efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
Biola University Inc

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
13800 BIOLA AVENUE
Suite

City or town, state or province, country, and ZIP or foreign postal code
LA MIRADA, CA 906390001

D Employer identification number
95-0549600

E Telephone number
(562) 903-6000

G Gross receipts $ 234,509,814

F Name and address of principal officer
Barry H Corey
13800 BIOLA AVENUE
LA MIRADA, CA 906390001

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ www biola edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1908

M State of legal domicile CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
BIOLA UNIVERSITY IS A PRIVATE CHRISTIAN UNIVERSITY LOCATED IN SOUTHERN CALIFORNIA THE MISSION OF THE UNIVERSITY IS BIBLICALLY CENTERED EDUCATION, SCHOLARSHIP AND SERVICE

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	3,786
6	Total number of volunteers (estimate if necessary)	6	19
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	3,440
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-2,537

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	8,577,816	11,698,331
	9	Program service revenue (Part VIII, line 2g)	177,315,445	181,551,782
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,041,602	6,460,953
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-69,815	6,523
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	189,865,048	199,717,589
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	34,884,353	38,278,867
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	87,934,457	96,356,293
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	132,000	132,000
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,837,540		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	55,546,055	51,383,991
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	178,496,865	186,151,151
	19	Revenue less expenses Subtract line 18 from line 12	11,368,183	13,566,438

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	373,391,680	399,423,110
	21	Total liabilities (Part X, line 26)	175,320,851	176,115,626
	22	Net assets or fund balances Subtract line 21 from line 20	198,070,829	223,307,484

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2014-11-11
Signature of officer Date

Dave Koontz Assistant Secretary
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
ROSEMARIE BROWN				P01278077

Firm's name ▶ GRANT THORNTON LLP | Firm's EIN ▶

Firm's address ▶ 515 S FLOWER STREET 7TH FLOOR
LOS ANGELES, CA 90071 | Phone no (562) 903-6000

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

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** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **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 others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 74,799,580 including grants of $ 19,241,721) (Revenue $ 91,687,461)

See Schedule O -- School of Arts and Sciences

4b (Code) (Expenses $ 34,872,111 including grants of $ 8,970,631) (Revenue $ 42,745,364)

See Schedule O -- Talbot School of Theology

4c (Code) (Expenses $ 12,386,091 including grants of $ 3,186,244) (Revenue $ 15,182,562)

See Schedule O -- Rosemead School of Psychology

(Code) (Expenses $ 10,604,101 including grants of $ 2,727,838) (Revenue $ 12,998,243)

Cook School of Intercultural Studies

(Code) (Expenses $ 6,861,277 including grants of $ 1,765,020) (Revenue $ 8,410,383)

School of Education

(Code) (Expenses $ 6,255,407 including grants of $ 1,609,164) (Revenue $ 7,667,722)

Crowell School of Business

(Code) (Expenses $ 1,562,351 including grants of $ 401,905) (Revenue $ 1,915,091)

Interterm

(Code) (Expenses $ 1,462,983 including grants of $ 376,343) (Revenue $ 1,793,288)

Summer School

4d Other program services (Describe in Schedule O)

(Expenses $ 26,746,119 including grants of $ 6,880,270) (Revenue $ 32,784,727)

4e **Total program service expenses ▶** 148,803,902

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16	Yes	
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If so, complete Schedule L, Part II*	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part 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	394			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	3,786			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
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	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶GM See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			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.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . .	**1a** 19			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent . . .	**1b** 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders? . . .		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .		**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . .	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	**11a**		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . .			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13* . . .	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	**12c**	Yes	
13	Did the organization have a written whistleblower policy? . . .	**13**		No
14	Did the organization have a written document retention and destruction policy? . . .	**14**		No
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?			
a	The organization's CEO, Executive Director, or top management official . . .	**15a**		No
b	Other officers or key employees of the organization . . .	**15b**		No
	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**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . .	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶CA

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

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

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶MICHAEL PIERCE 13800 BIOLA AVENUE

La Mirada, CA 90639 (562) 903-4777

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	Sub-Total . . . . ▶			
c	Total from continuation sheets to Part VII, Section A . . . . ▶			
d	Total (add lines 1b and 1c) . . . . ▶	2,899,702	0	675,739

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶137

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	Yes	
4	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*	4	Yes	
5	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*	5		No

Section B. Independent Contractors

1 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

(A) Name and business address	(B) Description of services	(C) Compensation
Bon Appetit Management Company, 14730 Beach Blvd Ste 107 LA MIRADA CA 90638	FOOD MANAGEMENT	6,551,330
Sherwood Builders, 1401-B S Beach Blvd LA HABRA CA 90631	GENERAL CONTRACTOR	936,438
Ron Poulson Associates Inc, 766 Lakefield Rd Ste D WESTLAKE VILLAGE CA 913612662	GENERAL CONTRACTOR	254,661
Juan Figueroa Electric Inc, 12533 Lambert Road WHITTIER CA 906062711	GENERAL CONTRACTOR	301,339
Air Control Systems Inc, 1940 S Grove Ave ONTARIO CA 917616515	GENERAL CONTRACTOR	629,146

