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DLN: 93493095008426

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2014 ca	lendar year, or tax year beginning	g 07-01-2014 ,and ending 06-30-20	015				
B Che	ck if a	pplicable	C Name of organization Elmhurst College			D Emplo	yer ide	ntification number	
☐ Add	ress ch	ange	•			36-2:	16914	5	
┌ Nar	ne cha	nge	% KAREN KISSEL Doing business as						
┌ Init	ıal retu	rn				E Teleph	ono num	phor	
_ Fina			Number and street (or P O box if m 190 Prospect Avenue	nail is not delivered to street address) Room/	/suite				
_		nınated	190 Plospect Avellue			(630)	617-3	3012	
•	ended i	return ı pending	City or town, state or province, cour Elmhurst, IL 601263296	ntry, and ZIP or foreign postal code		G Gross i	eceipts	\$ 134,982,920	
,		. ,	F Name and address of prir	ocinal officer	11/->			_	
			Dr Larry A Braskamp	icipal officer	H(a)	Is this a group subordinates?		TYes ▼ No	
			190 PROSPECT AVENUE	:					
			ELMHURST,IL 601263296	5		Are all subord	nates	Γ Yes Γ No	
	k-exem	pt status	5	Insert no) 4947(a)(1) or 527		included? If "No," attach	ı a lıst	(see instructions)	
J W	ebsite	e: ► ww	w elmhurst edu		H(c)	Group exempt			
K Forr	n of ord	na nizatior	Corporation Trust Associatio	n Other b	``	ar of formation 19	142 M	State of legal domicile IL	
	rt I		imary	nij Otlei F	Lie	ar or rollination 13	/4Z I*I	State of legal doffficile 1E	
Activities & Governance	E	Elmhurs	describe the organization's missic of College works with passion and gical innovation, scholarship and	l commitment to foster learning, broa	den knowl	edge, and enric	h cultu	ure through	
ē	-	C la a a la 4	h h h		d - 6 1	-h 2.50/5-h-			
6.0	2 (CHECK t	ins box 📶 - if the organization di	scontinued its operations or dispose	u or more t	.nan ∠5% Of its	net as	sets	
26	з г	Number	of voting members of the govern	ing body (Part VI, line 1a)			з	32	
<u>ae</u>	4 1	Number	of independent voting members	of the governing body (Part VI, line 1	b)		4	31	
1	5	Total nu	ımber of ındıvıduals employed ın	calendar year 2014 (Part V, line 2a)			5	1,829	
Æ	6	Total nu	ımber of volunteers (estımate ıf n	ecessary)			6	779	
	7a 7	Total ur	nrelated business revenue from P	art VIII, column (C), line 12			7a	423,460	
	ь	Net unre	elated business taxable income f	rom Form 990-T, line 34			7b		
						Prior Year		Current Year	
_	8	Contr	ributions and grants (Part VIII, li	4,574,	939	4,632,332			
Rayenue	9	Progr	am service revenue (Part VIII, li	ne 2g)		100,666,	507	102,396,093	
e Ae	10	Inves	tment income (Part VIII, columr	8,295,	214	6,812,917			
ш	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		1,462,	619	1,370,998	
	12			(must equal Part VIII, column (A), l	ine	114,999,	279	115,212,340	
	13			IX, column (A), lines 1–3)	.	44,041,		45,997,027	
	14			X, column (A), line 4)		, ,	0	0	
	15			ee benefits (Part IX, column (A), lines		45.106	224	45 507 030	
\$		5-10		, , , , , , , , , , , , , , , , , , , ,		45,196,	224	45,597,029	
8	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	0	
Expenses	b	Total fo	undraising expenses (Part IX, column (D), line 25) • 1,963,443	.				
ш	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)	. —	26,374,	178	26,848,347	
	18			st equal Part IX, column (A), line 25)		115,611,		118,442,403	
	19	Rever	nue less expenses Subtract line	18 from line 12		-612,	674	-3,230,063	
\$ %					Beg	inning of Curre	nt	End of Year	
Net Assets or Fund Balances						Year			
Ass 18a	20				•	184,907,		178,046,425	
<u> 55</u>	21				•	86,404,		91,886,954	
	22		nature Block	line 21 from line 20	•	98,503,	236	86,159,471	
Unde my kr	rowled	lties of dge and	perjury, I declare that I have ex	amined this return, including accomp nplete Declaration of preparer (other					
		***	***			2016-03-30			
Sign		Sign	ature of officer			Date			
Here			EN KISSEL VP FINANCE/CFO						
		<u> </u>	e or print name and title		1 =				
_	_		Print/Type preparer's name Bridget T Roche	Preparer's signature Bridget T Roche	Date	Check If self-employed	PTIN P0066	 6837	
Paid			Firm's name F GRANT THORNTON LLF		1	Firm's EIN	1		
	pare		Fırm's address ► 171 N CLARK ST SUITE	: 200		Phono no (315) 0F6 0	200	
Use	Onl	ly		. 200		Phone no (312	., 030-0	200	
		- 1	CHICAGO, IL 60601			1			

✓ Yes ☐ No

art 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)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	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 $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	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		No
	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	Yes	
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 "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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 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? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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 IV			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M ${\mathfrak Z}$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32		32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		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? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	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	<u> </u>	<u> </u>	厂_
	Estable number manded in Barra 2 of Francis 1996 February		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4,725 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			
·	gaming (gambling) winnings to prize winners?	1 c	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?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
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		No
ь	If "Yes," enter the name of the foreign country 🕨			_
	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		N o
	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?	3 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
Ь	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9a	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		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
D	II TES. HAS IL HIED A FORM 720 LO REDOTE TRESE DAVMENTS? IT "NO." DROVIGE AN EXPLANATION IN SCHEAULE O	14b		

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

Check in Schedule O contains a response of note to any fine in this fact vir.	Check if Schedule O	O contains a response or note to any line in this Part VI									[৴
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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	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		Νο
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	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing			
h	the form?	11a	Yes	
ט	the form?	11a	Yes	
		11a 12a	Yes	
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Yes	
12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b	Yes	
12a b c	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c	Yes Yes Yes	
12a b c	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14 15	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c 13 14	Yes Yes Yes Yes	
12a b c 13 14 15	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Vipon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►KAREN KISSEL

190 PROSPECT AVENUE

Elmhurst,IL 601263296 (630)617-3012

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 l	ne l both	box, an d	officer stee)	į	(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

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	•	1,659,570	0	359,317

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	_		
	marviadai	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? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Novitex Enterprise Solutions, PO Box 845801 DALLAS, TX 75284	Mailing Service	452,252
Ruffalo Noel-Levitz Llc, PO Box 718 DES MOINES, IA 50303	Consulting	438,161
Active Marketing Partners Inc, 2222 W Diversey Ave CHICAGO, IL 60647	Marketing	204,800
Lee Daniels Associates Llc, 105 S York Rd ELMHURST, IL 60126	Consulting	161,003
Grant Thornton LLP, 171 N Clark SUITE 200 CHICAGO, IL 60601	Accounting	134,441
2 Total number of independent contractors (including but not limited to those	se 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 -11

Part V	ΉП	Statement of Revenue					
		Check if Schedule O contains a res	sponse or note to any II	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क इ	1a	Federated campaigns	1a				312-314
ran our	b	Membership dues	1b				
Ā.G	С	Fundraising events	1c 216,307				
iffs ar.	d	Related organizations	1d				
s, G imil	е	Government grants (contributions)	1e 2,501,496				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and	1 f 1,914,529				
the the	g	similar amounts not included above Noncash contributions included in lines	227.062				
	9	1a-1f \$	237,062				
Contain	h	Total. Add lines 1a-1f		4,632,332			
<u> </u>			Business Code				
κeπ	2a	STUDENT TUITION AND FEES	812900	95,578,563	95,578,563		
22	Ь	RESIDENCE HALLS	721000	6,286,306	6,251,805	34,501	
≥ 0.0	C	OTHER ATHLETIC, ARTS & CULTURE	812900	425,566	425,566		
Š	d	GRANT AND LOAN ADMINISTRATION FEES COMMUNITY EDUCATION		54,183	54,183		
Ta I	e f	All other program service revenue	812900	51,475	51,475		
Program Serwce Revenue	•						
	g	Total. Add lines 2a-2f		102,396,093			
	3	Investment income (including diviand other similar amounts)		1,055,980		-4,901	1,060,881
	4	Income from investment of tax-exempt b	ond proceeds	0			
	5	Royalties		0			
	62	(ı) Real	(II) Personal				
	ь	Less rental					
	c	expenses Rental income	0				
	d	or (loss) Net rental income or (loss)		0			
	"	(i) Securities	(II) O ther				
	7a	Gross amount from sales of 25,419,453					
		assets other than inventory	'				
	ь	Less cost or					
		other basis and 19,662,516 sales expenses					
	C .	Gain or (loss) 5,756,937		5,756,937		123,040	5,633,897
	d 8a	Net gain or (loss)	· · · · · •	3,730,937		123,040	3,033,037
Other Revenue		events (not including \$	c)				
ď		,	a 72,153				
E E	Ь	Less direct expenses	b 108,064				
ō	C	Net income or (loss) from fundrais		-35,911			-35,911
	9a	Gross income from gaming activiti See Part IV, line 19	a				
	b	Less direct expenses	ь				
		Net income or (loss) from gaming Gross sales of inventory, less returns and allowances .	activities	0			
	Ь	Less cost of goods sold	a b				
		Net income or (loss) from sales of		o			
		Miscellaneous Revenue	Business Code				
		OUTSIDE CONFERENCE & FACILITIES RENTALS	900099 722320	237,709 214,892		146,498 89,483	,
	b	FOOD SERVICE	722320	,		89,483	,
	l q	OUTSIDE PRINTING	201000	951,279		34,839	3,029 916,440
	d e	All other revenue Total. Add lines 11a-11d				J4,0J9	710,440
	12	Total revenue. See Instructions		1,406,909			
		iotal levenue. See This huchons	🟲	115,212,340	102,361,592	423,460	7,794,956

