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Form 990

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

A For the 2014 calendar year, or tax year beginning 07-01-2014 and ending 06-30-2015 C Name of organization D Employer identification number B Check if applicable AUGUSTANA COLLEGE Address change 36-2166962 Name change Doing business as Initial return E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Final 639 38TH STREET return/terminated (309) 794-7499 Amended return City or town, state or province, country, and ZIP or foreign postal code ROCK ISLAND, IL 612012296 G Gross receipts \$ 154,896,259 Application pending Name and address of principal officer **H(a)** Is this a group return for STEVEN BAHLS subordinates? ┌ Yes 🗸 No 639 38TH STREET ROCK ISLAND, IL 612012296 **H(b)** Are all subordinates included? Tax-exempt status **✓** 501(c)(3) **√** 501(c) () **◄** (insert no) √ 4947(a)(1) or
√ 527 If "No," attach a list (see instructions) Website: ► www augustana edu H(c) Group exemption number ► K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1860 M State of legal domicile IL Part I Summary 1 Briefly describe the organization's mission or most significant activities Baccalaureate Level Instruction Augustana College, rooted in the liberal arts and sciences and a Lutheran expression of the Christian faith, is committed to offering a challenging education that develops qualities of mind, spirit, and body necessary for a rewarding life of leadership and service in a diverse and changing world Activities & Governance 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) . . . 37 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 36 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) . 5 2,771 **6** Total number of volunteers (estimate if necessary) 250 43,120 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, line 34 -2,394 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . . 9,134,859 18,206,794 Program service revenue (Part VIII, line 2g) 108,051,579 109,934,145 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,163,396 6,331,451 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,969,525 684,972 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 126,319,359 135,157,362 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 44,447,883 47,744,952 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 38,582,638 40,787,836 Expenses Professional fundraising fees (Part IX, column (A), line 11e) 16a 60,000 74,928 Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{1,749,692}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 33,181,418 33,136,987 121,744,703 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 116,271,939 19 Revenue less expenses Subtract line 18 from line 12 . . . 10,047,420 13,412,659 Assets or d Balances **Beginning of Current End of Year** Year 323,161,094 329,397,801 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 76,583,075 73,707,031 22 Net assets or fund balances Subtract line 21 from line 20 . 252,814,726 249,454,063 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 2016-02-16 Signature of officer Date Sign Here Kırk Anderson VP for Finance and Administration Type or print name and title Date Print/Type preparer's name Preparer's signature Check / If

Firm's name

Firm's address 🕨

Paid

Preparer

Use Only

self-employed

Firm's EIN 🕨

Phone no

| Yes | No

) (Revenue \$

4d

4e

(Expenses \$

Other program services (Describe in Schedule O)

Total program service expenses ►

9,949,601 including grants of \$

108,910,299

14,528,007)

Part TV	Check	list of	Required	Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	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	Yes	
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		
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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
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? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

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			厂_
4 _	Enternthe growther as a second of Berry 2 of Ferry 1006 Febru 0 of material leading 1 de 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3,277 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
٠	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			
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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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 CJ, BD, SW See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- J.D		
		5c		
	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
D	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).			
	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
y	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Эа	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	against amounts due or received from them)			
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O			
D	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			
С	Enter the amount of reserves on hand			
l a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
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.

Se	ection 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								
	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	b Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6		No					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)					
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo					
ь	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							
		10b 11a	Yes						
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		Yes						
11a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes						
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a							
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b	Yes Yes						
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b	Yes Yes Yes						
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes Yes Yes						
11a b 12a b c 13 14	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13	Yes Yes Yes						
11a b 12a b c 13 14	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13	Yes Yes Yes Yes						
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes						
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No					
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No					
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No					
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No					
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No					

State the name, address, and telephone number of the person who possesses the organization's books and records

639 38th Street Rock Island, IL 61201 (309) 794-7203

►Kırk Anderson

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Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

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

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

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, ∣an (heck unless officer stee)	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

c Total from continuation sheets to Part VII, Section A	1b	Sub-Total	•			
d Total (add lines 1b and 1c)	C	Total from continuation sheets to Part VII, Section A	•			
	d	Total (add lines 1b and 1c)	►	1,742,685	0	268,407

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►16

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
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	_	.,	
	marriaga	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 I for such person	5	Yes	

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
ESTES COMPANY	CONSTRUCTION	1,705,889
131 WEST 2ND STREET SUITE 400		
DAVENPORT, IA 528080000		
Performance Food Group	Food Service Distributor	1,236,473
8001 TPC Rd		
Rock Island, IL 612010000		
BUSH CONSTRUCTION COMPANY	CONSTRUCTION	868,056
5401 VICTORIA AVE		
DAVENPORT, IA 528070000		
RUSSELL CONSTRUCTION	CONSTRUCTION	771,124
4600 E 53RD STREET		<u> </u>
DAVENPORT, IA 528070000		
CENTER FOR ACADEMIC PROGRAMS ABROAD	STUDENT TRAVEL SERVICE	529,276
65 FRANKLIN ST		<u> </u>
BOSTON, MA 021100000		
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►38

Form 99	90 (20	014)					Page 9
Part V	/ 1111	Statement of Revenue	an ar note to any lin	a in this Dout VIII			
		Check if Schedule O contains a respon	ise or note to any iir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ω <u>2</u> 2	1a	Federated campaigns 1a					
au f	ь	Membership dues 1b					
Ę G	С	Fundraising events 1c					
iffs, ar A	d	Related organizations 1d					
n ii.G	e	Government grants (contributions) 1e	1,080,906				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	17,125,888				
ntribu d Oth	g	Noncash contributions included in lines 1a-1f \$	1,209,727		j		
CO B	h	Total. Add lines 1a-1f	· · · •	18,206,794			
<u> </u>			Business Code				
æm	2a	Tuition and Fees	611710	91,018,177	91,018,177	0	0
æ	ь	Sales and Services - Auxiliary	722320	18,135,783	18,111,863	23,920	0
9 10 10	С	Sales and Services - Ed Dept	611710	780,185	780,185	0	0
Se C	d						
Ē	е						
Program Service Revenue	f	All other program service revenue		0	0	0	0
<u>~</u>	g	Total. Add lines 2a-2f		109,934,145			
	3	Investment income (including dividend and other similar amounts)		3,242,809			3,242,809
	4	Income from investment of tax-exempt bond i	H=				
	5	Royalties	▶ ↑				
		(ı) Real	(II) Personal				
	6a	Gross rents 307,385					
	Ь	Less rental 0 expenses					
	С	Rental income 307,385 or (loss)	0				
	d	Net rental income or (loss)		307,385		19,200	288,185
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of 22,827,539 assets other than inventory					
	ь	Less cost or other basis and 19,738,897					
		sales expenses					
	C	Gain or (loss) 3,088,642	0	3,088,642			3,088,642
	d 8a	Net gain or (loss)	· · · · •	3,000,042			3,000,042
Other Revenue		events (not including \$ of contributions reported on line 1c)					
r Re		See Part IV, line 18 a	0				
ئلة	Ь	Less direct expenses b	0				
0	C	Net income or (loss) from fundraising e	events 🛌				
	9a	Gross income from gaming activities See Part IV, line 19					
		a	0				
	b	Less direct expenses b	0				
	ı	Net income or (loss) from gaming activ	vities				
	10a	Gross sales of inventory, less returns and allowances					
		a a	0				
	ь	Less cost of goods sold b	0				
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a	Departmental Designated	611710	216,922			216,922
	Ь	FMV/PV Adjustments	900001	67,229			67,229
	c	Annuitant Payments	900001	-195,086			-195,086
	d	All other revenue	<u>.</u>	288,522	0	0	288,522
	e	Total. Add lines 11a-11d	· · · · •	377,587			
	12	Total revenue. See Instructions		135,157,362	109,910,225	43,120	6,997,223