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 ▶50

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	49,455				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	764,959				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	10,883,917				
	g	Noncash contributions included in lines 1a-1f $	285,064				
	h	**Total.** Add lines 1a-1f . . . . ▶		11,698,331			
Program Service Revenue			Business Code				
	2a	TUITION AND FEES	611600	150,946,275	150,946,275		
	b	AUXILIARY SERVICE SALES	611710	25,402,275	25,402,275		
	c	PUBLIC AND STUDENT FEES	611600	3,897,919	3,897,919		
	d	OTHER PROGRAM SERVICE	611710	1,305,313	1,305,313		
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		181,551,782			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		3,396,922			3,396,922
	4	Income from investment of tax-exempt bond proceeds . . ▶		0			
	5	Royalties . . . . ▶		50,396			50,396
			(i) Real / (ii) Personal				
	6a	Gross rents	(i) 452,676 / (ii)				
	b	Less rental expenses	(i) 605,983 / (ii)				
	c	Rental income or (loss)	(i) -153,307 / (ii) 0				
	d	Net rental income or (loss) . . . . ▶		-153,307			-153,307
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 37,141,831 / (ii) 54,750				
	b	Less cost or other basis and sales expenses	(i) 34,064,761 / (ii) 67,789				
	c	Gain or (loss)	(i) 3,077,070 / (ii) -13,039				
	d	Net gain or (loss) . . . . ▶		3,064,031			3,064,031
	8a	Gross income from fundraising events (not including $ 49,455 of contributions reported on line 1c) See Part IV, line 18 . . a	76,314				
	b	Less direct expenses . . . b	53,692				
	c	Net income or (loss) from fundraising events . . ▶		22,622			22,622
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	ADVERTISING INCOME	541800	3,440		3,440	
	b	OTHER REVENUE	900099	83,372	83,372		
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		86,812			
	12	**Total revenue.** See Instructions . . . . . ▶		199,717,589	181,635,154	3,440	6,380,664

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	37,972,236	37,972,236		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	306,631	306,631		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,436,306	1,855,383	580,923	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	71,660,962	53,211,831	16,660,684	1,788,447
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,688,403	2,808,925	879,478	
9 Other employee benefits	13,323,701	10,146,744	3,176,957	
10 Payroll taxes	5,246,921	3,995,824	1,251,097	
11 Fees for services (non-employees)				
a Management	0			
b Legal	37,285	28,395	8,890	
c Accounting	116,828	88,971	27,857	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	132,000			132,000
f Investment management fees	438,526	333,962	104,564	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	15,122,699	11,516,782	3,605,917	
12 Advertising and promotion	1,366,838	1,014,083	317,510	35,245
13 Office expenses	2,814,834	2,052,440	642,621	119,773
14 Information technology	2,940,531	2,192,282	686,406	61,843
15 Royalties . .	0			
16 Occupancy	3,605,221	2,744,508	859,308	1,405
17 Travel	2,899,286	2,124,031	665,037	110,218
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	477,670	345,082	108,045	24,543
20 Interest	7,287,065	5,537,473	1,733,789	15,803
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	9,154,058	6,925,886	2,168,503	59,669
23 Insurance	798,709	601,210	188,240	9,259
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a LICENSE AND FEES	2,668,029	1,806,636	565,660	295,733
b SUBSCRIPTIONS	118,583	80,298	25,141	13,144
c HONORARIUMS	771,138	522,170	163,493	85,475
d DEPARTMENT MEALS	766,691	519,159	162,549	84,983
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	186,151,151	148,730,942	34,582,669	2,837,540
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)				

Part 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
Assets	**1**	Cash–non-interest-bearing		17,305,415	**1**	27,891,141
	2	Savings and temporary cash investments		55,106,388	**2**	37,113,552
	3	Pledges and grants receivable, net		4,995,764	**3**	4,361,460
	4	Accounts receivable, net		2,326,883	**4**	1,568,290
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		1,089,409	**5**	1,072,491
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	**6**	0
	7	Notes and loans receivable, net		8,070,473	**7**	5,023,788
	8	Inventories for sale or use		704,604	**8**	334,966
	9	Prepaid expenses and deferred charges		991,452	**9**	1,257,509
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	**10a** 267,341,658			
	b	Less accumulated depreciation	**10b** 108,443,148	146,749,087	**10c**	158,898,510
	11	Investments—publicly traded securities		109,500,125	**11**	129,029,900
	12	Investments—other securities See Part IV, line 11		4,292,815	**12**	8,426,465
	13	Investments—program-related See Part IV, line 11		12,541,314	**13**	10,705,051
	14	Intangible assets		0	**14**	0
	15	Other assets See Part IV, line 11		9,717,951	**15**	13,739,987
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		373,391,680	**16**	399,423,110
Liabilities	**17**	Accounts payable and accrued expenses		12,960,987	**17**	13,639,834
	18	Grants payable		0	**18**	0
	19	Deferred revenue		6,087,440	**19**	10,310,752
	20	Tax-exempt bond liabilities		132,346,952	**20**	132,336,615
	21	Escrow or custodial account liability Complete Part IV of Schedule D . .		0	**21**	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	**22**	0
	23	Secured mortgages and notes payable to unrelated third parties . .		11,769,930	**23**	7,292,508
	24	Unsecured notes and loans payable to unrelated third parties		0	**24**	0
	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		12,155,542	**25**	12,535,917
	26	**Total liabilities.** Add lines 17 through 25		175,320,851	**26**	176,115,626
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		158,177,240	**27**	176,940,197
	28	Temporarily restricted net assets		21,830,035	**28**	26,370,055
	29	Permanently restricted net assets		18,063,554	**29**	19,997,232
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			**30**	
	31	Paid-in or capital surplus, or land, building or equipment fund			**31**	
	32	Retained earnings, endowment, accumulated income, or other funds			**32**	
	33	Total net assets or fund balances		198,070,829	**33**	223,307,484
	34	Total liabilities and net assets/fund balances		373,391,680	**34**	399,423,110

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	199,717,589
2	Total expenses (must equal Part IX, column (A), line 25)	2	186,151,151
3	Revenue less expenses Subtract line 2 from line 1	3	13,566,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	198,070,829
5	Net unrealized gains (losses) on investments	5	11,296,328
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	373,889
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	223,307,484

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a 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	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Additional Data