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)

36000	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this		(B)	 (c)	<u>l</u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	45,874,564	45,874,564		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	122,463	122,463		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,176,400	222,518	759,867	194,015
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	20,500	20,500		
7	Other salaries and wages	33,577,183	25,607,397	6,894,118	1,075,668
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,012,693	1,437,532	513,936	61,225
9	Other employee benefits	6,393,135	4,807,245	1,371,552	214,338
10	Payroll taxes	2,417,118	1,833,686	504,816	78,616
11	Fees for services (non-employees)				
а	Management	762,769	115,450	647,319	
b	Legal	194,485		194,485	
С	Accounting	158,360		158,360	
d	Lobbying	1,244		1,244	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	151,588		151,588	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,818,766	1,907,304	2,827,684	83,778
12	Advertising and promotion	1,994,570	1,717,343	276,850	377
13	Office expenses	1,439,871	955,321	451,573	32,977
14	Information technology	1,302,921	390,446	904,086	8,389
15	Royalties	5,003	5,003		
16	Occupancy	3,042,250	378,981	2,663,098	171
17	Travel	2,716,640	1,878,837	795,259	42,544
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			·
19	Conferences, conventions, and meetings	0			
20	Interest	2,214,184	667,448	1,546,736	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,995,854	2,981,768	871,376	142,710
23	Insurance	544,560	135,491	409,069	
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	DEBT SERVICE FEES	579,084		579,084	
ь	EQUIPMENT RENTAL/MAINTENANCE	791,859	197,844	593,530	485
c	LIBRARY BOOKS & PERIODICALS	449,763	399,001	50,762	
d	COMMISSIONS & BANK CHARGES	75,514		75,514	
e	All other expenses	1,609,062	333,758		28,150
25	Total functional expenses. Add lines 1 through 24 e	118,442,403	91,989,900		1,963,443
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	,,	,,	,,	, ,,,,,,

Part X Balance Sheet

rei	τχ	Check if Schedule O contains a response or note to any line in	this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			826,801	1	1,886,571
	2	Savings and temporary cash investments			12,693,442	2	4,113,477
	3	Pledges and grants receivable, net			843,031	3	744,635
	4	Accounts receivable, net			2,064,475	4	1,234,951
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	art II	of	0	5	0
ŧ	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	conti emplo	ibuting employers			0
Assets	7	Notes and loans receivable, net			1,706,677	7	1,579,069
Ą	8	Inventories for sale or use			140,652	8	151,888
	9	Prepaid expenses and deferred charges			1,632,145		2,052,079
	10a	Land, buildings, and equipment cost or other basis			, ,	9	2,002,019
	ь	Complete Part VI of Schedule D Less accumulated depreciation	10a 10b	142,128,211 77,813,550		100	64,314,661
	11	Investments—publicly traded securities			00,001,000	11	04,314,001
	12				89,980,170	12	95,880,258
		Investments—other securities See Part IV, line 11			09,980,170		95,860,258
	13	Investments—program-related See Part IV, line 11			0		
	14	Intangible assets			8,929,326		
	15	Other assets See Part IV, line 11			· · · ·		6,088,836
	16	Total assets. Add lines 1 through 15 (must equal line 34)			184,907,755	16	178,046,425
	17	Accounts payable and accrued expenses			6,974,631	17	7,431,288
	18	Grants payable			0	18	0
	19	Deferred revenue			1,010,920		694,976
	20	Tax-exempt bond liabilities			56,900,000	20	56,900,000
S	21	Escrow or custodial account liability Complete Part IV of Sch			0	21	0
Liabiliti	22	Loans and other payables to current and former officers, direc key employees, highest compensated employees, and disqual		rustees,			
<u> </u>		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parti-	es .		7,000,000	23	7,000,000
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0		
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X	of Schedule			
		D			14,518,968	25	19,860,690
	26	Total liabilities. Add lines 17 through 25			86,404,519	26	91,886,954
s e e		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.	▼ ar	ıd complete			
an	27	Unrestricted net assets			50,544,236	27	37,342,338
က က	28	Temporarily restricted net assets			21,162,789	28	21,390,587
Ξ	29	Permanently restricted net assets			26,796,211	29	27,426,546
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check	here 🕨	- ┌─and			
ŏ		complete lines 30 through 34.					
Ş	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ď	32	Retained earnings, endowment, accumulated income, or other				32	
Net N	33	Total net assets or fund balances			98,503,236	33	86,159,471
	34	Total liabilities and net assets/fund balances			184,907,755	34	178,046,425

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		115,2	212,340
2	Total expenses (must equal Part IX, column (A), line 25)	2		118,4	42,403
3	Revenue less expenses Subtract line 2 from line 1	3			230,063
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			503,236
5	Net unrealized gains (losses) on investments	5			364,246
6	Donated services and use of facilities	6			•
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-5,7	49,456
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		86,1	.59,471
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		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	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 sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne 2с	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version:

EIN: 36-2169145 Name: Elmhurst College

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne both a	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) (F) Reportable compensation from related organizations (W-2/1099-MISC) (F) (F) Estimated amound of other compensation from the organization are			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	Ke) emplojee	Highest compensated employee	Former	2/1033-11130/	2/1033-11130/	related organizations		
(1) The Honorable William J Bauer	0 3	х						0	0	0		
Trustee	0 0							,				
(1) Julius Wesley Becton III	0 8	х						0	0	0		
Trustee (2) David R Bertran	0 0											
Trustee	0 0	Х						0	0	0		
(3) Mıchael Bılder	0 1	, , ,										
Trustee	0 0	Х						0	0	0		
(4) William W Boyd	0 2	×						0	0	0		
Trustee	0 0											
(5) Alan J Brinkmeier	0 6	х						0	0	0		
Trustee (6) Kenne P Bristol	0 0											
Trustee	0 0	Х						0	0	0		
(7) Julie Curran	0 7	,,										
Trustee	0 0	Х						0	0	0		
(8) Sharon Reese Dalenberg	0 8	х						0	0	0		
Trustee	0 0											
(9) Dr Cathy C Doucette	0 6	х						0	0	0		
Trustee (10) Joel G Herter	0 0											
Trustee	0 0	Х						0	0	0		
(11) Thomas A Kloet	0 6	, , , , , , , , , , , , , , , , , , ,										
Trustee	0 0	Х						0	0	0		
(12) Alfred N Koplın	0 1	l x						0	0	0		
Trustee	0 0											
(13) Dr George H Langeler	0 4	х						0	0	0		
Trustee (14) J Clifford Lenahan Jr	0 0											
Trustee	0 0	Х						0	0	0		
(15) Susan Bowers	0 7	х						0	0	0		
Trustee	0 0	^						Ů	0	,		
(16) Barbara J Lucks	1 5	X		х				0	0	0		
Chair (17) Ronald L Luken	0 0											
Trustee	0 0	х						0	0	0		
(18) William A Castellano	0 1											
Trustee	0 0	X						0	0	0		
(19) Hugh H McLean	0 9	×						0	0	0		
Trustee	0 0							Ů	Ŭ.			
(20) Lamell J McMorris	0 4	x						0	0	0		
Trustee (21) Edward J Momkus	0 0											
Vice Chair	0 0	х		х				0	0	0		
(22) Bill Nelson	0 3							_	_			
Trustee	0 0	Х					L	0	0	0		
(23) Dennis J Patterson	0 3	х						0	0	0		
Trustee	0 0	ļ										
(24) Virginia Prochaska	0 7	х						0	0	0		
Trustee	0 0	l .		<u> </u>		1				<u> </u>		