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All	other organizati	ions must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u></u>	<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	47,744,952	47,744,952		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,674,824	0	1,674,824	0
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	0	0	0
7	Other salaries and wages	30,057,936	26,973,211	1,976,898	1,107,827
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,669,705	2,197,753	359,082	112,870
9	Other employee benefits	4,303,220	1,602,619	2,690,571	10,030
10	Payroll taxes	2,082,151	1,781,461	220,316	80,374
11	Fees for services (non-employees)				
а	Management	0	0	0	0
ь	Legal	40,235	2,184	38,051	0
c	Accounting	198,617	10,000	188,617	0
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	74,928			74,928
f	Investment management fees	260,938	0	260,938	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,879,011	2,177,016	669,070	32,925
12	Advertising and promotion	210,333	155,377	54,956	0
13	Office expenses	1,984,517	1,793,213	69,960	121,344
14	Information technology	540,836	415,550	122,650	2,636
15	Royalties	956	956	0	0
16	Occupancy	6,095,276	5,305,472	789,804	0
17	Travel	3,625,079	3,267,701	301,751	55,627
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	317,662	175,469	119,809	22,384
20	Interest	1,948,138	1,935,876	12,262	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	6,133,286	5,194,992	938,294	0
23	Insurance	351,516	146,600	204,916	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Bookstore and Food Service Functions	2,685,372	2,685,372	0	0
b	Repair and Maintenance	1,113,502	1,102,871	10,631	0
c	Membership Dues	980,321	817,708	129,681	32,932
d	Equipment	798,235	762,547	34,928	760
е	All other expenses	2,973,157	2,661,399	216,703	95,055
25	Total functional expenses. Add lines 1 through 24e	121,744,703	108,910,299	11,084,712	1,749,692
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line i	n this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			8,648,428	1	12,153,179
	2	Savings and temporary cash investments			690,552	2	2,242,191
	3	Pledges and grants receivable, net			7,811,975	3	9,475,567
	4	Accounts receivable, net			947,489	4	364,614
	5	Loans and other receivables from current and former officers employees, and highest compensated employees Complete Schedule L	Part II	of	0	5	
Assets	6	Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, an and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul	d conti emplo	ibuting employers	0		
82	7	Notes and loans receivable, net			0	7	0
ď	8	Inventories for sale or use			372,515	8	374,507
	9	Prepaid expenses and deferred charges			946,154	9	594,013
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	231,790,354	·		
	ь	Less accumulated depreciation	10b	111,505,648	121,753,612	10 c	120,284,706
	11	Investments—publicly traded securities	. —		129,351,706	11	127,763,652
	12	Investments—other securities See Part IV, line 11			31,020,673	12	32,869,716
	13	Investments—program-related See Part IV, line 11			3,328,640	13	3,281,130
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			24,526,057	15	13,757,819
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			329,397,801	16	323,161,094
	17	Accounts payable and accrued expenses			5,718,164	17	6,546,498
	18	Grants payable			0	18	0
	19	Deferred revenue			0	19	0
	20	Tax-exempt bond liabilities			60,358,470	20	58,573,838
Ø	21	Escrow or custodial account liability Complete Part IV of Sc	hedule	D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, dire key employees, highest compensated employees, and disqua		rustees,			
gej		persons Complete Part II of Schedule L			0	22	
	23	Secured mortgages and notes payable to unrelated third part	ies .		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	5 .		2,114,706	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete PD	art X		8,391,735	25	8,586,695
	26	Total liabilities. Add lines 17 through 25			76,583,075	26	73,707,031
es —		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.					
ž	27	Unrestricted net assets			138,037,585	27	128,964,373
<u> </u>	28	Temporarily restricted net assets			42,997,248	28	45,148,795
Ē	29	Permanently restricted net assets			71,779,893	29	75,340,895
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here F	-			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS	32	Retained earnings, endowment, accumulated income, or othe	r funds			32	
Net	33	Total net assets or fund balances			252,814,726	33	249,454,063
Z	34	Total liabilities and net assets/fund balances			329,397,801	34	323,161,094
	·						Form 990 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		135,1	.57,362
2	Total expenses (must equal Part IX, column (A), line 25)	2		121 7	44,703
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		13,4	12,659
4	Net assets of fund balances at beginning of year (must equal Part X, line 33, column (A))	4		252,8	314,726
5	Net unrealized gains (losses) on investments	5		-5 0	97,004
6	Donated services and use of facilities				737,001
_		6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9		-10,7	776,318
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		249,4	154,063
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or			
	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 separabasis, consolidated basis, or both	rate			
	▼ Separate basis				1
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	:	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: 14000329

Software Version: 2014v1.0

EIN: 36-2166962

Name: AUGUSTANA COLLEGE

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 9,949,601 including grants of \$) (Revenue \$ 14,528,007)
HIGHER EDUCATION STUDENT SERVICES - SERVES THE STUDENT COMMUNITY BY PROVIDING REGISTRATION ASSISTANCE,
COUNSELING, CAREER PLANNING, INTERNSHIPS, FINANCIAL ASSISTANCE, MULTICULTURAL PROGRAMMING, ORIENTATION
AND ADVISING, INTRAMURAL SPORTS, AND OTHER RELATED PROGRAMS (2,500 STUDENTS) HIGHER EDUCATION PUBLIC
SERVICES - INCLUDES A CENTER FOR COMMUNICATIVE DISORDERS, ART PROGRAMS, ALUMNI PROGRAMS, COMMUNITY
SERVICE AND A NATIONAL PUBLIC RADIO STATION SERVING THE STUDENTS AND COMMUNITY (2500 STUDENTS) HIGHER
EDUCATION RESEARCH - SUPPORTS EXTENSIVE OPPORTUNITIES FOR STUDENTS AND FACULTY TO CONDUCT RESEARCH ON
AND OFF CAMPUS (2,500 STUDENTS)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Reportable Average Position (do not check Reportable Estimated amount hours per more than one box, unless compensation compensation of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former Individual : or director 9 Highest compensated organizations related Institutional below organizations emplo) ee dotted line) trustie Trustee (1) Peter Marty 1 00 Х 0 Х 0 Board Member - Secretary (1) Mary E Junck 1 00 Χ Χ 0 0 VP of Board (2) Lee Selander 1 00 Х Х Chair of the Board (3) Steven Bahls 55 00 Х Х 406,468 0 61,529 College President 1 00 (4) Kenneth Abrams Χ 0 0 Board Member (5) Ronald Nyberg 1 00 0 0 0 Х Board Member (6) Paul Guehler 1 00 Χ 0 0 0 Board Member (7) Dean Christensen 1 00 Χ 0 0 Board Member (8) Thomas Leach 1 00 Χ 0 0 Λ Board Member (9) Sunder Subbaroyan 1 00 Χ 0 Board Member 1.00 (10) Robert Ontiveros 0 0 0 Х Board Member (11) Robert Karlblom 1 00 Χ 0 0 Board Member (partial end) (12) Debra Gammon 1 00 Χ Board Member (13) Mark Wilhelm 1 00 0 0 Х 0 Board Member (14) Donald Hallberg 1 00 Χ 0 0 Board Member (15) Chris Coulter 1 00 Χ 0 0 0 Board Member (16) Paul Guehler 1 00 Х 0 0 0 Board Member (17) John Lucken 1 00 Χ 0 Board Member (18) Hector GarfiasToledo 1 00 0 0 0 Х Board Member (19) Nils Hasselmo 1 00 Χ 0 0 Board Member (partial end) (20) Peter Sımshauser 1 00 Χ 0 0 Board Member (21) Christopher Seyfarth 1 00 0 0 0 Χ Board Member (partial end) (22) Zac Larson 1 00 Х 0 0 Board Member 1 00 (23) Diane Harris Х 0 0 Board Member (24) Donald Sundquist 1 00 0 0 Board Member

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former Individual : or director 9 Highest compensated employee organizations related Institutional below organizations emplo) ee dotted line) trustie Trustee (26) Mary Lind 1 00 0 Х 0 Board Member (1) Kım Brunner 1 00 Χ 0 0 Board Member (2) Phil McKinley 1 00 Х 0 Board Member (3) Gary Wollersheim 1 00 Х 0 0 Λ Board Member 1 00 (4) Lois Levine-Mundie Χ 0 0 Board Member 1 00 (5) Robert Swieringa 0 0 0 Х Board Member (6) Lawrence Barker 1 00 Χ 0 0 0 Board Member 1 00 (7) Brenda Barnes Χ 0 0 Board Member (partial end) (8) Tom Grevlos 1 00 Χ 0 0 Λ Board Member (9) Murry Gerber 1 00 Χ 0 Board Member 1.00 (10) Mark Schwiebert 0 0 0 Х Board Member (11) Diane Hill 1 00 0 Χ 0 Board Member (12) Donald Berg 1 00 Χ Board Member (13) Dana Waterman 1 00 0 0 0 Х Board Member (14) Lydia Duran 1 00 Χ 0 0 Board Member 1 00 (15) Diane Griffin Χ 0 0 0 Board Member (16) Julie Hamann 1 00 Х 0 0 0 Board Member (17) Jenny Kımball 1 00 Χ 0 Board Member (18) John Murabito 1 00 0 0 0 Х Board Member (19) Eric Lindberg 1 00 Χ 0 0 Board Member (20) Lynette Rasmussen 1 00 Χ 0 0 Board Member (21) Trevor Will 1 00 0 0 0 Χ Board Member (22) Karl Zobrist 1 00 Х 0 Board Member 35 00 (23) Sheri Curran Х 68,252 0 8,567 Asst Secretary (24) David English 55 00 Χ 183,083 0 32,089 VP of Finance and Aministration

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d ian oi i is b	ne b	ox, u an of	nless ficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee		2/1099-MISC)	2/1099-MISC)	organization and related organizations				
(51) Kent Barnds Executive VP Enrollment and Communication & Planning	55 00			х				213,624	0	32,932
(1) Pareena Lawrence Dean of the College	55 00				х			174,758	0	20,102
(2) Julie Crockett VP Advancement	55 00				х			113,963	0	10,303
(3) Evelyn Campbell Dean and VP Student Services	55 00					x		146,368	0	21,128
(4) Charles Hyser Professor	55 00					х		107,180	0	22,415
(5) Christopher Vaughan Asst VP Chief Information Officer	55 00					х		108,585	0	19,595
(6) Karen Youngberg Professor	55 00					х		112,026	0	19,101
(7) Peter Kıvısto Professor	55 00					х		108,378	0	20,646
	1				l					