Software ID:
Software Version:
EIN: 95-0549600
Name: Biola University Inc

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Barry Corey President	40 0 0 0	X		X				377,698	0	65,433
Bradley Cole Trustee	2 0 0 0	X						0	0	0
Dwight Hanger Trustee	2 0 0 0	X						0	0	0
Promod Hague Trustee	2 0 0 0	X						0	0	0
Carol Hawkins Trustee	2 0 0 0	X						0	0	0
Stanley Jantz TRUSTEE	2 0 0 0	X						0	0	0
Ray Johnson Trustee	2 0 0 0	X						0	0	0
David Karnes Trustee	2 0 0 0	X						0	0	0
Allan Kavalich Trustee	2 0 0 0	X						0	0	0
Hannah Lee Trustee	2 0 0 0	X						0	0	0
Bryan Loritts Trustee	2 0 0 0	X						0	0	0
Wayne Lowell Vice Chair	2 0 0 0	X						0	0	0
Michael Maples Trustee	2 0 0 0	X						0	0	0
Al Mijares Trustee	2 0 0 0	X						33,737	0	0
David Mitchell Trustee	2 0 0 0	X						0	0	0
Jerry Rueb Trustee	2 0 0 0	X						0	0	0
John Siefker Trustee	2 0 0 0	X						0	0	0
Kennith Thompson Trustee	2 0 0 0	X						0	0	0
Rebecca Andrews Trustee	2 0 0 0	X						0	0	0
David Gyertson Trustee	2 0 0 0	X						0	0	0
Greg Balsano VP of University Services	40 0 0 0			X				188,486	0	31,788
Christopher Grace VP Student Development	40 0 0 0			X				183,699	0	94,933
David Koontz Assistant Secretary	40 0 0 0			X				141,598	0	36,540
Adam Morris VP Advancement	40 0 0 0			X				185,218	0	108,950
David Nystrom Provost and Senior VP	40 0 0 0			X				221,500	0	35,488

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Michael Pierce VP, Bus and Financial Affairs	40 0 0 0			X				228,284	0	61,343
Gregory Vaughan VP Enrollment Management	40 0 0 0			X				171,310	0	32,315
Sandra Weaver Assistant Secretary	40 0 0 0			X				140,357	0	19,737
Irene Neller VP UMC	40 0 0 0			X				118,849	0	8,355
Brian Miller Interim VP, UCM	40 0 0 0			X				104,695	0	23,893
Tamra Hocking Physician, Health Center	40 0 0 0					X		159,252	0	50,677
Jerry Mackey Corporate Legal	24 0 0 0					X		157,672	0	39,482
Scott Rae Professor	40 0 0 0					X		153,743	0	36,297
Peter C Hill Professor	40 0 0 0					X		161,632	0	17,656
Richard E Bee Sr Director Alumni and Parent	40 0 0 0					X		171,972		12,852

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☑ 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 organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions))**	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	**(iv)** No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	**(v)** No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	**(vi)** No	**(vii)** Amount of monetary support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning 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						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

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 for 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 ▶☐

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

Section A. Public Support

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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities 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)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 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 not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493047023165

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Biola University Inc	95-0549600

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		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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

2 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 Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 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)? ☐ Yes ☐ No

9 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

Part III 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 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 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 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	572,097
d	Additions during the year	1d	191,573
e	Distributions during the year	1e	45,600
f	Ending balance	1f	718,070

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	87,824,443	74,454,177	69,925,592	55,957,775	48,701,341
b	Contributions	8,650,281	8,293,758	7,131,678	8,914,823	5,889,673
c	Net investment earnings, gains, and losses	11,507,112	7,409,398	-492,943	7,336,522	3,400,253
d	Grants or scholarships	2,314,567	2,130,553	1,872,138	2,004,312	1,936,703
e	Other expenditures for facilities and programs	235,041	202,337	238,012	279,216	96,789
f	Administrative expenses					
g	End of year balance	105,432,228	87,824,443	74,454,177	69,925,592	55,957,775

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 73 100 %

b Permanent endowment ▶ 17 100 %

c Temporarily restricted endowment ▶ 9 800 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)	Yes	
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

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 other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,997,615		1,997,615
b Buildings		207,087,985	60,501,748	146,586,237
c Leasehold improvements				
d Equipment		48,984,846	40,009,820	8,975,026
e Other		9,271,212	7,931,580	1,339,632
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				158,898,510

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (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		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (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
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
Federal income taxes	0
LIABILITIES FOR ANNUITIES PAYABLE	6,854,182
AMOUNTS HELD ON BEHALF FOR OTHERS	1,356,273
ASSET RETIREMENT OBLIGATION	1,267,179
PERKINS NSL	3,058,283
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	12,535,917

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 ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	172,691,045
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	11,296,328		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	33,461		
e	Add lines **2a** through **2d**			2e	11,329,789
3	Subtract line **2e** from line **1**			3	161,361,256
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	451,356		
b	Other (Describe in Part XIII)	4b	37,904,977		
c	Add lines **4a** and **4b**			4c	38,356,333
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	199,717,589

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	147,454,389
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	33,461		
e	Add lines **2a** through **2d**			2e	33,461
3	Subtract line **2e** from line **1**			3	147,420,928
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	451,356		
b	Other (Describe in Part XIII)	4b	38,278,867		
c	Add lines **4a** and **4b**			4c	38,730,223
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	186,151,151

Part XIII **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE D, PART IV, LINE 1B	TRUST, ESCROW, AND CUSTODIAL ARRANGEMENT BIOLA (OR ITS DESIGNATED INDIVIDUAL) IS NAMED AS ADMINISTRATOR OR SUCCESSOR TRUSTEE ON TESTAMENTARY GIFTS (ESTATES OR REVOCABLE LIVING TRUSTS) WHEN THE AGREEMENT MATURES UPON THE DEATH OF THE GRANTOR, BIOLA ASSUMES ITS FIDUCIARY ROLE TO MARSHAL ASSETS, PAY EXPENSES AND DISTRIBUTE BENEFICIARY PAYMENTS THE ADMINISTRATION OF EACH ARRANGEMENT MAY LAST SEVERAL YEARS UNTIL ALL DISTRIBUTIONS ARE MADE AND THE ACCOUNTS ARE CLOSED
SCHEDULE D, PART V, LINE 4	INTENDED USE OF ENDOWMENT FUNDS The endowment earnings are used to underwrite the programs and administration of the university, with specific appropriations made to student aid, academic programs and facility maintenance
SCHEDULE D, PART X, LINE 2	ASC 740 FOOTNOTE The University follows ASC 740, Accounting for Income Taxes, which establishes for all entities, including pass-through entities, a minimum threshold for financial statement recognition of the benefit of positions taken in filing tax returns (including whether an entity is taxable in a particular jurisdiction) and requires certain expanded tax disclosures The open federal tax years for the University are generally tax years ended June 30, 2011 through 2014 and the open California state tax years are generally tax years ended June 30, 2010 through 2014 Management believes that no uncertain tax positions exist for the University at June 30, 2014 and 2013 and management does not anticipate a change in uncertain tax benefits in the 12 months following June 30, 2014
SCHEDULE D, PART XI, LINE 2D	RECONCILIATION OF REVENUE Direct Fundraising Expense $ 53,692 Arrington Square Corporation Loss $ -20,231 Schedule D, Part XI, Line 4b Arrington Square Corporation $ 191,087 Split-Interest Agreements $ -564,977 Student Financial Aid $ 38,278,867 Reconciliation of Expenses Schedule D, Part XII, Line 2d Direct Fundraising Expenses $ 53,692 Arrington Square Corporation Loss $ -20,231 Schedule D, Part XII, Line 4b Student Financial Aid $ 38,278,867