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 Position (do not check Average 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 organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensated employee Former Individual trustae or director organizations Institutional Trustee related below emplo)ee organizations dotted line) (26) Jean E Sander 0.4 Χ 0 0 0 0 (1) Rudolf G Schade Jr 0 7 Χ 0 0 0 0 0 (2) Dr Homer H Schmitz 0 0 0 0 0 Χ Trustee 0 0 (3) Eva W Tameling 0 2 0 0 0 Χ Trustee 0 0 (4) Rhonda Thomas 0 1 Х 0 0 0 Trustee 0.0 (5) Rev Robert O Ullman 0.6 0 Χ 0 0 Trustee 0 0 0 9 (6) Russell G Weigand Χ 0 0 0 0 0 Trustee (7) James S Yerbic 06 Χ 0 0 0 0.0 Trustee (8) Robert CKnuepfer Jr 0 4 0 0 Χ 0 0 Trustee 0 1 (9) Judith A Paice Χ 0 0 0 Trustee (10) Kevin L York 0 1 Χ 0 0 0 (11) JoAnn M McGuinness 1 1 Χ 0 0 0 (12) Stephen Alan Ray 50 0 Χ Χ 312,648 0 118,976 0 0 (13) Denise P Jones 50 0 Χ 29,500 0 0 Interim VP of Finance 50 0 (14) James Cunningham Х 144,764 0 26,996 VP for Finance & Admin 0 0 (15) Joseph R Emmick 50 0 151,395 Х 0 29,871 VP for Development/Alumni 0.0 50 0 (16) Alzada J Tıpton Х 178,614 0 32,810 Senior VP of Academic Affairs 0 0 (17) Gary F Rold 50 0 Х 156,288 0 30,402 Dean of Admissions 0 0 (18) James W Winters 50 0 Χ 142,984 0 26,160 VP of Communications/Pub Rel 0 0 (19) James Kulich 50 0 Х 146,202 0 19,233 VP & Chief Information Officer 0 0 (20) Julie Hoff 50 0 Х 137,283 0 16,795 Director of Nursing (21) Lawrence B Carroll 50 0 Χ 130,159 0 31,252 Exec Director of CPE 0 0 (22) Margaret Howes 50 0

Χ

0 0

Exec Director Development

129,733

0

26,822

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493095008426

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

2011

Open to Public Inspection

Name of the organization Elmhurst College						ation number		
Liiiiia	150 0011	icg c					36-2169145	
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this p	oart.) See instruction	ons.
The	rganı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	b)(1)(A)(i).	
2	<u>~</u>	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1)	(A)(iii).	
4	Γ	A medical research or hospital's name, city,		erated in conjunction v	vith a hospital d	lescribed in se	ction 170(b)(1)(A)(iii). Enter the
5	Γ	An organization opera		nefit of a college or uni	versity owned o	r operated by	a governmental unit d	escribed in
		section 170(b)(1)(A)	(iv). (Complete	e Part II)				
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in se	ection 170(b)(1	L)(A)(v).	
7	Γ	An organization that n described in section 1	•	· · · · · · · · · · · · · · · · · · ·		om a governme	ental unit or from the g	general public
8	Γ	A community trust de		· · · · · · · · · · · · · · · · · · ·	•	tII)		
9	Γ	An organization that n	ormally receiv	es (1) more than 331	1/3% of its supp	ort from contri	butions, membership	fees, and gross
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses
		acquired by the organ	ızatıon after Ju	ine 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	Γ	An organization organ	ized and opera	ited exclusively for the	e benefit of, to p	erform the fun	ctions of, or to carry o	ut the purposes of
		one or more publicly s						
а	_	the box in lines 11a th Type I. A supporting of	-			_		· -
a	'	supported organization organization You mus	n(s) the power	to regularly appoint o	r elect a majori			
b	Г	Type II. A supporting				with its suppo	rted organization(s). I	ov having control or
	·	management of the su						
	_	must complete Part I	•					
C	ļ	Type III functionally is supported organization	_		•			grated with, its
d	Г	Type III non-function						ianization(s) that is
	·	not functionally integr						
	_	(see instructions) Yo						
е	ı	Check this box if the contegrated, or Type II.					s a Type I, Type II, T	ype III functionally
f		Enter the number of si						
g		Provide the following i						
-		•			, ,			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
organization				organization	listed in your	-	monetary support	other support (see
				(described on lines 1-9 above or IRC	docume	int?	(see instructions)	ınstructions)
				section (see				
				instructions))				
					Yes	No		

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? If "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 evergice a substantial degree of direction over the policies, programs and activities of each			l

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: 93493095008426

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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.

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 **Employer identification number** Name of the organization Elmhurst College Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV

Par	t I-C Complete if the organization is exempt under section 501(c), except section	on 50)1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	F	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	F	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	١	\$		
4	Did the filing organization file Form 1120-POL for this year?			┌ Yes	┌ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

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	o)				
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

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has	NOT			P	age 3
	filed Form 5768 (election under section 501(h)).	(i	a)		(b)	
For ea activi	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	/	Mour	nt .
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	I	No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		1		
С	Media advertisements?		Νo	1		
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			4	0,487
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	O ther activities?		Νo			
j	Total Add lines 1c through 1:				4	0,487
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			<u> </u>
ь	If "Yes," enter the amount of any tax incurred under section 4912		l	l		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5). (or se	ectio	
	501(c)(6).					
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
_	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro see instructions), and Part II-B, line 1 Also, complete this part for any additional information	up list),	Part II	-A,I	ines 1	and
	Return Reference Explanation					
Paid	Staff or Management Schedule C, Part II-B, Line 1b Staff have made periodic visits to Spring state leaders	field, Il	linois to	lobl	y our	
Direc	ct Contact Schedule C, Part II-B, Line 1g Elmhurst College contacts legistators, n well as various departments and agencies Lobby efforts support higher issues Elmhurst contacted officials with regard to the following issues funding -Other State grant funding	educat	ıon poli	cy ar	d fund	ling

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493095008426

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Inspection

	me of the organization		Employer identification number
⊨lm	hurst College		36-2169145
Pa	rt I Organizations Maintaining Donor Adv		
	organization answered "Yes" to Form 990,	, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year	(a) Donor advised funds	(b) Fullds and other accounts
<u>!</u>	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
; -	Aggregate value at end of year		
	,		
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	ganızatıon's exclusıve legal control?	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?		
a	rt III Conservation Easements. Complete if	the organization answered "Yes" to	o Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation) Protection of natural habitat Preservation of open space	or education)	historically important land area certified historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in t	he form of a conservation
	easement on the last day of the tax year	[Held at the End of the Year
а	Total number of conservation easements		2a
- b	Total acreage restricted by conservation easements		2b
:	Number of conservation easements on a certified histo	ric structure included in (a)	2c
ı	Number of conservation easements included in (c) acq historic structure listed in the National Register	` '	2d
	Number of conservation easements modified, transferr	- ed, released, extinguished, or terminate	ed by the organization during
	the tax year 🛌	, , , ,	
	N		
	Number of states where property subject to conservati		
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspect	cting, and enforcing conservation easen	nents during the year
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easements	s during the year
	▶ \$,	,
	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(II)?	l) above satisfy the requirements of sec	tion 170(h)(4)(B)(i)
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial	
a r	t III Organizations Maintaining Collections Complete if the organization answered "You		or Other Similar Assets.
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue s ts held for public exhibition, education, i	statement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		- \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS		
3	Revenue included in Form 990, Part VIII, line 1		▶ \$
Ь	Assets included in Form 990. Part X		▶ - \$