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As Filed Data -

DLN: 93493047008116

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization AUGUSTANA COLLEGE Employer identific					ation number				
AUGUST ANA COLLEGE							36-2166962		
Pa	rt I	Reason for Publi	ic Charity S	Status (All organiza	itions must co	mplete this i		ons.	
The	organı	zation is not a private fo							
1	Γ	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 S	chedule E)				
3		A hospital or a cooper				tion 170(b)(1)(A)(iii).		
4	Ė	A medical research or). Enter the	
-	,	hospital's name, city,			, , , , , , , , , , , , , , , , , , ,				
5	Γ	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	r operated by	a governmental unıt d	escribed in	
		section 170(b)(1)(A)	(iv). (Complet	e Part II)					
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1)(A)(v).		
7	Γ	An organization that n	normally receiv	es a substantial part	of its support fr	om a governm	ental unit or from the g	jeneral public	
	_	described in section 1		• •	•				
8	<u> </u>	A community trust de							
9		An organization that n							
		receipts from activitie							
		its support from gross						businesses	
		acquired by the organ	ızatıon after Ju	ıne 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)		
10		An organization organ	ized and opera	ited exclusively to tes	t for public safe	ty See sectio	n 509(a)(4).		
11	Г	An organization organ							
		one or more publicly s the box in lines 11a th							
а	Г	Type I. A supporting of	-			_		· -	
_	'	supported organizatio							
	_	organization You mus	t complete Pa	rt IV, Sections A and	В.				
b		Type II. A supporting							
		management of the su must complete Part I'			same persons t	nat control or i	manage the supported	organization(s) You	
С	Г	Type III functionally	•		n operated in c	onnection with	. and functionally inte	grated with, its	
	·	supported organizatio	_		•		•	,	
d	Г	Type III non-function							
	not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness r						eness requirement		
e	Г	(see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functiona						vne III functionally	
•	,	integrated, or Type III non-functionally integrated supporting organization							
f		Enter the number of supported organizations							
g		Provide the following i	nformation ab	out the supported orga	anızatıon(s)				
	(i)N	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org		(v) A mount of	(vi) A mount of	
		organization		organization	listed in your docume	-	monetary support	other support (see	
				(described on lines 1-9 above or IRC	docume	ent c	(see instructions)	ınstructions)	
				section (see					
				ınstructions))	<u> </u>		1		
					Yes	No			
			İ						

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493047008116

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

ΑU	GUSTANA COLLEGE					
	ATA Commists if the		was ation FO4/		2166962	
Par	<u> </u>	ganization is exempt unde	-	-	tion 527	organization.
1	Provide a description of the or	ganization's direct and indirect pol	litical campaign act	tivities in Part IV		
2	Political expenditures				-	\$
3	Volunteer hours					
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).		
1	Enter the amount of any excis	e tax incurred by the organization	under section 495!	5	F	\$
2	Enter the amount of any excis	e tax incurred by organization man	nagers under sectio	n 4955	▶	\$
3	If the organization incurred a	section 4955 tax, did it file Form 4	720 for this year?			┌ Yes ┌ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Pai	t I-C Complete if the or	ganization is exempt unde	er section 501(c), except se	ction 50	1(c)(3).
1	Enter the amount directly exp	ended by the filing organization for	section 527 exem	pt function activit	ies 🟲	\$
2	Enter the amount of the filing exempt function activities	organization's funds contributed to	other organization	s for section 527	.	\$
3	Total exempt function expend	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b	►	¢
4	Did the filing organization file	Form 1120-POL for this year?				⊤ Yes
5	organization made payments amount of political contributio	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro d directly delivered	om the filing orga to a separate po	nization's f itical orga	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount p filing organiz funds If none,	zation's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
or I	Paperwork Reduction Act Notice. s	ee the instructions for Form 990 or 9	990-EZ.		hedule C /	 Form 990 or 990-EZ) 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b					
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization in filed Form 5768 (election in	on is exempt under section 501(c)(3) and has l under section 501(h)).	TON				
For 4		provide in Part IV a detailed description of the lobbying	(a)		(b)	
	vity.	provide in Part IV a decaned description of the lobbying	Yes	No	A	mour	nt
1		tempt to influence foreign, national, state or local e public opinion on a legislative matter or referendum,		1			
а				No			
ь	Paid staff or management (include compensa	ition in expenses reported on lines 1c through 1i)?	Yes		1		
c		, , ,		No	1		
d	Mailings to members, legislators, or the publ	ıc?	Yes				0
е		-		Νo			
f	Grants to other organizations for lobbying pu	-		No			
g		· •	Yes				402
h		ons, speeches, lectures, or any similar means?		No			
i	Other activities?	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		No			
j	Total Add lines 1c through 1:						402
2a	_	ation to be not described in section 501(c)(3)?		ΙNο			
ь					1		
c		d by organization managers under section 4912					
d				I			
Pa	rt III-A Complete if the organization	on is exempt under section 501(c)(4), section	5 01 (c)(5),	or se	ctio	n
	501(c)(6).					Yes	No
1	Were substantially all (90% or more) dues re	eceived nondeductible by members?		Г	1	1 63	110
2	Did the organization make only in-house lobl			⊢	2		
3		ying and political expenditures from the prior year?		F	3		
		on is exempt under section 501(c)(4), section !	501(c	1(5)	_	ctio	n
		BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, assessments and similar amounts from	n members	1				
2	Section 162(e) nondeductible lobbying and perpenses for which the section 527(f) tax w	political expenditures (do not include amounts of political ras paid).					
а	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3	Aggregate amount reported in section 6033	(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		c exceeds the amount on line 3, what portion of the excess					
		he reasonable estimate of nondeductible lobbying and	4				
_	political expenditure next year? Taxable amount of lobbying and political exp	andituras (saa instructions)	5				
5		enditures (see instructions)					
	ovide the descriptions required for Part I-A , lin (see instructions), and Part II-B , line 1 Also , c	e 1 , Part I-B, line 4 , Part I-C , line 5 , Part II-A (affiliated grou omplete this part for any additional information	ıp list),	, Part II	:-A , lı	nes 1	and
	Return Reference	Explanation					
Sch	nedule C, Part II-B, Line 1 To Advoca	te on the behalf of Higher Education					
DET	TAILED DESCRIPTION OF THE BBYING ACTIVITY						
	1						

Part IV Supplemental Information (continued)						
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

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OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 900) and the instruct

Open to Public

lame of the organization UGUSTANA COLLEGE		Employer identification nu	mber
OGGGT, HT/1 GOLLEGE		36-2166962	
	or Advised Funds or Other Similar	Funds or Accounts. Com	plete if the
organization answered "Yes" to For	m 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other ac	counts
Total number at end of year	(a) Donor advised funds	(b) Fullus allu otilei at	Counts
Aggregate value of contributions to (during yea	r)		
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono	r advisors in writing that the assets held in d	onor advised	
funds are the organization's property, subject t	o the organization's exclusive legal control?	Γ Y ∈	es No
Did the organization inform all grantees, donors used only for charitable purposes and not for the conferring impermissible private benefit?			es No
rt II Conservation Easements. Comp	plete if the organization answered "Yes	' to Form 990, Part IV, line	7.
Purpose(s) of conservation easements held by	the organization (check all that apply)		
Preservation of land for public use (e g , rec	· ·	an historically important land a	rea
Protection of natural habitat	Preservation of	a certified historic structure	
Preservation of open space			
Complete lines 2a through 2d if the organization	n held a qualified conservation contribution i	n the form of a conservation	
easement on the last day of the tax year		Held at the End of	the Veer
Total number of conservation easements		2a	the rear
Total acreage restricted by conservation easer	nents	2b	
Number of conservation easements on a certifi		2c 2c	
Number of conservation easements included in	, ,		
historic structure listed in the National Registe		2d	
Number of conservation easements modified, t	ransferred, released, extinguished, or termina	ated by the organization during	
the tax year 🗠			
Number of states where property subject to cor	nservation easement is located 🕨		
Does the organization have a written policy reg enforcement of the conservation easements it	arding the periodic monitoring, inspection, ha		es ΓN o
Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation eas	ements during the year	
Amount of expenses incurred in monitoring, ins	necting and enforcing conservation easeme	nts during the year	
► \$	pacting, and emoterny conscivation easeme	nes during the year	
Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i)	es ⊏No
In Part XIII, describe how the organization rep	orts conservation easements in its revenue :	,	
balance sheet, and include, if applicable, the te the organization's accounting for conservation	xt of the footnote to the organization's financ		
	ections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8.	s, or Other Similar Asset	s.
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide, in Part XIII, the text of the for	ar assets held for public exhibition, educatio	n, or research in furtherance of	
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide the following amounts relating	SFAS 116 (ASC 958), to report in its revenu ar assets held for public exhibition, educatio	ie statement and balance sheet	
(i) Revenue included in Form 990, Part VIII, li	ne 1	▶ \$	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art following amounts required to be reported unde		for financial gain, provide the	
Revenue included in Form 990, Part VIII, line		l • c	0
	-	F #	
Assets included in Form 990, Part X		▶ \$	U