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I

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

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

Return Reference	Explanation
SCHEDULE E, LINE 3	NONDISCRIMINATORY POLICY BIOLA PUBLICIZES ITS RACIALLY NONDISCRIMINATION POLICY THROUGH ADVERTISEMENTS, BROADCASTS, AND MAILERS IT IS ALSO INCLUDED ON THE UNIVERSITY'S WEBSITE, IN ITS CATALOGUE AND STUDENT HANDBOOK
SCHEDULE E, LINE 5D	DISCRIMINATION BY RACE BIOLA DOES NOT DISCRIMINATE WITH REGARD TO RACE IN THE AWARDING OF ANY INSTITUTIONALLY FUNDED SCHOLARSHIPS OR OTHER FINANCIAL ASSISTANCE, HOWEVER, THE UNIVERSITY ASSISTS IN ADMINISTRATION OF A LIMITED NUMBER OF SMALL PRIVATELY OWNED SCHOLARSHIP FUNDS THAT (AMONG OTHER FACTORS) FAVOR MEMBERS OF ONE OR MORE RACIAL MINORITY GROUPS AND DO NOT SIGNIFICANTLY DEROGATE FROM THE UNIVERSITY'S RACIALLY NONDISCRIMINATION POLICY
SCHEDULE E, LINE 6A	FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCY BIOLA UNIVERSITY SERVES AS A CONDUIT TO RECEIVE AND DISBURSE STUDENT AID FUNDS FROM GOVERNMENTAL AGENCIES SUCH AS THE DEPARTMENT OF EDUCATION AND DEPARTMENT OF HEALTH AND HUMAN SERVICES UNDER THE FOLLOWING PROGRAMS FEDERAL ACADEMIC COMPETITIVENESS GRANT PROGRAM, FEDERAL PELL AWARD GRANT PROGRAM, FEDERAL PERKINS LOAN PROGRAM, FEDERAL NATIONAL SMART GRANT PROGRAM, FEDERAL NURSING STUDENT LOAN PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	See Add'l Data					
(2)						
(3)						
(4)						
(5)						
3a	Sub-total		3			1,492,774
b	Total from continuation sheets to Part I					
c	**Totals** (add lines 3a and 3b)		3			1,492,774

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to 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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

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

	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) 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)
(1)	Scholarships/ Student Aid	Europe (Including Iceland and Greenland)	38	141,250	STUDENT ACCT		NONE	NONE
(2)	Scholarships/ Student Aid	East Asia and the Pacific	43	104,176	STUDENT ACCT		NONE	NONE
(3)	Scholarships/ Student Aid	Russia and the Newly Independent States	17	61,205	STUDENT ACCT		NONE	NONE
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☑ 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	☑ 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	☐ 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	☐ 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	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2	FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCY The procedures for monitoring the use of scholarship grant funds outside the United States are consistent with the procedures used for monitoring all student scholarships made by the university

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, COLUMN F, PART II, LINE 1, AND PART III	ACCOUNTING FOR EXPENDITURES AND GRANTS Expenditures and grants are accounted for based on the amount of cash extended

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part III, COLUMN C	RECEIPIENTS OF GRANTS The number of recipients reported in Part III is the actual number of scholarship recipients

Additional Data

Software ID:
Software Version:
EIN: 95-0549600
Name: Biola University Inc

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific		1	Program Services	Study Abroad	304,127
Russia and the Newly Independent States			Program Services	Study Abroad	106,558
Central America and the Caribbean			Program Services	Study Abroad	40,586

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		2	Program Services	Study Abroad	883,467
South America			Program Services	Study Abroad	936
South Asia			Program Services	Study Abroad	81,818

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	Study Abroad	75,282

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- a ☑ Mail solicitations
- b ☑ Internet and email solicitations
- c ☑ Phone solicitations
- d ☑ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☑ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
			Yes	**No**			
1	Fulcrum Philanthropy 15707 Coit Road Ste C PMB 166 Dallas, SC 752484463	Fundraising		No		132,000	-132,000
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . ▶						132,000	-132,000

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

CA, OR, WA

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 BYT FUNDRAISING (event type)	(c) Other events 2 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	58,145	40,985	26,639	125,769
	2 Less Contributions	27,450	8,980	13,025	49,455
	3 Gross income (line 1 minus line 2)	30,695	32,005	13,614	76,314
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	13,154			13,154
	6 Rent/facility costs	19,200	250		19,450
	7 Food and beverages	1,196	3,371		4,567
	8 Entertainment				
	9 Other direct expenses	5,044	2,460	9,017	16,521
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(53,692)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				22,622

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain ____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain ____

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

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________

c 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

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B	HIGHEST PAID FUNDRAISERS FULCRUM PHILANTHROPY PRIMARILY HELPS INDIVIDUALS WITH ESTATE PLANNING THE COMPANY CONNECTS THESE INDIVIDUALS WITH UNIVERSITIES LIKE BIOLA, SO THAT THEY MAY INCORPORATE DONATIONS TO THE SCHOOLS IN THEIR ESTATE PLANS THE RELATIONSHIP WITH FULCRUM PHILANTHROPY TYPICALLY DOES NOT GENERATE CURRENT GIFTS, RATHER, THE UNIVERSITY BENEFITS LONG TERM AS WILLS AND TRUSTS MATURE