Part	Organizations Maintaining Co	<u>llections of Art, H</u>	<u>listor</u>	<u>ical Tre</u>	asures, or O	<u>ther</u>	<u> Similar As</u>	sets (d	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records,	check	any of th	e following that a	re a	sıgnıfıcant use	of its	
а	Public exhibition	C	4 F	Loan or	exchange progr	ams			
b	Scholarly research	•	_₽ ┌	Other					
c	▼ Preservation for future generations								
4	Provide a description of the organization's co Part XIII	ollections and explain l	how the	y further	the organization	's exe	empt purpose i	n	
5	During the year, did the organization solicit	or receive donations of	art, hi	storical ti	reasures or other	sımı			
	assets to be sold to raise funds rather than t							Yes	✓ No
Par	Part IV, line 9, or reported an an					1 "Ye	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ıan or other ıntermedia	ary for	contributi	ons or other ass	ets n		☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing	table	_				
					_		An	nount	
C	Beginning balance				<u> </u>	1c			
d	Additions during the year				_	1d			
e	Distributions during the year				—	1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1, for e	scrow or	custodial accour	nt IIal	oility?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the ex	planat	ion has b	een provided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete	f the organization a	nswer						
		· · · · · · · · · · · · · · · · · · ·	(b)Pnor		(c)Two years back			(e)Four	ears back
1a	Beginning of year balance	101,733,079	94	,009,780	89,570,085	_	96,127,285		81,374,087
b	Contributions	288,061		405,336	1,205,046		249,834		1,842,319
С	Net investment earnings, gains, and losses	2,675,525	14	,396,484	7,921,832		-2,844,893		15,531,159
d	Grants or scholarships	1,255,561	1	.,189,518	1,259,085		1,007,376		828,528
e	Other expenditures for facilities and programs	7,068,051	Ę	5,889,003	3,428,098		2,954,765		1,791,752
f	Administrative expenses								
g	End of year balance	96,373,053		.,733,079	94,009,780		89,570,085		96,127,285
2	Provide the estimated percentage of the cur		(line 1g	j, column	(a)) held as				
а	Board designated or quasi-endowment 🕨	56 053 %							
b	Permanent endowment ► 28 108 %								
c	Temporarily restricted endowment ► 15 a The percentages in lines 2a, 2b, and 2c sho	340 % uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organization	on that	are held	and administered	fort	he		
	organization by							Yes	+
	(i) unrelated organizations					•	3a(No
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization						3a(1 110
4	Describe in Part XIII the intended uses of the	· ·				•	3.	<u> </u>	
Par	t VI Land, Buildings, and Equipme				answered 'Yes	' to F	orm 990, Pa	rt IV, I	ine
	11a. See Form 990, Part X, line								
	Description of property) Cost or ot is (investm			(c) Accumulated depreciation	(d) B	ook value
1a	Land				3,036	,281			3,036,281
b	Buildings				100,569	,854	49,815,12	6	50,754,728
C	Leasehold improvements								
d	Equipment				21,342	,264	18,918,34	3	2,423,921
	Other				17,179	,812	9,080,08	1	8,099,731
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X, c	olumn	(B), line 1	0(c).)		🕨		64,314,661
							Schedule D	(Form	990) 2014

Part VII Investments—Other Securities. Comp	olete if the organization a	answered 'Yes' to Form	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(Including name of security) (1)Financial derivatives		Cost or end-of-year r	market value
(2)Closely-held equity interests			
(3)O ther			
(A) COMMINGLED FUNDS	63,099,098	F	
(B) HEDGE FUNDS	5,458,549	F	
(C) COMMODITITES FUND	1,140,856	F	
(D) LIMITED PARTNERSHIPS	26,181,755	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	95,880,258		
Part VIII Investments—Program Related. Con			rm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	luation
		Cost or end-of-year r	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization a (a) Descript		, Part IV , line 11d See F	orm 990, Part X, line 15 (b) Book value
(a) Descript			(b) Book value
Table (Calumny (b) annual annual forms 000 Part V and (R) line 15	.		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.			ne 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
STUDENT LOAN ADVANCES FROM US GOVT	1,783,627		
OTHER LIABILITIES	181,606		
INTEREST RATE SWAP AGREEMENT	12,117,197		
ASSET RETIREMENT OBLIGATION	1,287,425		
CAPITAL LEASE OBLIGATION	121,789		
RESTRUCTURING LIABILITY	3,045,643		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	19,860,690		

Supplemental Description - Other

Supplemental Description - Other

Supplemental Description - Other

Part	tXI Reconciliation of Revenue per Audited Fina the organization answered 'Yes' to Form 990, Pai			nts With Revenue p	er R	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial s				1	63,061,385
2	A mounts included on line 1 but not on Form 990, Part VIII, lii					· · · · ·
a	Net unrealized gains (losses) on investments		2a	-3,364,246		
b	Donated services and use of facilities		2b	, ,		
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII)		2d	-2,703,813		
e	Add lines 2a through 2d		. .		2e	-6,068,059
3	Subtract line 2e from line 1				3	69,129,444
4	Amounts included on Form 990, Part VIII, line 12, but not on					· · ·
a	Investment expenses not included on Form 990, Part VIII, lin		4a	151,587		
b	Other (Describe in Part XIII)		4b	45,931,309		
С	Add lines 4a and 4b		٠		4c	46,082,896
5	Total revenue Add lines 3 and 4c. (This must equal Form 990				5	115,212,340
	Reconciliation of Expenses per Audited Fin if the organization answered 'Yes' to Form 990, F	ancial Sta	tem	ents With Expenses	per	
1	Total expenses and losses per audited financial statements				1	75,405,150
2	Amounts included on line 1 but not on Form 990, Part IX, line	25				
a	Donated services and use of facilities		2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII)		2d	3,045,643		
e	Add lines 2a through 2d				2e	3,045,643
3	Subtract line 2e from line 1				3	72,359,507
4	Amounts included on Form 990, Part IX, line 25, but not on lir	ne 1:				
а	Investment expenses not included on Form 990, Part VIII, lir	ne 7b	4a	151,587		
b	Other (Describe in Part XIII)		4b	45,931,309		
c	Add lines 4a and 4b				4c	46,082,896
5	Total expenses Add lines 3 and 4c. (This must equal Form 99	0, Part I, lın	e 18)		5	118,442,403
Part	XIII Supplemental Information					
Part V	ide the descriptions required for Part II, lines 3, 5, and 9, Part I V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, mation	III, lines 1a lines 2d and	and 4 4b A	, Part IV , lines 1b and 2t Iso complete this part to	provid	de any additional
	Return Reference Ex	planation				
Financi	Schedule D, Part III, Line 1a F expenses The College does not a value to such items received	ot capıtalıze				
	option of Organization's Schedule D, Part III, Line 4 Th					· · · · · · · · · · · · · · · · · · ·
Collect	ctions collections of paintings, drawir students, faculty and staff and pleasures of viewing					
Intende	Schedule D, Part V, Line 4 The over the long term Accordingl preserve and increase long-ter source of financial support for trustees c) provide ongoing fin lectureship, book funds and otinvestment policies and donor	y, the prima rm real purc the college's ancial suppo her specified	ry inve hasing s annu ort in t d purpo	stment objectives of the power of the funds' princ al operating budget per p he form of scholarships,	endov ipal b olicy : award:	wment are to a)) provide a stable set by the board of s, faculty chairs,
Liability (ASC 7	ty for Uncertain Tax Position Schedule D, Part X, Line 2 The	College has t is exempt nue Code of e Financial positions to t to be susta termined the tements Th ificant unrel	s receifrom for 1986 Accou be reconned in the reconned in the reconned in the reconned in the reconned in the	deral income taxes unde (IRC), except for income nting Standards Board is ognized in the financial s the position were to be no material uncertain po ege has not accrued any usiness income There is ements of position The	er the pertaxes sued of the tatem challer provises no intervises no inte	provisions of Section is pertaining to guidance that requires ents only if the inged by a taxing is that require taxes terest or penalties ars ending 2012,

Schedule D, Part XI, Line 2d change in value of interest-rate swap

\$45,931,309

Schedule D, Part XII, Line 2D Future restructuring expenses

Schedule D, Part XI, Line 4b Scholarships and Grants

\$(228,281) Total

\$34,041 Reclasses and rounding

\$(108,064) Payments to non-us campuses

beneficial interest in trusts

payments

expenses

Total

\$(2,475,532) Change in

\$(8,834) Fundraising

\$122,463

\$3,045,643

\$45,891,703 Annuity

\$(2,703,813)

Part XIII Supplemental Inf	formation (continued)
Return Reference	Explanation
Supplemental Description - Other	Schedule D, Part XII, Line 4b Scholarships and Grants \$45,891,703 Annuity payments \$34,041 Reclasses and rounding \$(8,834) Fundraising expenses \$(108,064) Payments to non-us campuses \$122,463 Total \$45,931,309

Schedule D (Form 990) 2014

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DLN: 93493095008426

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

	e of the organization	Employer identificat	nber		
		36-2169145			
Pa	rt I			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in i other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student addrograms, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes	
			-		
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a_	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	ıblıc dealıng	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	<u> </u>
	Does the organization discriminate by race in any way with respect to students' rights or privileges?		5a		No
	Admissions policies?		5b		No
	Employment of faculty or administrative staff?		5c		No
	Scholarships or other financial assistance? Educational policies?		5d 5e		No
	Use of facilities?		5f		No No
g	Athletic programs?		5g		No
h	Other extracurricular activities?		5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II		-		
	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	Yes	No
	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 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa		7	Yes	INO