Par	Organizations Maintaining Co	llections of Art,	Histo	orical T	reasures	, or Oth	er Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, che			_	-	of its
а	Public exhibition		d	Loan	or exchang	e program	าร	
b	Scholarly research		e	▽ Othe	r Educatio	n		
c	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how t	hey furth	er the orgar	nization's	exempt purpose	ın
5	During the year, did the organization solicit						ımılar	F., F.,
Dar	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the						'Vac" to Form (Yes V No
Fel	Part IV, line 9, or reported an an					swereu	res to roini :	990,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other interme	diary fo	or contribi	utions or ot	her assets	s not	┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	followir	ng table				
							Ar	mount
С	Beginning balance					10		
d	Additions during the year					1d	•	
e	Distributions during the year					1e	_	
f	Ending balance					1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, fo	rescrow	or custodial	account	liability?	Γ Yes Γ No
ь	If "Yes," explain the arrangement in Part XII							
Pa	rt V Endowment Funds. Complete							/-\r
1a	Beginning of year balance	(a)Current year 147,253,504		or year 29,619,197		812,024	1)Three years back 121,668,222	(e)Four years back 102,260,963
b	Contributions	10,421,565		3,553,168		,010,138	5,026,091	2,492,244
c	Net investment earnings, gains, and losses						-,,	
_		-74,046		19,728,962		,991,200	-2,869,872	22,010,712
d	Grants or scholarships	3,174,682		2,963,854	Ζ,	.896,194	2,725,513	2,856,600
е	Other expenditures for facilities and programs	3,338,493		2,683,969	2,	,297,971	2,286,904	2,239,097
f	Administrative expenses	0		0		0	0	0
g	End of year balance	151,087,848	1.	47,253,504	129,	619,197	118,812,024	121,668,222
2	Provide the estimated percentage of the cur	rent year end balanc	e (lıne	1g, colum	nn (a)) held	as		
а	Board designated or quasi-endowment 🕨	33 %						
b	Permanent endowment ► 50 %							
С	Temporarily restricted endowment ► 1	7 %						
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiza	tion th	at are hel	d and admir	nistered fo	or the	
	organization by (i) unrelated organizations						3a	Yes No (i) Yes
	(ii) related organizations						3a(
ь	If "Yes" to 3a(II), are the related organization		• • I on Scl	• • hedule R?	· · · · ·		3	
4	Describe in Part XIII the intended uses of th	ne organization's end	dowmer	nt funds				<u> </u>
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		he org	anızatıo	n answere	d 'Yes' t	o Form 990, Pa	art IV, line
	Description of property	10.		(a) Cost or pasis (invest		ost or other sis (other)	(c) Accumulated depreciation	(d) Book value
			_			5,426,17	5	5,426,175
	Buildings		.			177,488,67		
	Leasehold improvements		.			11,815,92	-	
	Equipment		.			33,346,76	+	
	Other					3,712,81	6	3,712,816
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colum	n (B), line	10(c).)		.	120,284,706
		<u> </u>					Schedule I	D (Form 990) 2014

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A) Alternative Investments Hedge funds	18,397,375	F
(B) Equity Mutual Funds	8,973,752	F
(C) Alternative Investments Private Equity	5,498,589	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	32,869,716	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	Complete if the organization	answered 'Yes' to Form 990, Part IV, line 11c
(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 IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization		▶ Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(b) Book value	
-	DOOK VAIUE	
Federal income taxes Annuity Payable	1,814,458	
Conditional Asset Retirement	2,826,912	
Student Deposits	911,086	
US Government Payable	3,034,239	
Leases Payable	0	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	8,586,695	