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II 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 recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) Institutional Scholarships	6000	37,972,236		N/A	N/A

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

Return Reference	**Explanation**
Schedule I, Part I, Line 2	PROCESS FOR MONITORING GRANTS Biola University awards both merit and need-based scholarships to students at the graduate and undergraduate levels Merit awards are based on eligibility criteria such as academic, athletic, and music abilities These typically have academic or participation requirements for renewal Continued eligibility based on stated requirements is monitored by the Financial Aid office or by the office that makes the awards Need-based awards are typically awarded based on specific formulas that are based on an institutional or federal cost amount combined with the federal EFC determined by the FAFSA Continued eligibility is normally contingent on ongoing need in subsequent years Most of the grants and scholarships awarded by Biola are funded from general funds, however, a portion are funded from restricted funds that have been provided by donors, and are awarded based on the eligibility criteria established by the donors The Financial Aid office works closely with Accounting and Finance offices to monitor availability of funds from both the general fund and restricted fund accounts

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493047023165

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

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

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

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

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

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II
Also complete this part for any additional information

Return Reference	Explanation
Schedule J, Part I, Line 1a	TRAVEL FOR COMPANIONS Spouses of listed persons occasionally travel on business trips where there is a university interest in their participation in university activities Where a bona fide purpose is absent, the travel costs are reported as taxable compensation Personal Services and tax indemnification On occasion the President is reimbursed for house-cleaning services in conjunction with university events held in his personal resident when the President and his wife are on university business This reimbursement is treated as taxable compensation to the president and appears on the President's W-2 The amounts paid are grossed up to provide for taxes incurred on these payments

Additional Data

Software ID:
Software Version:
EIN: 95-0549600
Name: Biola University Inc

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

(A) Name		(B)(i) Base Compensation	(B)(ii) Bonus & incentive compensation	(B)(iii) Other compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Greg Balsano VP of University Services	(i)	186,562	0	1,924	15,008	16,780	220,274	0
	(ii)	0	0	0	0	0	0	0
Barry Corey President	(i)	376,456	0	1,242	24,000	41,433	443,131	0
	(ii)	0	0	0	0	0	0	0
Christopher Grace VP Student Development	(i)	183,366	0	333	13,248	81,685	278,632	0
	(ii)	0	0	0	0	0	0	0
Tamra Hocking Physician, Health Center	(i)	158,800	0	452	12,878	37,799	209,929	0
	(ii)	0	0	0	0	0	0	0
David Koontz Assistant Secretary	(i)	141,087	0	511	11,481	25,059	178,138	0
	(ii)	0	0	0	0	0	0	0
Jerry Mackey Corporate Legal	(i)	156,737	0	935	13,010	26,472	197,154	0
	(ii)	0	0	0	0	0	0	0
Adam Morris VP Advancement	(i)	184,243	0	975	15,288	93,662	294,168	0
	(ii)	0	0	0	0	0	0	0
David Nystrom Provost and Senior VP	(i)	221,035	0	465	17,064	18,424	256,988	0
	(ii)	0	0	0	0	0	0	0
Michael Pierce VP, Bus and Financial Affairs	(i)	227,803	0	481	17,600	43,743	289,627	0
	(ii)	0	0	0	0	0	0	0
Scott Rae Professor	(i)	153,365	0	378	9,442	26,855	190,040	0
	(ii)	0	0	0	0	0	0	0
Gregory Vaughan VP Enrollment Management	(i)	170,647	0	663	13,856	18,459	203,625	0
	(ii)	0	0	0	0	0	0	0
Sandra Weaver Assistant Secretary	(i)	139,862	0	495	11,232	8,505	160,094	0
	(ii)	0	0	0	0	0	0	0
Peter C Hill Professor	(i)	161,078	0	554	9,170	8,486	179,288	0
	(ii)	0	0	0	0	0	0	0
Richard E Bee Sr Director Alumni and Parent	(i)	165,108		6,864	11,622	1,230	184,824	0
	(ii)							

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶Information about Schedule K (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	CA MUNICIPAL FINANCE AUTHORITY	20-1563466	13048TCU5	03-13-2008	94,006,015	Refund of 2002, Bond & Reserve Fun		X		X		X
B	CA MUNICIPAL FINANCE AUTHORITY	20-1563466	13048TPZO	04-25-2013	40,189,220	Construction Bldg/park structure		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	0	0		
2	Amount of bonds legally defeased	0	0		
3	Total proceeds of issue	94,006,015	40,189,220		
4	Gross proceeds in reserve funds	9,884,502	0		
5	Capitalized interest from proceeds	0	3,693,060		
6	Proceeds in refunding escrows	0	0		
7	Issuance costs from proceeds	1,806,049	488,400		
8	Credit enhancement from proceeds	0	0		
9	Working capital expenditures from proceeds	3,094,380	0		
10	Capital expenditures from proceeds	0	14,581,947		
11	Other spent proceeds	79,711,736	0		
12	Other unspent proceeds	0	21,425,813		
13	Year of substantial completion	2008			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X			X				
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X			X				
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X					

Part III Private Business Use *(Continued)*

		A		B		C		D	
		Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X		X					
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?	X		X					
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
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 ▶	0 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0 %		0 %					
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X					

Part IV Arbitrage

		A		B		C		D	
		Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
1	Has the issuer filed Form 8038-T?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X	X					
b	Exception to rebate?		X		X				
c	No rebate due?	X			X				
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b	Name of provider	0		0					
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider	0		0					
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X				
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

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

Return Reference	Explanation
Schedule K, Part IV, Question 2c	The rebate computation for the 2008 bond was performed on April 22, 2013
Schedule K, Part V	Part II Line 4A Gross proceeds in reserve funding figure includes earnings, therefore, it is larger than amount originally funded Part IV Line 2C Arbitrage calculation for 2008 bond issue performed on April 22, 2013 Part II Line 4A Gross proceeds in reserve funding figure includes earnings, therefore, it is larger than the amount originally funded