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
Publication of Racially Nondiscriminatory Policy	Schedule E, Part I, Line 3 Elmhurst College policy is that of non-discrimination of the public served by the institution and with respect to the college personnel Advertisements, publications, brochures, applications for admission, etc, contain a statement to the effect that the college complies with the federal non-discrimination regulations, and thereby does not discriminate on the basis of race, gender, religion, color, national origin, age, sexual orientation, or handicap disability
Government Assistance	Schedule E, Part I, Line 6a The College receives governmental financial aid, grants and assistance from the us department of education, the national institutes of health, the national science foundation, the Illinois board of higher education, and the city of Emhurst

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

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DLN: 93493095008426

SCHEDULE F (Form 990)

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public **Inspection**

Name of the organization Elmhurst College						Employer identification number				
	iarst conege				3 (6-2169145				
Pa	General Information "Yes" to Form 990, Par			ne United States. Co	omplete if	the organiza	ation answer	ed		
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?									
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and othe assistance outside the United States.							s and other			
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace is need	ed)				
	(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)	a program s specif	y listed in (d) is service, describe ic type of s) in region	(f) Total expe for and inves in regio	tments		
(1	 Europe (Including Iceland and Greenland) 			Grantmaking	Study Abro	oad		122,46		
(2)									
(3)									
(4)									
(5)									
	Sub-total Total from continuation sheets to Part I							122,46		
	Totals (add lines 3a and 3b)							122,46		
For E	Sanarwark Reduction Act Natice see	the Instructions	for Form 990	Cat	No 500821	\// Schodu	le F /Form 990	2014		

2

Part :				nizations or Entitions or entitions or entitions.					' to Form 990,
•) Name of ganization	(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)			Europe (Including Iceland and Greenland)	Study Abroad	10,738	Wire Trans			
(2)			Europe (Including Iceland and Greenland)	Study Abroad	111,725	Wire Trans			
(3)									
(4)									
				sted above that are ree or counsel has pro					
3 E	nter total nur	mber of other	organızatıons or er	ntities					2

Schedule F (Form 990) 2014

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	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	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)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	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)	Г	Yes	<u>\</u>	Νo
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	▼	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>	Νo

Schedule F (Form 990) 2014

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Procedures for Monitoring the Use of Grant Funds Outside the US	Schedule F, Part I, Line 2 Study abroad department manages program, including selecting cr edentialed universities, and contractual terms of performance, and obtaining students comp letion documentation. There are few number of instances in which our college sends student soverseas for a semester and incurs an expense from the receiving university. The majorit y of study abroad instances are within contractual exchange arrangements within a network of international universities and dictated by contractual terms in which no money is exchanged, and our students study abroad and an equivalent number of students enrolled at network or its universities study at our campus for 1 or 2 semesters.

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DLN: 93493095008426

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

lm	hurst College					36-21691	45		
Pa	rt I Fundraising Acti filers are not requi			ganızatıo	n answered "Yes" to	Form 990, Part I	V, line 17. Form 990-EZ		
a b c d	Indicate whether the organ Mail solicitations Internet and email sol Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten higher to be compensated at leas	icitations s a written or oral agre Form 990, Part VII) st paid individuals or	ement wit) or entity	e f g h any indi in connec	Solicitation of non Solicitation of gov Special fundraisin vidual (including officer	-government grants ernment grants g events -s, directors, trustee undraising services	s Y Yes No		
ļ	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of		fundraiser have custody or		(iv) Gross receipts from activity	(v) A mount paid t (or retained by) fundraiser listed i col (i)	(or retained by)
1			Yes	No					
2									
3									
4									
5									
6									
7									
8									
9									
10									
ota	al		<u> </u>	▶					
3	List all states in which the registration or licensing	organization is regis	tered or lı	censed to	Solicit contributions o	L r has been notified it	I : is exempt from		

			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events
					_	(add col (a) through
			Scholarship Dnr (event type)	Football Golf (event type)	(total number)	col (c))
Ψ	1	Gross receipts	212,227			288,460
Reveilue	2	Less Contributions	184,327	12,590	19,390	216,307
<u>ж</u>	3	Gross income (line 1	104,327	12,330	19,330	210,307
		minus line 2)	27,900	15,765	28,488	72,153
	4	Cash prizes				
မွာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages .	6,849	8,410	8,579	23,838
Direct	8	Entertainment				
à	9	Other direct expenses .	60,040	1,335	22,851	84,226
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(108,064)
	11	Net income summary Subtract li	ne 10 from line 3, column	(d)	🕨	-35,911
Par	t II	I Gaming. Complete if the oi	rganization answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	
		\$15,000 on Form 990-EZ, lii		,		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
ρ U	4	Rent/facility costs				
ā	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	│ Yes% │ No	
	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, co	lumn (d)		
9		er the state(s) in which the organize				
а	Ist	the organization licensed to conduc	t gamıng actıvıtıes ın eac	h of these states?		. Fyes Fno
b	If"	No," explain				
10a		re any of the organization's gaming	licenses revoked, susper	ded or terminated during	the tax year?	
Ь	If"	Yes," explain				

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

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	J ²		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 re amount of gaming revenue retained by	•	the organization > \$ and the							
С	If "Yes," enter name and address of the third party									
	Name 🟲									
	Address 🏲									
16	Gaming manager information									
	Name 🟲									
	Gaming manager compensation 🕨 \$		······							
	Description of services provided									
	Director/officer	_ Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to							
	retain the state gaming license?	retain the state gaming license?								
b	Enter the amount of distributions requi	red 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: 93493095008426 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 Elmhurst College 36-2169145 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 grant cash orassistance 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.

escription of non-cash assistance
_ _ _ _

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						
, ,	PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE US The College offers a wide variety of merit and need-based scholarships and awards to matriculating students Merit awards are given in recognition of various achievements as specified in donors' correspondence and documents, or by College policy Need-based awards are provided based on the income level, availability of awards offered elsewhere and similar standards. The College's Financial Aid Office uses various methods for the fair disbursement of grant funds within the requirements set by each grant source to monitor compliance. The College primarily makes scholarship grants that help offset tuition and other educational costs of the students, with most directly credited against the applicable student account, which assures proper use. The amount of the grant is adjusted by the Financial Aid Office, as necessary, based on any subsequent changes affecting the student's original eligibility.						

Schedule I (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493095008426

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► 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 Elmhurst College

Employer identification number

36-2169145

Pai	rt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	<u> </u>	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)			
b	If any of the boxes in line 1a are checked, did the organiz reimbursement or provision of all of the expenses describ			1b	Yes	
2	Did the organization require substantiation prior to reimb			2	Yes	
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the filing organizationganization's CEO/Executive Director Check all that agused by a related organization to establish compensation	pply	Do not check any boxes for methods			
	Compensation committee		Written employment contract			
		<u> </u>	Compensation survey or study			
	Form 990 of other organizations	▽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control paym	nen	t?	4a		No
b	Participate in, or receive payment from, a supplemental r	none	qualified retirement plan?	4b		Νo
С	c Participate in, or receive payment from, an equity-based compensation arrangement?					Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	e th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	mu	ıst complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	, dıd the organızatıon pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," descr			7		No
8	Were any amounts reported in Form 990, Part VII, paid of	or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in Reg					
	ın Part III					Νo
9	If "Yes" to line 8, did the organization also follow the rebisection 53 $4958-6(c)$?	utta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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 other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

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
Housing allowance or residence for personal use	Schedule J, Part I, Line 1a The president is being provided a house as both a convenience to the College as well as personal use at 260 Cottage Hill Avenue in Elmhurst. This allows the individual to conduct business affairs and be available to respond to emergent situations that may arise. As a condition of employment, the president of Elmhurst College is required to reside at the residence that also serves as a venue to carry out regular college business including entertainment of trustees, employees, students, donors, and guests of the College. IRS Form 990 instructions require that the fair market value of housing provided to employees be reported on Form 990, Part VII, Section A and Schedule J, Part II. For tax year 2015, the value of the residence is conservatively estimated to be \$61,630. The College has determined that the value of the housing is not considered taxable income to the President as provided for in Internal Revenue Code Section 119. During tax year 2015, the President, Stephen Alan Ray made the residence his home for the year. Schedule J, Part II, Column (D) includes \$61,630 of value associated with the use of the residence provided by the College.
Travel for companions	Schedule J, Part I, Line 1a Travel expense reimbursement for companions is only allowed for the President as per his contract. According to his contract, when Dr Ray's spouse is required to attend an event in which Dr Ray is representing the College on official College business, the business related travel expenses for Dr Ray's spouse will also be reimbursed by the College. The spouse's travel is not considered taxable when the purpose is to conduct business on behalf of the college. This contract is reviewed by the Human Resources Committee and approved by the full Board of Trustees.
Personal Services (E G , Mail, Chauffer, Chef)	Schedule J, Part I, Line 1a An outside service is used as needed to maintain or to provide any other cleaning services necessary for the business function of the President's house