The organization answered Yes' to Form 900, Part IV, Jine 126. 1 Total revenue, again, and other support per adual diseased statements 1 Total revenue, again, and other any organization and the 1 but not on Form 900, Part VIII, Jine 12 2 A mounts included on line 1 but not on Form 900, Part VIII, Jine 2 2 2 0 0 3 But manufacture of the 1 but not on Form 900, Part VIII, Jine 2 2, but not on him 1 3 Index (Part Part Part Part Part Part Part Part	Part		evenue per Audited Financial Statements With Revenue	er R	eturn Complete if		
Next anticular durant biosech per investments 26 5.997.054	1	_		1	81,154,468		
b Donzéel services and use of facilities	2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12		· · ·		
Contact of price year grants	а		i l				
A dollars at through 24	b	Donated services and use of fa	ocilities 2b 0				
Add lines 2 at through 24 A mounts included on Form 990, Part VIII, line 12, but not in line 1 Add lines 2 are with expenses and the control of the company of the compan	C	Recoveries of prior year grants					
3 114,995,424 A mounts include on form 990, Part VIII, line 12, but not on line 1 a (revestment expenses not included on Form 990, Part VIII, line 79 b b Older (Describe in Part XIII) 5 260,938 5 260,938 6 260 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	d	Other (Describe in Part XIII)					
4 Amounts included on Form 990, Part VIII, Ine 12, but not to fine 19 5 Other (Describe in Part XIII) 90.00 46 0 0 0 4 260,938 6 Other (Describe in Part XIII) 90.00 1 15,137,362 7 Odd Iness 4 and 40 9 9 1 15,137,362 7 Total reviewed Add Ines 2 and 46. (This must equal Form 990, Part I, Ines 12) 5 125,137,362 9 Total reviewed Add Ines 2 and 46. (This must equal Form 990, Part I, Ines 12) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e	Add lines 2a through 2d .		2e	-53,741,956		
a Investment appeases not included on Form 990, Part VIII, line 75. Ab 0 Other (Dreaches Pear XIII)	3	Subtract line 2e from line 1 .		3	134,896,424		
b Other (Describes in Part XIII) Total revenue Add lanes 3 and 4c. (This must equal Earn 990, Part I, Jine 12) STATE IT Reconciliation of Expenses per Addited Financial Statements With Expenses per Return. Complete if the origanization answered Yea's to Form 990, Part IV, Jine 12 5. Total separes and lackses per addited Amenical Statements With Expenses per Return. Complete if the origanization answered Yea's to Form 990, Part IV, Jine 21 5. Additional activities of the State of Tacilities of Control of the State of Tacilities of Control of Statement (Control of Statement Vision) Description of Tacilities of Control of Tacilities of Control of Statement (Control of Statement Vision) Description of Tacilities of Control of Ta	4	Amounts included on Form 99	O, Part VIII, line 12, but not on line 1				
C Add lines 4 and 4b. Total revenue Add lines 3 and 4c. (This must equal form 990, Part I, Jine 12). 5 1353,573,582 Dati XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to from 990, Part IV, Jine 125. 1 Total expenses and losses per sudred financial statements. 1 Total expenses and losses per sudred financial statements. 2 D 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b . 4a 260,938				
STATE Texture And lines 3 and 46, Cft is must equal Form 990, Part I, line 12 5 135,137,362	b	Other (Describe in Part XIII)					
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete If the organization answered Yes' to Form 1990, Part IV, line 123	С	Add lines 4a and 4b		4 c	260,938		
If the organization answered Yes' to Form 990, Part IV, line 128. 1 Total expenses and losses are audited financial statements	5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	135,157,362		
1 Total expenses and losses per audided intensis talements	Part			per	Return. Complete		
2 A mounts included on line 1 bit rottor from 990, Part IX, line 25 a Donated services and use of facilities				1	72 720 012		
a Donated services and use of facilities				<u> </u>	/3,/36,613		
b Pinaryear adjustments							
C Other (Describe in Part XIII)	_			ł			
d Other (Describe in Part XIII)		· -		-			
a Ad lines 2a through 2d	_			-			
3 Subtract line 2e from line 1			<u> </u>				
A mounts included on Form 990, Part V,II, line 17, but not on line 1: a Investment expenses not included on Form 990, Part V,III 1.0		-					
a Investment expenses not included on Form 990, Part VIII, line 7b				3	73,738,813		
b Other (Describe in Part XIII)	4						
c Add lines 4a and 4b. 4c. (This must equal Form 990, Part I, line 18) . 5 121,744,703 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part IIII, lines 1a and 4, Part IV, line 1 b and 2b, Part V, line 4, Part X, line 2, Part X, line 2, Part X, line 2, Part X, line 2 and 4b, and Part XIII, lines 3 and 4b b Also complete this part to provide any additional information. Return Reference Schedule D, Part IIII, Line 1 a Collections of art - financial statement footnote Schedule D, Part IIII, Line 1 a collection are recorded as decreases in uncertificated as assets in the year in which the items are recorded as decreases on the statement of financial position. Purchases of collection statement footnote Schedule D, Part III, Line 4 Collections of art - description of collection is the statement of financial position. Purchases of collection are recorded as decreases in uncertainty and part of the part of the deducational and curstorial purposes. Each of the tens are not reflected on the financial reducational and curstorial purposes. Each of the tens are not reflect on the financial reducations are performed continuously. Collections for art - description of collections. Schedule D, Part VI, Line 4 Intended uses of endowment funds Schedule D, Part VI, Line 4 Intended uses of endowment funds Schedule D, Part VI, Line 4 Intended uses of endowment funds Schedule D, Part VI, Line 2 FIN 48 (ASC 740) footnote The Endowment's primary purpose is to provide support to both Augustane College's general operating budget, to student scholarships and awards, and to support facility chairs and professorships The Endowment's primary purpose is to provide support to both Augustane College's general operating budget, to student scholarships and awards, and to support facility chairs and professorships Schedule D, Part VI, Line 2 (di) Cher scholarships and awards, and to support to both Augustane College's general operation for the part of the part of the part of the pa	а			-			
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18)	Ь	Other (Describe in Part XIII)		1			
Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1 and 4, Part IV, lines 1 b and 2 b, Part V, line 4, Part X, line 2, Part X, lines 2 d and 4b, and Part XIII, lines 2 d and 4b Also complete this part to provide any additional information Return Reference Schedule D, Part III, Line 1 a Collection of art - financial statement fortnote Return Reference Schedule D, Part III, Line 1 a collection constructions, which were acquired through purchases and contributions since the College's inception, are not recognized as assess to not extratement of financial position Purchases of collection statement footnote The collections of art - financial statement provided as decreases in unrestricted net assest in the year in which the items are acquired or as temporarily or permanently restricted net assests in the seasons used to purchase the acquired or as temporarily or permanently restricted net assests in the seasons used to purchase the acquired or as temporarily or permanently restricted net assests in the seasons used to purchase the acquired or as temporarily or permanently restricted net assests in the seasons used to purchase the acquired or as temporarily or permanently restricted net assests in the seasons used to purchase the adoptional and curational purposes Each of the temps is catalogical, preserved, and cared for, and activities verifying their existence and assessing their condition are performed continuously Collections of art - description of collections Schedule D, Part VI, Line 4 Intended uses of endowment funds Schedule D, Part XI, Line 4 Intended uses of endowment funds Schedule D, Part X, Line 2 FIN 48 Ansual Corporation Tax Filing The College files a Form 990 (Return of Organization Exempt from Income Tax) annually. When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the taxing authorities, which others are subject to uncertainty about the ments of the tax positio	C			4c	48,005,890		
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 VI, 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 Explanation The collections of art - financial statement of financial position. Purchases of collection statement footnote The collections, which were acquired through purchases and contributions since the College's inception, are not recognized as assets on the statement of financial position. Purchases of collection statement from the statement of financial position. Purchases of collection is tems are recorded as decreases in unrestricted net assets in the assets used to purchase the items are restricted by domors. Contribute do collection items are not in which the items are restricted by domors. Contribute do collections are made up art objects that have held for educational and curational purposes. Each of the items is cataloged, preserved, and cared for, and activities verifying their existence and assessing their condition are for objects that are held for oblections of art - description of collections Schedule D, Part X, Line 4 Intended uses of endowment funds Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote The Endowments' primary purpose is to provide support to both Augustana College's general operating budget, to student scholarships and awards, and to support faculty chairs and professorships. Annual Corporation Tax Filing. The College files a Form 990 (Return of Organization Exempt from Income Tax) annually. When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the taxing authorities, while others are subject to uncertainty about the ments of the tax positions relative to brigation that would ultimatel				5	121,744,703		
Schedule D, Part III, Line 1a Collections, which were acquired through purchases and contributions since the College's inception, are not recognized as assets on the statement of financial position. Purchases of collection statement fortnote the statement fortnote The collections, which were acquired through purchases and contributions since the College's Collection statement of financial position. Purchases of collection statements of the year in which the Items are acquired or as temporarily or permanently restricted net assets if the assets used to purchase the Items are restricted by donors. Contributed collections are made up of art objects that are held for aducational and curational purposes. Each of the Items is cataloged, preserved, and cared for, and activities verifying their existence and assessing their condition are performed continuously. Collections of art - description of collections of art - description of collections. Schedule D, Part VI, Line 4 Collection so fart - description of collections of works of art, historical treasures or similar assets that are held for public exhibition, education or research The art collections of works of art, historical treasures or similar assets that are held for public exhibition, education or research The Endowments' primary purpose is to provide support to both Augustana College's general operating budget, to student scholarships and awards, and to support faculty chairs and professorships. Schedule D, Part X, Line 2 FIN 48 Annual Corporation Tax Filing The College files a Form 990 (Return of Organization Exempt from Income Tax) annually. When these returns are filed, it is highly cruain that some positions taken would be sustained upon a samination by the taxing authorities, while others are subject to uncertainty about the ments of the tax positions are not worked to acquire a subject to uncertainty about the ments of the tax position is recognized in the financial statements in the period with the position will be available evidence, management	Part \	/, line 4, Part X, line 2, Part XI, nation	lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional		
Inception, are not recognized as assets on the statement of financial position. Purchases of collection is statement from the letters are recorded as decreases in unrestructed net assets in the year in which the items are acquired or as temporantly or permanently restricted net assets in the year in which the items are acquired or as temporantly or permanently restricted net assets in the year in which the items are restricted by donors. Contributed collection interns are not reflected on the financial statements. Proceeds from deaccessions or insurance recoveres are reflected as increases in the appropriate net asset classes. The College's collections are made up of art objects that are held for educational and curational purposes. Each of the items is cataloged, preserved, and cared for, and activities verifying their existence and assessing their condition are performed continuously. Collections from the proceeds from their sales to be used to acquire other items for collections. Schedule D, Part III, Line 4. The art collection consists of works of art, historical treasures or similar assets that are held for public exhibition, education or research. The Endowment's primary purpose is to provide support to both Augustana College's general operating budget, to student scholarships and awards, and to support faculty chairs and professorships. Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote As a considerable of the second provides and a considerable of the position and the support to both Augustana College's general operating budget, to student scholarships and awards, and to support faculty chairs and professorships. Schedule D, Part X, Line 2 FIN 48 As C 740) footnote The Endowment's primary purpose is to provide support to both Augustana College's general operations and available deviates and available and activities and professorships. Schedule D, Part X, Line 2 Fin 48 As C 740) footnote The art collection consists of works of art, historical provides and available and professorships. The	C - l - d		·		- the Cellenale		
Collections of art - description of collections Schedule D, Part V, Line 4 Intended uses of endowment funds The Endowments' primary purpose is to provide support to both Augustana College's general operating budget, to student scholarships and awards, and to support faculty chairs and professorships Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote Annual Corporation Tax Filing The College files a Form 990 (Return of Organization Exempt from Income Tax) annually. When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the taxing authorities, while others are subject to uncertainty about the merits of the tax position scommon to clieges include such matters as the following the tax exempt status of each entity and various positions relative to potential sources of unrelated business income tax (UBIT) UBIT is reported on Form 990-T, as appropriate The benefit of a tax position is recognized in the financial statements in the period during which, based on all available evidence, management believes that it is more likely than not that the positions are not offset or aggregated with other positions. Tax positions that meet the "more likely than not" recognition threshold are measured as the largest amount of tax benefit that is more than 50% likely to be realized on settlement with the applicable taxing authority. The portion of the benefits associated with tax positions that make accepted above would be reflected as a liability for uncertain tax benefits in the accompanying statements of financial position along with any associated interest and penalties that would be payable to the taxing authorities upon examination As of June 30, 2015 and 2014, there were no uncertain tax positions identified. The College does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months Forms 990 and 990-T filed by the College are subject to examination by the Internal Revenue Service (IRS) up to three years from the ex			items are recorded as decreases in unrestricted net assets in the year in acquired or as temporarily or permanently restricted net assets if the assitems are restricted by donors. Contributed collection items are not refles tatements. Proceeds from deaccessions or insurance recoveries are relappropriate net asset classes. The College's collections are made up of educational and curatorial purposes. Each of the items is cataloged, presactivities verifying their existence and assessing their condition are perficulties of the items are subject to a policy that requires proceeds from their	which sets u cted o lected art obj erved ormed	n the items are sed to purchase the in the financial is as increases in the sects that are held for , and cared for, and continuously		
Schedule D, Part XI, Line 2 FIN 48 (ASC 740) footnote Annual Corporation Tax Filing The College files a Form 990 (Return of Organization Exempt from Income Tax) annually. When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the surgia authorities, while others are subject to uncertainty about the merits of the tax position taken or the amount of the position that would ultimately be sustained Examples of tax positions common to colleges include such matters as the following the tax exempt status of each entity and various positions relative to potential sources of unrelated business income tax (UBIT) UBIT is reported on Form 990-T, as appropriate The benefit of a tax position is recognized in the financial statements in the period during which, based on all available evidence, management believes that it is more likely than not that the positions are not offset or aggregated with other positions. Tax positions through the tax positions are not offset or aggregated with other positions. Tax positions that meet the "more likely than not" recognized with that positions taken that exceeds the amount of tax benefit that is more than 50% likely to be realized on settlement with the applicable taxing authorities upon examination. As of June 30, 2015 and 2014, there were no uncertain tax positions identified. The College does not expect the total amount of runcecongrized tax benefits to significantly change in the next 12 months. Forms 990 and 990-T filed by the College are subject to examination by the Internal Revenue Service (IRS) up to three years from the extended due date of each return Management believes the Forms 990 and 990-T have been filed appropriately. The College would recognize interest and penalties related to unrecognized tax positions in interest and income tax expense, respectively. The College has no amounts accrued for interest or penalties as of June 30, 2015 and 2014. Schedule D, Part XII, Line 2(d) Other expenses in form 990 Sche	Collect	ions of art - description of		asset	s that are held for		
Income Tax) annually. When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the taxing authorities, while others are subject to uncertainty about the merits of the tax position taken or the amount of the position that would ultimately be sustained Examples of tax positions common to colleges include such matters as the following the tax exempt status of each entity and various positions relative to potential sources of unrelated business income tax (UBIT) UBIT is reported on Form 990-T, as appropriate The benefit of a tax position is recognized in the financial statements in the period during which, based on all available evidence, management believes that it is more likely than not that the position will be sustained upon examination, including the resolution of appeals or litigation processes, if any. Tax positions are not offset or aggregated with other positions. Tax positions that meet the "more likely than not that the recognition threshold are measured as the largest amount of tax benefit that is more than 50% likely to be realized on settlement with the applicable taxing authority. The portion of the benefits associated with tax positions taken that exceeds the amount measured as described above would be reflected as a liability for uncertain tax benefits in the accompanying statements of financial position along with any associated interest and penalties that would be payable to the taxing authorities upon examination As of June 30, 2015 and 2014, there were no uncertain tax positions identified. The College does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months. Forms 990 and 990-T filed by the College are subject to examination by the Internal Revenue Service (IRS) up to three years from the extended due date of each return. Management believes the Forms 990 and 990-T have been filed appropriately. The College would recognize interest and penalties related to unrecognized tax positions i			operating budget, to student scholarships and awards, and to support fac				
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990 Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited Scholarships47744952			Income Tax) annually When these returns are filed, it is highly certain that some positions taken would be sustained upon examination by the taxing authorities, while others are subject to uncertainty about the merits of the tax position taken or the amount of the position that would ultimately be sustained Examples of tax positions common to colleges include such matters as the following the tax exempt status of each entity and various positions relative to potential sources of unrelated business income tax (UBIT) UBIT is reported on Form 990-T, as appropriate. The benefit of a tax position is recognized in the financial statements in the period during which, based on all available evidence, management believes that it is more likely than not that the position will be sustained upon examination, including the resolution of appeals or litigation processes, if any. Tax positions are not offset or aggregated with other positions. Tax positions that meet the "more likely than not" recognition threshold are measured as the largest amount of tax benefit that is more than 50% likely to be realized on settlement with the applicable taxing authority. The portion of the benefits associated with tax positions taken that exceeds the amount measured as described above would be reflected as a liability for uncertain tax benefits in the accompanying statements of financial position along with any associated interest and penalties that would be payable to the taxing authorities upon examination. As of June 30, 2015 and 2014, there were no uncertain tax positions identified. The College does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months. Forms 990 and 990-T filed by the College are subject to examination by the Internal Revenue Service (IRS) up to three years from the extended due date of each return. Management believes the Forms 990 and 990-T have been filed appropriately. The College would recognize interest and penalties related to unrecognized tax positions in inter				
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited	revenu	es ın audıted fınancıal					
ı	Schedu	ile D, Part XII, Line 4(b) Other es in form 990 not in audited	Scholarships - 47744952				