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I **Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) Barry H Corey	President	Housing Assistance		X	1,097,656	886,718		No	Yes		Yes	
(2) Michael A Pierce	Secretary-Treasurer	Housing Assistance		X	50,000	44,432		No	Yes		Yes	
(3) David Nystrom	Provost	Housing Assistance		X	105,816	93,453		No	Yes		Yes	
(4) David D Koontz	Assistant Secretary	Housing Assistance		X	50,000	47,888		No	Yes		Yes	
Total		▶ $				1,072,491						

Part III **Grants or Assistance Benefitting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction	**(d)** Description of transaction	**(e)** Sharing of organization's revenues? Yes	No
(1) Adam Morris	Officer (V P)	80,347	Sales of Assets		No

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	**Explanation**
Schedule L, part IV	ASSET PURCHASES The University purchased housing furniture from a business in which Adam Morris has a financial interest The University believes the products are the best available value

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

▶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*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part 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 determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures .				
3 Art—Fractional interests . .				
4 Books and publications . .	X	[redacted]	2,292	Market Value
5 Clothing and household goods	X		6,272	Market Value
6 Cars and other vehicles . .				
7 Boats and planes				
8 Intellectual property . . .				
9 Securities—Publicly traded .	X	3,083	193,825	Market Value
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 . . .	X	1	3,000	Market Value
18 Collectibles				
19 Food inventory . . .				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . .				
24 Archeological artifacts . . .				
25 Other ▶ (Equipment)	X	851	26,079	Market Value
26 Other ▶ (Misc Items)	X	851	10,704	Market Value
27 Other ▶ (Gifts Certificates)	X	245	42,892	Market Value
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | **29** | 2

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	**30a**		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	**31**	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	**32a**	Yes	
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

Return Reference	Explanation
Schedule M, Part I, COLUMN B	NUMBER OF CONTRIBUTIONS The number of contributions was determined based on the number of contributed items
SCHEDULE M, PART I, LINE 32B	USE OF THIRD PARTIES THE UNIVERSITY UTILIZES CARS2CHARITIES TO RECEIVE AND SELL CONTRIBUTIONS CARS2CHARITIES RECEIVES THE DONATION, AND THEN MAKES A CONTRIBUTION TO THE UNIVERSITY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Return Reference	Explanation
Form 990, Part III, Line 1	Biola University is a private Christian university located in Southern California For over 105 years, Biola has stood out as an institution grounded on biblically centered education, intentional spiritual development, and career preparation, w here all faculty, staff and students are professing Christians With more than 145 academic programs through its seven schools, Biola offers degrees ranging from Bachelor of Arts to Doctoral degree

Return Reference	Explanation
Form 990, Part III, Line 4a	School of Arts and Sciences The School of Arts and Sciences is more than a collection of departments Our goal is to teach the connectedness of all knowledge, helping students explore a wide range of disciplines and the contributions that each can make to the web of understanding Form a Biblical worldview, we seek to challenge students to explore and develop knowledge, skills, and attributes that will enable them to understand, express, care for, and celebrate God's diverse and complex world, that in it they might seek and humbly serve the kingdom of God Beyond the classroom, our students learn experientially, connecting their studies to the contexts of life that they might love their neighbors in the places and positions beyond Biola where God may lead them More than granting a degree, we hope to awaken the joys of learning so that liberal arts might be a lifelong passion

Return Reference	Explanation
Form 990, Part III, Line 4b	Talbot School of Theology The mission of Talbot School of Theology is the development of disciples of Jesus Christ whose thought processes, character, and lifestyles reflect those of our Lord, and who are dedicated to disciple making throughout the world The theological position of Talbot School of Theology is Christian, Protestant, and theologically conservative The school is interdenominational by nature and is thoroughly committed to the proclamation of the great historic doctrines of the Christian church It definitely and positively affirms historic orthodoxy in the framework of an evangelical and premillennial theology that is derived from a grammatical-historical interpretation of the Bible It earnestly endeavors to make these great doctrinal truths a vital reality in the spiritual life of this present generation The seminary aims to train students who believe and propagate the great doctrines of the faith as they are summarized in our Statement of Doctrine and Explanatory Notes Spiritually, it is the purpose of Talbot to develop in the lives of its students a spiritual life that is in harmony with the great doctrines taught, so that they may grow in the grace as well as in the knowledge of our Lord and Savior Jesus Christ Specifically, the goal is to educate and graduate students characterized by commitment to serving Christ, missionary and evangelistic zeal and a solid knowledge of the Scriptures To accomplish these objectives the seminary conducts a chapel program and gives attention to its students' ministry/service opportunities Academically, it is the purpose of the seminary to provide its students with the best in theological education so they may be equipped to preach and teach the Word of God intelligently and present it zealously to the world In keeping with this goal every department is geared to emphasize the clear and accurate exposition of the Scriptures The biblical languages are utilized to expose the inner meaning of the inspired text Bible exposition, by synthesis or analysis, presents a connected and related interpretation of the infallible Book Systematic theology moves toward a well-organized and structured arrangement of biblical truth Historical theology engages itself to acquaint the student with the progress of the inerrant Word among the household faith throughout the Christian era Philosophy of religion furnishes the elements whereby the servant of Christ may give a well-developed reason for the faith that is within Missions, Christian ministry and leadership, and Christian education strive to perfect in the student a skillful and winsome presentation of truth, privately and publicly Talbot stands for one faith, one integrated curriculum, one eternal word of God and its effective proclamation to a modern generation with its multiplicity of needs It is the purpose of the seminary to prepare for the gospel ministry those who believe, live and preach the great historic doctrines of faith that have been committed to the church To realize these broad objectives, the seminary offers nine degree programs, each with its own distinctive purpose