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 36-2169145

Name: Elmhurst College

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

(A) Name and Title		(B) Breakdown of	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 & incentive compensation	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
James Cunningham, VP for Finance & Admin	(i) (ii)	144,281 0	0	483	3,750 0	23,246 0	171,760 0	0
Joseph R Emmick, VP for Development/Alumni	(I) (II)		0	337	7,875 0	21,996 0	181,266 0	0
Alzada J Tipton, Senior VP of Academic Affairs	(I) (II)		0	409	11,064 0	21,746 0	211,424 0	0
Gary F Rold, Dean of Admissions	(I) (II)		0	1,380	21,972 0	8,430 0	186,690 0	0
James W Winters, VP of Communications/Pub Rel	(I) (II)	142,112 0	0	872	11,794 0	14,366 0	169,144 0	0
James Kulich, VP & Chief Information Officer	(I) (II)		0	805	19,180 0	53 0	165,435 0	0
Julie Hoff, Director of Nursing	(I) (II)		0	342	0	16,795 0	154,078 0	0
Lawrence B Carroll, Exec Director of CPE	(I) (II)		0	1,197 0	14,461 0	16,791 0	161,411 0	0
Margaret Howes, Exec Director Development	(I) (II)		0	411	6,962 0	19,860 0	156,555 0	0
Stephen Alan Ray, President	(I) (II)		0	1,290	33,100 0	85,876 0	431,624 0	0

DLN: 93493095008426

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

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

Open to Public Inspection

Internal Revenue Service

Department of the Treasury

	ame of the organization								Employer identification number									
E I M	hurst College										36-2169	145			!			
Pa	art I Bond Issues																	
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	price	(1	(f) Description	n of purpose	(g)	Defeased	sed (h) O n behalf of		(i) Pool financing				
	ı	'	1			,							suer		icing			
						!	<u> </u>			Ye	s No	Yes	No	Yes	No			
A _	Illinois Finance Authority	86-1091967	452001ZF0	05-31-2005	36,500			ED FACILITIE /25/98	ES AUTHOR		Х		Х	Х				
В	Illinois Finance Authority	86-1091967	452001Q86	05-31-2005	21,200			ED FACILITIE /28/99	ES AUTHOR		Х		Х	Х				
С	Illinois Educational Facilities Authority	52-1297563	4520017G9	09-18-2003	12,000	0,000	BUII	ILDINGS			Х		X		X			
D	Illinois Finance Authority	86-1091967	45200BW79	02-22-2007	25,000	0,000	BUI	ILDINGS & PA	ARKING		Х		Х		Х			
Pa	rt III Proceeds																	
					Α			В			С			D				
1	A mount of bonds retired				<u> </u>		0	0 0			0 0			0				0
	A mount of bonds legally defea	sed		0 0						0	0 0							
3	Total proceeds of issue				3	36,500,			12,096,432		26,053,56		053,568					
4	Gross proceeds in reserve fun				<u> </u>		0	<u>/</u>	0	0		0			0			
5	Capitalized interest from proce				<u> </u>		0	1	0	0			<u>' </u>					
6	Proceeds in refunding escrows				3	36,500,					43,690			,964,791				
7	Issuance costs from proceeds				<u> </u>		0 0		· ·		52,196			273,890				
8	Credit enhancement from proc				<u> </u>		0 0		52,6		52,641	41 22		22,000				
9	Working capital expenditures f	<u> </u>			<u> </u>		0	0 0				0	0		0			
10	Capital expenditures from prod	ceeds			<u> </u>		0	0 0				0	0		0			
11	O ther spent proceeds				<u> </u>		0)	0	10,94		47,905		23,	,792,887			
12	O ther unspent proceeds				<u> </u>		0)	0	0		0		0	0		0	
13	Year of substantial completion	<u>.ı</u>			200)1]	200)2		2006			2010				
l —					Yes	No	·	Yes	No	Yes	$-\!$	No	Yes	$-\!$	No			
14	Were the bonds issued as part	t of a current refund	ing issue?		Х			Х		Х	$\bot\!\!\!\!\bot$		Х					
15	Were the bonds issued as part	t of an advance refu	nding issue?		<u> </u>	Х			Х			Χ			Х			
16	Has the final allocation of proc	ceeds been made?			Х			Х		Х			Х					
17	Does the organization maintai allocation of proceeds?	n adequate books a	nd records to supp	ort the final	x			х		X			Х					
Pa	rt IIII Private Business U	Jse																
l					A			В			<u> </u>	_		D				
i					Yes	No	<u>, </u>	Yes	No	Yes		No	Yes	$-\!\!\!\!+\!\!\!\!\!-$	No			

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

Schedule K (Form 990) 2014 Part III Private Business Use (Continued)

		,	<u>\</u>	В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?					х		х	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?					×		х	
С	Are there any research agreements that may result in private business use of bond-financed property?						Х		Х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %	0 %) %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								1 800 %
7	Does the bond issue meet the private security or payment test?	·		 			T	T	
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?						х		х
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?						×		×
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	Х		х		х		×	

Part IV Arbitrage

Term of hedge

Was the hedge superintegrated?

Was the hedge terminated?

C

d

			Α		В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		×		Х		X		Х
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?								
b	Exception to rebate?								
С	No rebate due?	х		Х		X		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		X		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	JPMorgan Cha	ase	JPMorgan Ch	ase	JPMorgan Ch	ase		

18 25

Χ

Χ

18 25

Χ

Χ

27 4

Χ

Χ

18 25

Χ

Χ

Return Reference

		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		Х
b	Name of provider	0		0		0		0	
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	х			x		X
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		В		С		<u>D</u>	
	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?	X		X		X		X	

Explanation

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

SCHEDULE K, PART I PART I Information for Part I comes from the tax agreement and Form 8038 for each issue The issuer EIN on the Forms 8038 of each of the 2005 transactions is the EIN for the Illinois Educational Facilities Authority (the issuer of the original 1998 and 1999 Bonds which were treated for Federal tax purposes as being currently refunded by the 2005 bonds) Although the 2005 Bonds still bear the name of the Illinois Educational Facilities Authority, the EIN of the Illinois Finance Authority should be used for Schedule K and is listed on Schedule K. The college amended and filed Forms 8038 to include the Illinois Finance Authority EIN for each of the 2005 Bonds to be consistent with Schedule K. The description of purpose for each issue is listed in Section 2.1 of the tax agreement executed by the college in connection with each issue. Additional information for the 2005 issues comes from paragraph 1 on page 1 of the tax agreement for each of those 2005 issues (containing information on the reissuance of the 1999 Bonds and the 1998 Bonds, respectively), Section 2.1 of the tax agreements for the 1999 Bonds and the 1998 Bonds (the description of the projects financed by such bonds) and the fourth paragraph of the Certificate Regarding the Financed Properties and Expenditure of Funds, executed by the college in connection with the issuance of the 1999 Bonds (which contains the name and description of the 1991 Bonds refunded by the 1999 Bonds). The amount of each of the 2005 issues benefitting the college (as included in the description of purposes) comes from Schedule A to each of the Forms 8038 submitted in connection with the 2005 issues.

