 42-0686467

(g) Section 512(b)(13) ŝ controlled entity? Direct controlling Yes × × × 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. Direct controlling COE COLLEGE COE COLLEGE COE COLLEGE End-of-year assets status (if section Public charity 501(c)(3)) 11A Total income Exempt Code Ð section 501(C)(3) 501(C)(3) 501(C)(3) চ Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) LOWA IOWA OWA Primary activity Primary activity SUPPORTING TRUST SUPPORTING TRUST SUPPORTING TRUST 9 39-6787027 1220 FIRST AVE NE CEDAR RAPIDS 39-6787028, 1220 FIRST AVE NE, CEDAR RAPIDS 39-6787527, 1220 FIRST AVE NE, CEDAR RAPIDS K RAYMOND CLARK ATHLETIC FACILTIES TRUST Name, address, and EIN (if applicable) K RAYMOND CLARK ALUMNI CENTER TRUST -Name, address, and EIN K RAYMOND CLARK CHARITABLE TRUST of related organization of disregarded entity IA 52402 IA 52402 IA 52402 Part II Part

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

39-6787026, 1220 FIRST AVE NE, CEDAR RAPIDS,

K RAYMOND CLARK RACQUET CENTER TRUST

Schedule R (Form 990) 2013

COE COLLEGE

501(C)(3)

42-0686467 Page 2

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Schedule R (Form 990) 2013 COE COLLEGE

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

(K)	General or Percentage managing ownership partner?									
(1)	General or managing partner?									
(ı)	Code V-UBI amount in box m 20 of Schedule EX-1 (Form 1065)	_								
(h)	Disproportionate allocations?									
(6)	Share of end-of-year assets			_	-					
(J)	Sha -									
(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)									
(p)	Direct controlling entity									
(၁)	Legal domicile (state or foreign country)			-						
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

Identification of Related Organizations Taxable 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 organizations treated as a corporation or trust during the tax year Part IV

	<u>.</u>	110n 5(13)	olled ity?	ž								
) ~	512(controlled entity?	Yes								
	(h)	Percentage	ownership									
	(6)	Share of	end-of-year									
	(J)	Share of total	псоте									
	(e)	Type of entity	(C corp, S corp,	(1)		·						
	(a) (b)	Direct controlling	entity									
	(c)	Legal domicile	(state or foreign	country)								
iiig tile tax year	(q)	Primary activity										
organizations treated as a corporation of trust during the tax year	(a)	Name, address, and EIN	of related organization									

Schedule R (Form 990) 2013

Page 3

Yes

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - b Gift, grant, or capital contribution to related organization(s)
- c 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)
- 1 Performance of services or membership or fundraising solicitations for related organization(s)
- 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)

ormation on who must complete this line, including covered relationships and transaction thresholds	(d) Method of determining amount involved	CTUAL	CTUAL	CTUAL	CTUAL	CTUAL	
ns line, including covered n	(c) Amount involved	19,638.ACTUAL	61,691.ACTUAL	154,687.ACTUAL	28,715.ACTUAL	278,532.ACTUAL	
tho must complete th	(b) Transaction type (a·s)	ນ	o	۵	C	Õ	
2 If the answer to any of the above is "Yes," see the instructions for information on w	(a) Name of related organization	(1) K RAYMOND CLARK ALUMNI CENTER TRUST	(2) K RAYMOND CLARK ALUMNI CENTER TRUST	(3) K RAYMOND CLARK ATHLETIC FACILITIES	(4) K RAYMOND CLARK RACQUET CENTER TRUST	(6) K RAYMOND CLARK RACQUET CENTER TRUST	(9)

42-0686467

Page 4

Schedule R (Form 990) 2013 COE COLLEGE

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

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

	(K) Percentage ownership									:									
5	General or managing	yes No																	
	(n) (l) (k) Ospropor- Code V-UBI General or Percentage bindle amount in box 20 managing ownership	of Schedule K-1 (Form 1065)							•										
[2	(n) uspropor- tonate	es No						 									_	 	_
	(g) Share of													-					
	(r) Share of total	_	-		-														
[Are all 501(c)(3)	es No														 			_
sament parmerships.	(a) Predominant income parties se (felated, unrelated, 501(c)(3)	excluded from tax under section 512-514)					•												
sion for certain may	(c) Legal domicile	country)																	
arractions regarding even	(b) Primary activity																		
triat was not a related organization. See mistructions regarding excusion for tall myestiment partitions amps	(a) Name, address, and EIN of entity	Conny																	

Schedule R (Form 990) 2013

Schedule H	(Form 990) 2013	<u>42-0686467 Page 5</u>
Part VII	Supplemental Information	
	Provide additional information for responses to questions on Schedule R (see instructions).	
		
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