Return Reference	Explanation	
	Form 990, Part III, Line 4c	Rosemead School of Psychology Rosemead's educational distinctive are its strong professio nal training orientation and its goal of relating the data and concepts of psychology to t hose of Christian theology Since both psychology and theology address the human condition , Rosemead's faculty believes there is a great deal to be gained by an interdisciplinary s tudy of the nature of persons Consequently, all students take a series of theology course s and integration seminars designed to study the relationship of psychological and theolog ical conceptions of human functioning This series of courses lengthens Rosemead's doctora l program by approximately one year beyond most four year clinical programs While recogni zing that the disciplines of psychology and theology have some very different data and met hodologies, their overlapping content, goals, and principles provide a rich resource for i nterdisciplinary study Issues grow ing out of these overlapping concerns cover a range of topics relating to research, theory and clinical practice By encouraging this study, Rose mead is attempting to train psychologists w ith a broad view of human nature that includes a sensitivity to the religious dimension of life Through its interaction w ith members of the Christian community, Rosemead is also committed to demonstrating to the church the pot entially significant contributions an understanding of the data and methods of psychology can make the Church's role of ministering to the w hole person Students designing to focus on their professional practice on children, couples or families may take an emphasis in F amily-Child Psychology This emphasis requires completion of elective courses in addition to the regular doctoral requirements Students emphasizing in Family-Child Psychology also w rite their dissertations or doctoral research papers in a family-child area, spend their year-long outpatient practicum in a setting w here at least one-half of their w ork is w ith children, couples or families, and complete an internship in a setting w here at least one -third of their w ork is w ith a family-child population They may also elect other family r elated courses such as Development of Religious Understanding in Children and Adolescents, and Human Sexuality At the heart of an effective training program in professional psycho logy is the opportunity to develop the personal insights and skills necessary for empathic and effective interaction w ith a w ide range of settings In order to meet this need, Rose mead has developed a sequence of experiences designed to promote personal grow th and compe tence in interpersonal relationships as w ell as specific clinical skills Beginning in the ir first year of study, students participate in a variety of activities designed to promot e professional aw areness and personal grow th The first year activities include active tra ining in empathy skills in an on-campus pre-practicum experience The pre-practicum course consists of exercises to assess and facilitate interpersonal skills, and an initial oppor tunity for the student to w ith a volunteer college client in a helping role During the se cond year, all students participate in interpersonal training therapy As participants, st udents personally experience some of the grow th-producing aspects of interpersonal relatio nships In addition, students begin their formal practicum and psychotherapy lab courses i n the second year Students are placed in such professional facilities as outpatient clini cs, hospitals, college counseling centers, public schools and community health organizatio ns on the basis of their individual readiness, needs and interest These practicum experie nces are supervised both by Rosemead's faculty and qualified professionals w orking in the practicum agencies In the psychotherapy lab courses, students receive both instruction an d supervised experience, offering clinical services from the theoretical orientation of th e course Students elect lab courses from offerings such as Introduction to Child & Adoles cent Therapy, Marriage and Family Therapy, Group Therapy, Cognitive Behavioral Therapy w it h Children, Gestalt Therapy, and Biofeedback During the third year most doctoral students take tw o or three psychotherapy lab courses, w ork in an adult outpatient practicum settin g, and begin individual training therapy This therapy is designed to give the student fir st-hand experience in the role of a client and is considered an opportunity for both perso nal grow th and for learning therapeutic principles and techniques A minimum of 50 hours o f individual training is required Such issues as timing, choice of therapist and specific goals are determined by students in conjunction w ith their advisors and the Clinical Trai ning Committee When doctoral students reach their fourth year, most of their time is spen t in electives from the therapy, integration, and general psychology courses, advanced pra cticum assignments, and independent study or resea

Return Reference	Explanation	
	Form 990, Part III, Line 4c	rch This step-by-step progression in professional training experiences gives the student personal experience with a wide range of personalities in a variety of settings and provides the necessary preparation for a full-time internship during the year of study

Return Reference	Explanation	
	Form 990, Part III, Line 4d	Other Program Services Christian Apologetics This specialized graduate program (Master of Arts in Christian Apologetics) is an interdisciplinary degree that educates students to a rticulate and defend the great truths of this historic christian faith from the standpoint of philosophy, history, biblical studies, theology, and cultural studies The Christian A pologetics department also offers special learning program and lectures for the public and churches, as w ell as a certificate program in the defense of the faith for lay people Sc ience and Religion The Masters of Arts Degree in Science and Religion is designed to prov ide individuals w ith the essential background in theology, history, and philosophy necessa ry to integrate evangelical Christianity w ith modern science The master's program relates to Christianity and the sciences is designed for Christian students w ho have basic traini ng in a natural science This program also offers advanced seminars that focus on current theological issues w ithin specific scientific disciplines Cook School of Intercultural St udies The primary objective of the Cook School of Intercultural studies arises from the m andate given by the Lord Jesus Christ to make disciples of every nation based on an unders tanding of both human beings and culture The CSICS strives to enable students to demonstr ate know ledge and an understanding of human beings w ithin their cultural setting We furth er strive to enable students to demonstrate a know ledge and understanding of the theologic al, historical, sociological, anthropological and linguistic issues associated w ith the cr oss cultural communication of the gospel through a broad range of professions and vocation s It is the desire of the faculty that each student in the program w ill find in their par ticular career choice the means to effective cross cultural personal ministry and evangeli sm In the undergraduate departments students are exposed to the foundational concepts w it hin anthropology, cross-cultural engagement, cultural diversity, cross-cultural communicat ion, and theologizing w ithin cultural contexts Students w ork closely w ith their advisors to build a program according to their career objectives They are encouraged to choose spe cific concentrations that provide the skills for their chosen careers, or in combination w ith other disciplines in the university to combine their cross-cultural skills w ith prepar ation in bicultural education, cross-cultural media communication, and social w ork, cross cultural counseling, international relations or international business administration In the graduate departments students engage in a deeper level of critical analysis of theorie s and practices associated w ith global issues, the internationalization of the Christian f aith, the study of cultures and culture change, and the formation of pedagogical concepts and practices appropriate to cross-cultural educational theory and practice A unique feat ure of the graduate studies degrees is the use of blended delivery systems that allow stud ents w ho are currently in w orking careers to pursue their degrees w hile still remaining in their careers School of Education The School of Education serves a diverse student body , consisting of more than 300 undergraduate students (230 Liberal studies majors and appro ximately 201 single subect majors) and 145 graduate students Our full-time faculty is mad e up of outstanding professionals w ith decades of combined experience in classroom and adm inistrative settings At the undergraduate level, the School of Education is home to the L iberal Studies Major, w hich consistently ranks among the five most popular undergraduate m ajors at Biola At the graduate level, the school of Education offers the flexible Master of Arts in Teaching (M A T) and Master of Arts in Education (M A ED) programs, w hich can be taken in person, online, or in combination and can be tailored to meet the individual interests of new and experienced teachers alike Our State-Accredited Teachers preparation program offers teaching credentials at both the graduate and undergraduate levels in mult iple and single subjects We also offer five levels of Early Childhood permits at the unde rgraduate and graduate level, accredited by CCTC, and one four-course institution-sponsore d online special Education Certificate Crow ell School of Business The Crow ell School of Business prepares students academically w ith a foundational business education w hile nurtu ring their Christian commitment through solid biblical integration in courses and contact w ith faculty and staff Our goal is prepare graduates to be leaders in their profession, i mpacting the culture of Christ The Masters of Business Administration program at Biola Un iversity is designed for business people w ho already have experience in management but w an t to increase their understanding of the entrepreneurial spirit w ithin the corporate cultu re It prepares follow ers of Jesus Christ to be su