Return Reference	Explanation
DESCRIPTION OF TAX EXEMPT BOND PURPOSE	Schedule K, Part I, Col (F), Line A Description of tax purpose THE BONDS AND THE 1998 BONDS (DEFINED BELOW) WERE ISSUED IN THE AMOUNT OF \$36,500,000 TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS ELMHURST COLLEGE BENEFITTED FROM \$15,000,000 OF THE PROCEEDS OF THE BONDS THE ISSUER OF THE BONDS CHANGED THE MANDATORY TENDER PROVISIONS OF THE INDENTURE GOVERNING PREVIOUSLY ISSUED BONDS (THE "1998 BONDS") THEREBY RESULTING IN THE VARIABLE RATE DEMAND REVENUE BONDS, SERIES 1998 (ACI/CULTURAL POOLED FINANCING PROGRAM) ORIGINALLY ISSUED BY THE ILLINOIS EDUCATIONAL FACILITIES AUTHORITY ON MARCH 25, 1998 AS BEING ASSUMED TO BE REISSUED AND CURRENTLY REFUNDED FOR FEDERAL INCOME TAX PURPOSES ON MAY 31, 2005 THE PORTION OF THE PROCEEDS OF THE 1998 BONDS WHICH WERE BORROWED BY ELMHURST COLLEGE WERE USED TO FINANCE, REFINANCE AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES

Return Reference	Explanation
DESCRIPTION OF TAX EXEMPT BOND PURPOSE	Schedule K, Part I, Col (F), Line B Description of tax purpose THE BONDS AND THE 1999 BONDS (DEFINED BELOW) WERE ISSUED IN THE AMOUNT OF \$21,200,000 TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS ELMHURST COLLEGE BENEFITTED FROM \$5,000,000 OF THE PROCEEDS OF THE BONDS THE ISSUER OF THE BONDS CHANGED THE MANDATORY TENDER PROVISIONS OF THE INDENTURE GOVERNING PREVIOUSLY ISSUED BONDS (THE "1999 BONDS") THEREBY RESULTING IN THE VARIABLE RATE DEMAND REVENUE BONDS, SERIES 1999 (ACI/CULTURAL POOLED FINANCING PROGRAM) ORIGINALLY ISSUED BY THE ILLINOIS EDUCATIONAL FACILITIES AUTHORITY ON JULY 28, 1999 AS BEING ASSUMED TO BE REISSUED AND CURRENTLY REFUNDED FOR FEDERAL INCOME TAX PURPOSES ON MAY 31 2005 THE PORTION OF THE PROCEEDS OF THE 1999 BONDS WHICH WERE BORROWED BY ELMHURST COLLEGE WERE USED TO (I) FINANCE, REFINANCE, AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES, AND (II) REFUNDED THE OUTSTANDING ILLINOIS EDUCATIONAL FACILITIES AUTHORITY REVENUE BONDS, ELMHURST COLLEGE SERIES 1991 WHICH WERE ISSUED ON MAY 16, 1991 AND FINANCED THE COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING, IMPROVING AND REMODELING OF EDUCATIONAL FACILITIES

Return Reference	Explanation
DESCRIPTION OF TAX EXEMPT BOND PURPOSE	Schedule K, Part I, Col (F), Line C Description of tax purpose THE BONDS WERE ISSUED TO (I) FINANCE, REFINANCE, AND REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT OR EQUIPPING OF EDUCATIONAL FACILITIES, AND (II) REFINANCE TAXABLE DEBT THAT ORIGINALLY FINANCED A PORTION OF THE COSTS OF A SPRINKLER SYSTEM IN RESIDENCE HALLS ACCORDINGLY, A PORTION OF THIS ISSUE CURRENTLY REFUNDED TAXABLE DEBT OF ELMHURST COLLEGE FOR FEDERAL TAX PURPOSES

Return Reference	Explanation								
DESCRIPTION OF TAX EXEMPT BOND PURPOSE	Schedule K, Part I, Col (F), Line D DESCRIPTION OF TAX PURPOSE the bonds were issued to (I) Finance, refinance or reimburse the costs of acquistion, construction, renovation, improvement and equipping of educational facilities, and (II) refinance taxable debt that originally financed educational facilities. Accordingly, a portion of this issue currently refunded taxable debt of elmhurst college for federal tax purposes								

Return Reference	Explanation
SCHEDULE K, PART II	PART II INFORMATION FOR PART II, COLUMNS BAND C COMES FROM THE FORM 8038 FOR SUCH ISSUES INFORMATION FOR PART II, COLUMN D COMES FROM THE REBATE REPORT PREPARED BY CHAPMAN AND CUTLER LLP FOR THE 2003 BONDS

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	Total Proceeds of Issue For Columns C and D of Part II, Line 3 does not match Part I, column (e) Issue Price, as the amounts reported include investment earnings on the proceeds "

Return Reference	Explanation
SCHEDULE K, PART III	PART III The information in Part III comes from the College Potential private use is addressed 1 In Section 9 of the Certificate Regarding the Financed Properties and Expenditure of Funds for the 1998 Bonds (as reissued by the 2005 Bonds) (private use for these bonds is not addressed in the Schedule K because of the special rule regarding the refunding of pre-2003 issues), 2 In Section 9 of the Certificate Regarding the Financed Properties and Expenditure of Funds for the 1999 Bonds (as reissued by the 2005 Bonds) (private use for these bonds is not addressed in the Schedule K because of the special rule regarding the refunding of pre-2003 issues), 3 In Section 4 of the Project Certificate for the 2003 Bonds, and 4 In Section 4 of the Project Certificate for the 2007 Bonds

Return Reference	Explanation
(D) Line 6	PRIVATE BUSINESS USE ELMHURST COLLEGE IS CALCULATING PRIVATE BUSINESS USE ON AN ANNUAL AND CUMULATIVE BASIS TO ENSURE THAT PRIVATE BUSINESS USE OF FINANCED PROPERTY WILL NOT EXCEED PERMISSIBLE AMOUNTS OF PRIVATE BUSINESS USE

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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

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

Inspection

Name of the organization Elmhurst College

Employer identification number

36-2169145

A Art—Historical treasures		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermınıng	
2 Art—Historical triessures	1 Art—Works of art			inic 19			
3 Art-Fractional Interests 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 7 Boats and planes 8 Intellectual property 9 Securities—Publicly traded 1 X 10 207,074 market value 10 Securities—Closely held stock 11 Securities—Closely held stock 12 Securities—Publicly traded 13 Qualified conservation 14 Qualified conservation 15 Qualified conservation 16 Qualified conservation 17 Real estate—Residential 18 Real estate—Commercial 19 Fead inventory 10 Planes—History 11 Real estate—Other 11 Real estate—Other 12 Taxidemy 13 Calificitiles 14 Qualified supplies 15 Real estate—Commercial 16 Real estate—Commercial 17 Real estate—Other 18 Calificitiles 19 Fead inventory 10 Drugs and medical supplies 10 Calificitiles 10 Calificitiles 10 Calificitiles 10 Calificitiles 11 Taxidemy 12 Historical artifacts 13 Calificitiles 14 Calificitiles 15 Other ► (17 Calificitiles 15 Other ► (18 Calificitiles 16 Calificitiles 17 Calificitiles 17 Calificitiles 18 Calificitiles 19 Calificitiles 10 Calificitiles 10 Calificitiles 10 Calificitiles 10 Calificitiles 10 Calificitiles 10 Calificitiles 11 Calificitiles 12 Calificitiles 13 Calificitiles 14 Calificitiles 15 Calificitiles 16 Calificitiles 17 Calificitiles 17 Calificitiles 18 Calificitiles 19 Calificitiles 19 Calificitiles 10							
4. Books and publications 5. Clothing and household goods 6. Cars and other vehicles 7. Boats and planes 8. Intellectual property 8. Securities—Publicity traded 9. X 10 207,074 market value 9. Securities—Publicity traded 9. X 10 207,074 market value 9. Securities—Closely held stock 10. Securities—Closely held stock 11. Securities—Partnership, LLC, 12. Securities—Partnership, LLC, 13. Qualified conservation 14. Qualified conservation 15. Real estate—Miscellaneous 16. Real estate—Residential 17. Real estate—Commercial 18. Collectibles 19. Food inventory 19. Food inventory 10. Taxidermy 10. Securities—Securitie							
5 Clothing and household goods 6 Cars and other vehicles							
Goods Cars and other vehicles Seath and planes Set	•						
7 Boats and planes . 8 Intellectual property . 9 8 Intellectual property . 9 9 Secunites—Publicly traded . X 10 207,074 market value 10 Secunites—Closely held stock . 9 11 Secunites—Partnership, LLC, or trust interests . 9 12 Secunites—Partnership, LLC, or trust interests . 9 13 Qualified conservation contribution—Uniter . 9 14 Qualified conservation contribution—Other . 9 15 Real estate—Residential . 9 16 Real estate—Commercial . 9 17 Real estate—Other . 9 18 Collectibles . 9 19 Food inventory . 9 10 Progs and medical supplies . 9 11 Taxidermy . 9 12 Taxidermy . 9 12 Taxidermy . 9 12 Taxidermy . 9 13 Taxidermy . 9 14 Qualified conservation . 9 15 Real estate—Other . 9 15 Real estate—Commercial . 9 16 Food inventory . 9 17 Taxidermy . 9 18 Collectibles . 9 19 Food inventory . 9 10 Progs and medical supplies . 9 11 Taxidermy . 9 12 Taxidermy . 9 12 Taxidermy . 9 12 Taxidermy . 9 13 Taxidermy . 9 14 Qualified Conservation . 9 15 Real estate—Other . 9 15 Other + (
8 Intellectual property .	6 Cars and other vehicles						
9 Securities—Publicly traded . X 10 207,074 market value 10 Securities—Partnership, LLC, or trust interests	7 Boats and planes						
10 Securities—Closely held stock . 11 Securities—Partnership, LLC , or rust interests 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other	8 Intellectual property						
11 Securities—Partnership, LLC, or or trust interests	9 Securities—Publicly traded .	X	10	207,074	market value		
or trust interests	10 Securities—Closely held stock .						
13 Qualified conservation contribution—Historic structures	or trust interests						
contribution—Historic structures							
contribution—Other	contribution—Historic						
16 Real estate—Commercial	•						
17 Real estate—Other	15 Real estate—Residential .						
18 Collectibles	16 Real estate—Commercial						
19 Food inventory	17 Realestate—Other						
20 Drugs and medical supplies	18 Collectibles						
21 Taxidermy	19 Food inventory						
22 Historical artifacts	20 Drugs and medical supplies .						
23 Scientific specimens	21 Taxıdermy						
24 Archeological artifacts	22 Historical artifacts						
25 Other ► (23 Scientific specimens						
Signification (a) Content (a) (b) Content (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	24 Archeological artifacts						
26 Other ► (X 1 1,200 cost per receipts AIRFARE AND HOTEL) 27 Other ► (•	×	1	21,992	cost per receipts		
ARREAND HOTEL) 27 Other (•						
27 Other► (×	1	1,200	cost per receipts		
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	27 Other►(X	2	6,796	cost per receipts		
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement							
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	29 Number of Forms 8283 received by				9		0
it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?					.,	Yes	No
for exempt purposes for the entire holding period?							
b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash on the 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,	•		·	, and which is not required	I to be used		
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	for exempt purposes for the entire h	olding period	?			30a	No
Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	b If "Yes," describe the arrangement	ın Part II					
contributions?					1	31 Yes	<u> </u>
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	-	ird parties or	related organizations to s	olicit, process, or sell nor	1	32a	No
describe in Fait 11		amount in co	lumn (c) for a type of prop	erty for which column (a)	ıs 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 contri	butions, the

number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M, Part I, Column B Elmhurst College is reporting the number of contributions received

Schedule M (Form 990) (2014)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 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 Elmhurst College	Employer identification number
	36-2169145

Return Reference	Explanation
Form 990 Review Process	Form 990, Part VI, Line 11b The final review Form 990 and its various schedules were prepared by a national CPA firm, and then were reviewed by the Key Officers of the organization prior to making it available to the Board of Trustees After the Key Officers reviewed the form, it was distributed to the Audit Committee of the Trustees at their Spring meeting Identified necessary changes were incorporated following the board review process and a final copy of the filing was made available to all members of the board of trustees prior to filing

Return Reference	Explanation
Conflict of Interest Policy Monitoring & Enforcement	Form 990, Part VI, Line 12c Conflict of interest forms are sent to Trustees, Officers, Key Employees (as applicable) and others for completion. The completed forms are returned to and reviewed by the Board Audit Committee Chair. The Audit Committee Chair together with the Audit Committee is responsible for administration of this policy. Matters of concern are brought to the Chair of the Board of Trustees or the President. Approval of compensation transactions and other transactions covered by the policy are done through a review composed entirely of individuals who do not have any conflict of interest with respect to the arrangement or transaction at hand. Persons determined to have a conflict of interest are prohibited from participating in the governing body's deliberations and decisions in transactions which may relate to the conflict. They rely upon independent comparability data or valuations prior to making a determination. Matters related to compensation rely on external expertise in higher education.

Return Reference	Explanation
Process for Determining President's Compensation	Form 990, Part VI, Line 15a The President's salary is reviewed annually and determined by a process established by the Board of Trustees. The process begins with obtaining data from the College and University Professional Association for Human Resources (CUPA-HR) annual Salary Survey, periodically the Yaffe & Company Executive Compensation Survey, and the form 990 tax returns of comparable institutions are also reviewed. These surveys as well as the economic condition of Elmhurst College and other information concerning higher education are analyzed by the Human Resources Committee of the Board of Trustees with the assistance of the Vice President for Finance and Administration and periodically with input from an external consultant. The Human Resources Committee performs an annual formal evaluation process of the President in executive session. Performed in fiscal year 2013, every three years the committee performs an extensive evaluation involving various faculty, staff, students and external constituents. The Human Resources Committee recommends the salary revision to the full Board of Trustees who provides the final approval. Minutes of the Human Resources Committee document the determinations made during executive session.

Return Reference	Explanation
Process for Determining Officer's Compensation	Form 990, Part VI, Line 15b Top management's (Vice Presidents and Deans) salaries are reviewed annually by a process similar to all other employees. The President performs a formal evaluation. Using the CUPA-HR annual Salary Survey—the annual performance evaluation and the financial constraints of the College—the President then determines the salary revisions which are reviewed by the Human Resources Committee of the Board of Trustees. All other key employee salaries are reviewed annually by a similar process as the top management. Formal performance evaluations are performed by the supervisor of each key employee with recommendations for salary revisions provided to the top management employee over that area of responsibility. The evaluations and recommendations together with the comparison to the CUPA-HR annual Salary Survey and the preset budget for salary increases are reviewed by each top management administrator with recommendations presented to the President.

Return Reference	Explanation
	Form 990, Part VI, Line 19 The governing documents and financial statements of the college are available upon request, and financial statements are provided to various State Agencies, US Department of Education, various banks and others per agreement. In addition, the Annual Form 990 Information Return and 990-T Tax Return and all related documents and schedules are available to the public upon request. The conflict of interest policy is sent annually to all members of the Board of Trustees, Officers, Key Employees and other identified employees.

Return Reference	Explanation			
Other Changes in Net Assets or Fund Balances	Form 990, Part XI, Line 9 change in value of interest-rate swap \$(2,475,532) Change in beneficial interest in trusts \$(228,281) Restructuring \$(3,174,736) Total \$(5,878,549)			

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OMB No 1545-0047

Employer identification number

2014

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SCHEDULE R (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

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

(a)

(b)

Primary activity

(b)

Primary activity

(c)

Legal domicile (state or foreign country)

(d)

Total income

End-of-year assets

Direct controlling entity

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

or more related tax exempt organizations during the	tax yearr						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section (13) cor entil	512(b) ntrolled
						Yes	No
•							

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Genera	or Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocati	ions?	amount in box	manag	ng ownership
, and the second se		(state or	entity	unrelated,		assets			20 of	partne	7
, and the second se		foreign		excluded from					Schedule K-1		
, and the second se		country)		tax under					(Form 1065)		
, and the second se				sections 512-							
, and the second se				514)							
							Yes	No		Yes	lo

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	1 512 13) olled
(4) Paul II Da Proma Char	C. D. LINTTRUCT	TI	N.A.	T	100	100	100.000.0/	Yes	No
(1) Paul H DeBruine Char Remainder Unitrust 190 Prospect Ave	C R UNITRUST	IL	NA	Trust	100	100	100 000 %		No
Elmhust, IL 60126 36-7310644									
(2) Joel Herter Char Remainder Unitrust	C R UNITRUST	IL	NA	Trust	100	100	100 000 %		No
190 Prospect Ave Elmhurst, IL 60126 36-4572843									
(3) LT Palmer Char Remainder Annuity Trust	ANNUITY TRUST	IL	NA	Trust	100	100	100 000 %		No
190 Prospect Ave Elmhurst, IL 60126 36-6850426									
(4) Weigand 2 Life Char Remainder Unitrust	C R UNITRUST	IL	NA	Trust	100	100	100 000 %		No
190 Prospect Ave Elmhurst, IL 60126 36-7614572									

ensactions with one or more related organizations listed in Parts II-IV?	1a 1b 1c 1d								
controlled entity	1b 1c 1d								
	1c 1d								
	1d								
	\vdash								
	1e								
	1f								
f Dividends from related organization(s) g Sale of assets to related organization(s)									
	1h								
 h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) 									
j Lease of facilities, equipment, or other assets to related organization(s)									
k Lease of facilities, equipment, or other assets from related organization(s)									
d organization(s)	1n								
	10								
	1p								
	1q								
	1r								
	1s								
mation on who must complete this line, including covered relationships and transaction thresholds									
(b) (c) (d) Transaction Amount involved Method of determining amount type (a-s)	ount ir	nvolved							
7 7	related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) relation on who must complete this line, including covered relationships and transaction thresholds (b) (c) (d) Transaction Amount involved Method of determining amounts in the shoulds of determining amounts in the should be a s	n(s) related organization(s) related organization(s) related organization(s) related organization(s) In In Ip Iq Ir Is mation on who must complete this line, including covered relationships and transaction thresholds (b) (c) (d) Transaction Method of determining amount in	the lated organization(s) Including covered relationships and transaction thresholds (b) (c) (d) (d) (monotone) (d) (d) (monotone) (e) (d) (formstead organization) (head organization)						

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

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	' '
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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