2011 Call Call Call Call Call Call Call Ca		1 age 3		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
-				

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493047008116

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE E

(Form 990 or 990-EZ)

Schools ▶Complete if the organization answered "Yes" to Form 990,

Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

JGU	STANA COLLEGE			
Pa	rt I	6-2166962	YES	S NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its other governing instrument, or in a resolution of its governing body?	s charter, bylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students brochures, catalogues, and other written communications with the public dealing with student adm programs, and scholarships?		Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcathe period of solicitation for students, or during the registration period if it has no solicitation progrethat makes the policy known to all parts of the general community it serves? If "Yes," please describes explain If you need more space use Part II	ram, ın a way		No
	Does the organization maintain the following?	40	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially no basis?	ondiscriminatory 4b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the pub with student admissions, programs, and scholarships?	lic dealing 4c	Yes	1
d	Copies of all material used by the organization or on its behalf to solicit contributions?	<u>4d</u>	Yes	
5	If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to			
	Students' rights or privileges?	<u>5a</u>		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	50		No
d	Scholarships or other financial assistance?			No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	<u>5g</u>		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	_ <u>5h</u>		No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b		No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 0 of Rev. Proc. 75-50. 1975-2 C.B. 587. covering racial nondiscrimination? If "No." explain on Part		V 0 -	

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

Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	All major publications dealing with student admissions, programs and scholarships, include our racially nondiscriminatory policy as to the students. Further, all written advertising given to prospective students contains our policy statement. Because we customarily draw about 90% of our students from outside the general community, we do not have to publicize our nondiscriminatory policy to the general community. In order to demonstrate that we are following our policy, we point to our current first year enrollment of racially minority students which stands at about 15%. We feel this is a meaningful number to qualify for the publicity notice exception provided by Section 4.03(2)(b) of Rev. Proc. 75-50.
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	Financial Assistance is received from the State of Illinois as financial assistance for non-public institutions, and federally funded student aid programs include College Work Study Program, Direct Loan Program, Pell Grant Program, Perkins Loan Program, Supplemental Educational Opportunity Grant Program, SMART Grant Program, and Academic Grant Program

Schedule E (Form 990 or 990-EZ) (2014)

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As Filed Data -

DLN: 93493047008116

SCHEDULE F Statem (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.

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

OMB No 1545-0047

2014

Open to Public Inspection

	e of the organization				Employer ident	ification number
AUG	USTANA COLLEGE				36-2166962	
Pa	rt I General Information "Yes" to Form 990, Par	n on Activitie t IV, line 14b.	es Outside th	ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	ntees' elıgıbılı	ty for the gran	ts or assistance, and	the selection criteria	┌ Yes ┌ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of its grant	s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ice 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)						
За	Sub-total	0	0			20,070,243
b	Total from continuation sheets to Part I	0	0			0
c	: Totals (add lines 3a and 3b)	0	0			20,070,243

Schedule F (Form 990) 2014

Pē				izations or Entitle ived more than \$5,0		•			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are re or counsel has pro					
3	Enter total nun	nber of other or	ganizations or ent	ities					

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 addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

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	Γ	Νo
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; do not file with Form 990)	Γ	Yes	[স	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)	r	Yes	Г	Νo
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)	Γ	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)	Г	Yes	দ	Νo
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: do not file with Form 990)	Г	Yes	<u>~</u>	No

Schedule F (Form 990) 2014

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 36-2166962

Name: AUGUSTANA COLLEGE

Schedule F (Form 990) 2014

Page **5**

Part V Supplemental Information

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

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	0	0		COURSE STUDY ABROAD	629,883
Europe (Including Iceland and Greenland)	0	0		COURSE STUDY ABROAD	417,898
Central America and the Caribbean	0	0		COURSE STUDY ABROAD	147,046

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ties Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America	0	0	Program Services	COURSE STUDY ABROAD	185,435
Central America and the Caribbean			Investments		18,609,737
Sub-Saharan Africa	0	0	Program Services	COURSE STUDY ABROAD	74,980

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
South Asia	0	0	Program Services	COURSE STUDY ABROAD	4,213	
Russia and Neighboring States	0	0	· · · 3 · · · · · · · · · · · · · · · · · · ·	ABROAD PROGRAMMING	1,051	

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DLN: 93493047008116

OMB No 1545-0047

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.

Supplemental Information Regarding

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

Open to Public Inspection

Name of the organization

(Form 990 or 990-EZ)

SCHEDULE G

Department of the Treasury

Internal Revenue Service

Employer identification number

AUGUSTANA	OLLEGE						3	36-2166962	
		ivities. Complete i		janizatio	n answered	l "Yes" to	Form 99	90, Part IV, l	ıne 17. Form 990-EZ
1 Indicate v	whether the orga	nızatıon raısed funds t	hrough ar	ny of the f	following activ	vities Che	ck all tha	t apply	
	olicitations				Solicitat				
b ✓ Interr	net and email so	licitations		f	Solicitat		_	_	
c 🔽 Phone	solicitations			g	▼ Special	fundraising	gevents		
d 🔽 In-pe	rson solicitation	ıs							
		a written or oral agree n Form 990, Part VII)							✓ Yes ✓ N
		est paid individuals or st \$5,000 by the orgai		undraisei	rs) pursuant (to agreeme	ents unde	r which the fun	draiser is
indiv	nd address of vidual fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross from act		(or ref fundrais	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No					
1 RUFFALO	CODY	PHONE-A-THON		No		279,254		91,980	187,274
2									
3									
4									
5									
6									
7									
8									
9									
10									
Total				.		279,254		91,980	187,274
registratio	on or licensing	e organization is regist	ered or li	censed to	solicit contr	ributions or	has beer	n notified it is e	exempt from
AK,CO,IL,NH	, MA, WA, OR								

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported les 1 and 6b. List	
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))	
			(event type)	(event type)	(total number)		
Revenue	1	Gross receipts					
₽ ΛΦ	2	Less Contributions					
<u>~</u>	3	Gross income (line 1 minus line 2)					
	4	Cash prizes					
£O.	5	Noncash prizes					
Expenses	6	Rent/facility costs					
ă	7	Food and beverages .					
Direct	8	Entertainment					
ā	9	Other direct expenses .					
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()	
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)			
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than	
<u>Ф</u>		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add	
Revenue				bingo/progressive bingo		col (a) through col (c))	
<u>~</u>	1	Gross revenue					
Expenses	2	Cash prizes					
xper	3	Non-cash prizes					
Dreat E	4	Rent/facility costs					
چ	5	Other direct expenses					
	6	Volunteer labor			│ Yes		
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)			
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)			
9	Ent	er the state(s) in which the organiza	ation conducts gaming a	ctivities			
а							
b							
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?		
U	TI	163, Explain					

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3				
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity						
	formed to administer charitable gaming	,,		Г _{Yes} Г	— No				
13	Indicate the percentage of gaming acti		1 1	,					
а	The organization's facility		13a		%				
b	An outside facility				%				
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records						
	Name ▶								
	Address ►								
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming						
154				┌ 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	f "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								
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to						
	retain the state gaming license?	etain the state gaming license?							
b	Enter the amount of distributions requi	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	ın the organization's own exempt activi		·						
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr						
	Return Reference		Explanation						

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493047008116 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number AUGUSTANA COLLEGE 36-2166962 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 Domestic Organizations and Domestic Governments. 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

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 Description Of Procedure For Monitoring Use Of Grant Funds	The institution awards both need based and merit based funds and are distributed in a fair and equitable basis. Funds are awarded based on the institution's packaging policies and awarding criteria. Students must complete the Free Application for Federal Student Aid (FAFSA) on a yearly basis to apply for need based institutional assistance. The FAFSA results are used to determine eligibility for need based awards based on the established institutions packaging policies. Special circumstances may be considered when awarding need-based funds and are considered on an individual basis. Student records/files are kept for 4 years from the date of last enrollmentfiles will include FAFSA's and all supporting documentation for determining eligibility. The college maintains control of these funds by applying them directly to a students billing instead of awarding them directly to the student ensuring proper use.			
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	The institution awards both need based and merit based funds and are distributed in a fair and equitable basis. Funds are awarded based on the institution's packaging policies and awarding criteria. Students must complete the Free Application for Federal Student Aid (FAFSA) on a yearly basis to apply for need based institutional assistance. The FAFSA results are used to determine eligibility for need based awards based on the established institutions packaging policies. Special circumstances may be considered when awarding need-based funds and are considered on an individual basis. Student records/files are kept for 4 years from the date of last enrollmentfiles will include FAFSA's and all supporting documentation for determining eligibility. The college maintains control of these funds by applying them directly to a students billing instead of awarding them directly to the student ensuring proper use.			
	Schedule I (Form 990) 2014			

Software ID: 14000329

Software Version: 2014v1.0

EIN: 36-2166962

Name: AUGUSTANA COLLEGE

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
HONORS SCHOLARSHIP	1547	20,416,183			
AUGUSTANA GRANT	1105	5,518,639			
SEOG GRANT	167	93,424			
TUITION EXCHANGE	30	976,899			
PRESIDENTIAL SCHOLARSHIPS	680	12,063,019			
MERIT BASED SCHOLARSHIPS	498	881,037			
ALUMNI SCHOLARSHIPS	139	134,916			
OTHER SCHOLARSHIPS	1854	2,700,649			
FAMILY ALLOWANCE	1	1,000			
YELLOW RIBBON SCHOLARSHIPS	6	22,508			
SEOG	606	280,273			
ENDOWED SCHOLARSHIPS	850	3,174,682			
ANNUAL SCHOLARSHIP	162	577,181			
MINORITY SCHOLARSHIP	305	790,394			
OTHER FUNDED SCHOLARSHIPS	21	97,149			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance		
Student Language Awards	20	17,000					

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DLN: 93493047008116

OMB No 1545-0047

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.

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

Open to Public Inspection

Name of the organization AUGUSTANA COLLEGE

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

36-2166962

Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(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 o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
Steven Bahls College President	(i) (ii)	341,468 0	65,000 0	0	31,750 0	29,779 0	467,997 0	0
2 David English VP of Finance and Aministration	(i) (ii)	183,083 0	0	0	19,873 0	12,216 0	215,172 0	0
3 Kent Barnds Executive VP Enrollment and Communication & Planning	(i) (ii)	168,624 0	45,000	0 0	18,798 0	14,134 0	246,556	0 0
4 Pareena Lawrence Dean of the College	(i) (ii)	174,758 0	0	0	7,011	13,091	194,860 0	0
5 Evelyn Campbell Dean and VP Student Services	(i) (ii)	146,368 0	0	0	15,188	5,940 0	167,496 0	0

Schedule J (Form 990) 2014

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	The President's wife accompanies him on College-related business as part of her employment contract with the College
allowance or residence for personal	As part of the President's contract he is required to reside in the College-owned residence at the College's expense, including but not limited to, grounds keeping, general maintenance and all utilities. The President's residence is available for College-related business and entertainment on a regular and continuing basis. These benefits are not considered taxable.
, ,	Steve Bahls has a membership to the Chicago Club Membership is by invitation only Primarily this membership is used for lodging and meeting accommodations. This is not considered a taxable benefit.

Schedule J (Form 990) 2014

DLN: 93493047008116

OMB No 1545-0047

Schedule K (Form 990)

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

► Attach to Form 990.

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

explanations, and any additional information in Part VI.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

	AUGUSTANA COLLEGE								36-2166962						
	Pand Torus									36-	-21669	62			
	art I Bond Issues (a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Desc	(f) Description of purpose		(g) De	beh		On (i) Pool alf of financing		
										Yes	No	Yes	No	Yes	No
Α	Quad Cities Regional Development Authority	36-3580390	74731RAV3	07-11-2012	38,70		Construction life center a 2003A bon	and reti			X		X		X
В	Illinois Educational Facility Authority	52-1297563	4520014E7	02-13-2003	7,09	,	Construction Athletic Facus Sue		Renovation o , 2003B	f	Х		Х		X
c _	Quad Cities Regional Development Authority	36-3580390	74731RAB7	10-21-2005	15,00	· ·	Construct N Renovation		s Halls and		Х		Х		Х
D_	Illinois Finance Authority	86-1091967	nonenonen	06-28-2007	5,00		Construct N		partments and s	i L	Х		Х		Х
Pa	art III Proceeds														
	A			,	A	<u> </u>		В			С	\longrightarrow		D	
1	A mount of bonds retired				 		0		0	0			0		
2	A mount of bonds legally defea	<u> </u>			 		0		0	15.000.000			0		
3	Total proceeds of issue					38,702,7		7	7,090,000	15,000,000					,000,000
4	Gross proceeds in reserve fur Capitalized interest from proc				 	847,2	244		0	0					0
5	Proceeds in refunding escrows				 		0		0	0				0	
6	Issuance costs from proceeds				 		0		0	<u> </u>		0			0
7	Credit enhancement from proceeds				 	658,0	033		49,007	·		-			100,000
8	Working capital expenditures				 		-0		40,993	57,081					
9 10	Capital expenditures from pro				 	7.004	100		7,000,000		1161	2010			0
11	O ther spent proceeds				-	7,004,1 30,193,3			0		14,64	2,919		",	,900,000
12	O ther unspent proceeds				 	10,193,2	301		0			0			
13	Year of substantial completion	 on			20:	1 3		2004	-	2008		$\overset{u}{\longrightarrow}$		2010	
					Yes	No	Yes		No	Yes		lo	Yes		No
14	Were the bonds issued as par	rt of a current refundi	ng issue?		Х				Х		 			\top	X
15	Were the bonds issued as par	rt of an advance refur	nding issue?			Х			Х		+	×		\top	X
16	Has the final allocation of pro	ceeds been made?			Х		X			Х	+		Х	\top	
17	Does the organization maintai	ın adequate books ar	nd records to supp				Х			Х					
Pa	rt IIII Private Business L	Use													
					A	1		В			С			D	
					Yes	No	Ye	s	No	Yes	N	lo	Yes	$-\!\!\!\!\!+$	No

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

	adie K (Form 990) 2014									Page Z
Par	t IIII Private Business Use (Continued)		1				ı			
				A		B N-				D No.
За	Are there any management or service contracts that may result in private of bond-financed property?	business use	Yes	No X	Yes	No X	Yes	No X	Yes	No X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х		Х		х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use bother than a section $501(c)(3)$ organization or a state or local government			•						-
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5			0 %		0 %		0	%	0 %
7	Does the bond issue meet the private security or payment test?			Х		Х		Х		Х
8a	Has there been a sale or disposition of any of the bond-financed property t nongovernmental person other than a 501(c)(3) organization since the bor issued?			х		х		х		х
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of				•		•		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		x		Х		х		×	
Pai	t IV Arbitrage									
		Α			В		С		D	
		Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		Х			Х		Х
2	If "No" to line 1, did the following apply?		<u>'</u>	<u> </u>	· · ·		<u> </u>			
а	Rebate not due yet?	Х			Х			Х		Х
ь	Exception to rebate?				Х			Х	Х	
С	No rebate due?		Х	Х			(Х
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed		•	•	•	•	•			
3	Is the bond issue a variable rate issue?		Х	Х		>	(Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х			Х		Х
ь	Name of provider									
С	Term of hedge		0 0					0 0		0 0
d	Was the hedge superintegrated?									
е	Was the hedge terminated?									
			1							

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

Part V Procedures To Undertake Corrective Action

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

Explanation

Part VT	Supplemental Information. Provide additional information for response	onses to questions on Schedule K (see instructions)
I GILC AT	Supplemental Information: I forme additional information for respe	onses to questions on senedate it (see instructions).

Schedule K, Part I, Column (f)	Issuer name Ouad Cities Regional Development Authority Construction of dining student life center and retirement of 2003A bond issue
Description Of Purpose	135 de l'hame quad d'élèc l'églonal Bévelopmone / dellotte, d'élèc d'élèc l'hame delle l'hame l'élèc

Return Reference

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name Illinois Educational Facility Authority Construction and Renovation of Athletic Facilities, 2003B issue

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name Quad Cities Regional Development Authority Construct New Res Halls and Renovations

Return Reference	Explanation
Schedule K, Part IV, Line 2c Rebate Calculation	Issuer name Quad Cities Regional Development Authority The calculation for computing no rebate due was performed on 01/07/2010

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name Illinois Finance Authority Construct New Apartments and renovate Res halls

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DLN: 93493047008116

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

Name of the o								1	Employ	er ident	ificatio	n numb	er	
AUGUSTANA CUL	LGC								36-21	66962				
Part I Exc	ess Benefit	Transact	ions	s (section	501(c)(3),	section 501(c)(4), and 501				s only)			
	plete if the orga											40b		
1 (a) Nan	ne of disqualifie	d person	(b)	Relationsl	nıp between	disqualified	(c) Desc	(c) Description of transaction			ı L	(d) Corrected?		
				person	and organiz	zation						Yes	No	
4958. 3 Enter the Part II Loans to a Complete if the	amount of tax i amount of tax, nd/or From ne organization mount on Form	Interest	e d F	above, rei Persons on Form 9	mbursed by	the organizati	on	 		* \$		anızatıo	n	
(a) Name of interested person	(b) Relationship with organization P		se of or from the		the	he principal		(g) In default?		(h) Approved by board or committee?		(i)Written agreement?		
				То	From			Yes	No	Yes	No	Yes	No	
												_		
Total		▶ \$		-										
	ants or Ass implete if the						art IV. line 2	77.						
(a) Name of perso	interested ((b) Relation nterested po organ	shıp l erson	between and the		nt of assistance	<u> </u>		sistand	ce (e) Purpo:	se of as	sistance	
							·							

	is Involving Interested ation answered "Yes" on F		ne 28a, 28b, or 28c.		
(a) Name of interested person (b) Relationship between interested person and the organization (c) A mount of transaction (d) Description of transaction		(d) Description of transaction	(e) Sh of organiz reven	: zatıon's	
				Yes	No
(1) JANE BAHLS	PRESIDENT'S WIFE	•	PAYMENT PURSUANT TO [CONTRACT/CONSULTING]		No

Part V	Supplemental Information

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

Return Reference	Explanation

BAHLS

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493047008116

OMB No 1545-0047

Open to Public

SCHEDULE M (Form 990)

Department of the Treasury

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.

Interna	al Revenue Service							<u>ectio</u>	n
	ne of the organization				Emp	loyer ident if icat	ion nu	mber	
AUG	JSTANA COLLEGE				26 -	2166962			
D	art I Types of Property				30-2	100902			
	Types of Troperty	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VII	n	Method of a noncash contri		_	ınts
_				line 1 g	_				
	Art—Works of art								
2	Art—Historical treasures .								
3	Art—Fractional Interests								
4	Books and publications								
5	Clothing and household								
6	goods								
7	Boats and planes				-				
8	Intellectual property								
9	Securities—Publicly traded .	X	15	1 195 (14 2 M	larket value			
_	Securities—Closely held stock .		13	1,103,0	772 11	diket value			
	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—O ther								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies .								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (Х	2	7,8	327 M	larket value			
<u>A ırt</u>	ime)	_							
<u>Boa</u>	Other► (rd Travel)	_ X	4	2,1		larket value			
	Other▶ (nt Donation)	_ X	1		30 M	larket value			
28 Piai	Other▶(no)	_ X	1	14,6	550 O	pinions of exper	rts		
29	Number of Forms 8283 received by t for which the organization completed				29			W	1
30-	 During the year, did the organization 	receive by	contribution any property r	reported in Dart I line	c 1 +h	rough 28 that		Yes	No
300									
	it must hold for at least three years			, and winch is not requ	iiieu t	o be used			١
_	for exempt purposes for the entire ho		l'		•		30a		No
ŀ	If "Yes," describe the arrangement i	n Part II							1
31	Does the organization have a gift ac	ceptance po	licy that requires the revie	w of any non-standard	d cont	ributions?	31	Yes	<u> </u>
32a	Does the organization hire or use thi	rd parties oi	related organizations to s	olicit, process, or sell	nonc	ash • •	32a		No
ŀ	If "Yes," describe in Part II								<u> </u>

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,

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

number of items red	erved, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
•	Securities - Publicly traded Number of contributions Other Number of contributions Other Number of Contributions Other Number of Contributions
Schedule M, Part I, Line 9 Number of contributions or items contributed	Number of contributions
Schedule M, Part I Number of contributions or items contributed	Number of contributions
Schedule M, Part I Number of contributions or items contributed	Number of Contributions
Schedule M, Part I Number of contributions or items contributed	Number of contributions

Schedule M (Form 990) (2014)

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493047008116

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization AUGUSTANA COLLEGE	Employer identification number
	36-2166962

Return Reference	Explanation
CoreFormPartIII_PartIIIL.ine4d Description of other program services	(Expenses \$ 9,949,601 including grants of \$)(Revenue \$ 14,528,007) HIGHER EDUCATION STUDENT SERVICES - SERVES THE STUDENT COMMUNITY BY PROVIDING REGISTRATION ASSISTANCE, COUNSELING, CAREER PLANNING, INTERNSHIPS, FINANCIAL ASSISTANCE, MULTICULTURAL PROGRAMMING, ORIENTATION AND ADVISING, INTRAMURAL SPORTS, AND OTHER RELATED PROGRAMS (2,500 STUDENTS) HIGHER EDUCATION PUBLIC SERVICES - INCLUDES A CENTER FOR COMMUNICATIVE DISORDERS, ART PROGRAMS, ALUMNI PROGRAMS, COMMUNITY SERVICE AND A NATIONAL PUBLIC RADIO STATION SERVING THE STUDENTS AND COMMUNITY (2500 STUDENTS) HIGHER EDUCATION RESEARCH - SUPPORTS EXTENSIVE OPPORTUNITIES FOR STUDENTS AND FACULTY TO CONDUCT RESEARCH ON AND OFF CAMPUS (2,500 STUDENTS)

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The Form 990 is provided to the full board of trustees for review and comment via a secure website prior to filing, the Audit Committee of the board approves the Form 990 before filing

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	The College has a conflict of interest policy included within its Code of Conduct which is distributed to all employees via a printed and electronic handbook. The Code requires that conflicts be disclosed to an employee's supervisor, the General Counsel, or the College President. This policy covers all employees as well as college visitors, including consultants. To avoid a conflict, employees are prohibited from accepting a position with another employer without supervisory approval. Any employee wishing to perform consulting services must obtain prior approval from the President of the College. Finally, gifts are strictly limited and must be disclosed to the President's office if valued over \$100. Additionally, the College has a "self-standing" Conflict of Interest policy which is referenced in the Code of Conduct and also included in the handbook. Compliance with this policy is affirmed in writing each year by each individual member of the Board of Trustees. These responses are reviewed by the General Counsel and the College President, any potential conflicts would also be reviewed by the Audit Committee and Executive Committee. Ultimately, the Audit Committee would determine the existence of a conflict and the appropriate remedy, and report these to the Board. The Conflict of Interest policy precludes any individual in a conflict of interest situation from voting on any proposed transaction which relates to the conflict. Remedies beyond abstention from voting would be determined on a case by case basis.

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The College President and the Compensation Committee, comprised of independent board members, reviews compensation of top management positions at the College at least on an annual basis. The Compensation Committee reviews the compensation of the President of the College in the absence of the President, also on at least an annual basis. Minutes are taken during these meetings. The Compensation Committee last met in July 2014 for this reporting period. A variety of benchmarking data is reviewed by this Committee in determining appropriate compensation, including but not limited to comparability data made available by CUPA, ELCA, and the Chronicle of Higher Education. The Compensation Committee has been charged by the Board with the responsibility of exercising the "authority of the Board" with respect to terms and conditions of employment of the President and of other senior administrative employees of the College.

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	These positions were last reviewed for salary year beginning September 1, 2014 College President Vice President of Finance and Administration Vice President of Enrollment College Chaplain Vice President and Dean of Student Services Vice President of Advancement Dean of the College General Counsel

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	The governing documents, conflict of interest policy, and financial statements are available in hard copy and electronically upon request from the public

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	various - Total Revenue 288522, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 288522,

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Change in recognition of reported Art Collection10776318,

Return Reference	Explanation
Schedule M, Part I Number of contributions or items contributed	Number of Contributions