Return Reference	Explanation	
	Form 990, Part III, Line 4d	ccessful leaders in the marketplace The program incorporates foundational courses in theo logy alongside the constant application of biblical principles for decision for the part-t ime, fully employed student, w ith classes held in the evening We are part of the Biola Un iversity family of six schools For 100 years our mission has been biblically centered edu cation, scholarship and service, equipping men and w omen in mind and character to impact t he w orld for the Lord Jesus Christ Interterm Session To facilitate the completion of gra duation and also to allow exposure to creative learning and to enrich students' academic p rograms, the University provides an Interterm program in January A balanced program of ge neral education, Bible, electives and graduate courses is offered Students may enrich the ir course of study and reduce the overall time spent in school or decrease their regular c ourse load by careful selection of Interterm courses Certain courses or w orkshops may be offered during Interterm that is not listed in this catalog Courses may be innovative or the content may be in response to specialized needs or current topics Opportunities to pa rticipate in travel and other non-traditional courses are also offered by various departme nts through the office of Off-Campus Programs w ho organizes Biola Study Tours Summer Sess ion A continuing Summer Session program provides students w ith the opportunity for a grea ter degree of flexibility in planning their total program Students may enrich their cours e of study and reduce the overall time spent in school or decrease their regular course lo ad by careful selection of Summer Session courses Visiting students find it refreshing to study in a different atmosphere and perhaps a different locale and entering students find it helpful in gaining advanced standing Courses of study may be applied to both the degr ee and the teaching credential programs Instruction is offered in standard courses by the Biola faculty and capable visiting professors Certain courses or w orkshops may be offere d during Summer Sessions that are not listed in this catalog These may be innovative cour ses created in response to current topics or specialized needs

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11a	The organization's Senior Director of Financial Management and Reporting works closely with the outside accounting firm it engages to review the return The final draft of Form 990 is reviewed by the Chief Financial officer Biola posts Form 990, excluding Schedule B, prior to filing, on a secure web site and inform the Board of Trustees that it is available for their review

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	The Director of Human resources, in conjunction with the Chief Financial Officer, is charged with monitoring proposed or ongoing transactions for conflicts of interest and addressing any potential or actual conflicts Pursuant to the Conflict of Interest Policy, an annual conflict of interest questionnaire, aimed at determining any family and business relationships and transactions or other transactions that may pose a potential conflict, is distributed to all covered persons (i e board members, officers and executive leadership or key employees, if any)

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	The Committee on the President to the Board of Trustees serves as the university's compensation committee, comprised solely of independent directors, none of which have a conflict of interest with respect to the compensation arrangements The committee develops, consistent with the organization's philosophy and principles, the annual performance goals and the criteria to be used in determining merit increases criteria for the President (CEO) and the vice presidents The full Board reviews and validates these compensation arrangements Form 990, Part VI, Section C, Line 19 While federal tax laws do not mandate that the organization's governing documents, conflict of interest policy, and financial statements be made available for public inspection, the organization makes its financial statements and conflicts of interest policy available on the university's website at www biola edu/hr/ehandbook The governing documents are available upon request

Return Reference	Explanation
Form 990, Part XI, Line 9	The Other Change in Net Assets consists of the following Change in Value of Split-Interest Agreements $ 564,978 Loss on Arrington Square $ -191,088

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493047023165

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

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

Part II **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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No

Part III **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.

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

Part IV **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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) Arrington Square Corporation 13800 Biola Avenue La Mirada, CA 906390001 95-2000502	Leasing Prop	CA	NA	C Corporation	100	100	100 000 %	Yes	
(2) Charitable Remainder Unitrusts (17)	Personal Esta	CA	NA	Trust					
(3) Living Trust (4)	Living Trust	CA	NA	Trust					
(4) Charitable Remainder Annuity Trust (2)	Personal Esta	CA	NA	Trust					
(5) Medical Trust (1)	Personal Esta	CA	NA	Trust					

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

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	**1a**	Yes	
b	Gift, grant, or capital contribution to related organization(s)	**1b**		No
c	Gift, grant, or capital contribution from related organization(s)	**1c**		No
d	Loans or loan guarantees to or for related organization(s)	**1d**		No
e	Loans or loan guarantees by related organization(s)	**1e**		No
f	Dividends from related organization(s)	**1f**		
g	Sale of assets to related organization(s)	**1g**		No
h	Purchase of assets from related organization(s)	**1h**		No
i	Exchange of assets with related organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**		No
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**	Yes	
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**		No
o	Sharing of paid employees with related organization(s)	**1o**		No
p	Reimbursement paid to related organization(s) for expenses	**1p**		No
q	Reimbursement paid by related organization(s) for expenses	**1q**		No
r	Other transfer of cash or property to related organization(s)	**1r**		No
s	Other transfer of cash or property from related organization(s)	**1s**		No

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) Arrington Square Corporation	A	211,318	PER AGREEMENT
(2) Arrington Square Corporation	K	346,668	PER AGREEMENT

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation