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DLN: 93493134039416

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)

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	rthe 2	2014 ca	llendar year, or tax year beginning	07-01-2014 , and ending 06-30-20	015			
B Che	ck if ap	plicable	C Name of organization North Central College			D Emplo	yer iden	tification number
☐ Add	ress ch	ange	Worth Central Conege			36-2	169157	
┌ _{Nar}	ne char	nge	Doing business as			_		
┌ Inıt	ıal retur	'n						
Fina	al			all is not delivered to street address) Room,	/suite	— E Teleph	one numb	per
retu	ırn/term	nınated	30 N Brainard Street			(630)	637-5	680
☐ Am	ended r	eturn	City or town, state or province, cour	try, and ZIP or foreign postal code				
☐ App	lication	pending	Naperville, IL 60540			G Gross	receipts \$	168,982,345
			F Name and address of prin	cıpal officer	H(a) Ist	== :his a group	return	for
			Troy Hammond			ordinates?		┌ Yes ┌ No
			30 N Brainard Street Naperville, IL 60540		11/6			
			, ,			all subord luded?	inates	Γ Y es Γ No
I Ta	k-exem	pt status	s ▼ 501(c)(3)	nsert no) 4947(a)(1) or 527			na list ((see instructions)
1 W	ebsite	: !- w/v	ww northcentralcollege edu		–	oup exemp	tion num	hor b
					''(5)			
			n 🔽 Corporation 🦳 Trust 🦳 Association	Other 🗠	L Year of	formation 18	361 M	State of legal domicile IL
Pa	rt I	Sun	nmary					
			describe the organization's missio					
				MUNITY OF LEARNERS DEDICATE CTIVE CITIZENS AND LEADERS C			DENIS	TO BE INFORMED,
3	_							
듄	_							
Governance	_					250/ 61		
<u> </u>	2 (neck	this box 🞮 if the organization dis	continued its operations or dispose	d of more than	25% of its	net ass	sets
	3 1	Jumbei	r of voting members of the govern	ng body (Part VI, line 1a)		_	3	35
Activities &				of the governing body (Part VI, line 1			4	26
볼				calendar year 2014 (Part V, line 2a)			5	1,917
Ş				ecessary)			6	34
•				art VIII, column (C), line 12			7a	288,818
				om Form 990-T, line 34			7b	-26,979
						ior Year	 	Current Year
	8	Cont	ributions and grants (Part VIII. li	ne 1h)		7,845,	662	12,497,069
횰	9			ne 2g)		102,346,512		106,837,087
Rayenue	10			(A), lines 3, 4, and 7d)		4,760,		6,386,761
걆	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		1,741,		1,888,486
	12	Total	revenue—add lines 8 through 11					
			<u></u>			116,693,		127,609,403
	13		, ,	IX, column (A), lines 1–3)		38,220,	942	41,252,380
	14			d to or for members (Part IX, column (A), line 4)				0
Ø	15	Salar 5-10		e benefits (Part IX, column (A), line	37,173,	745	38,810,132	
Expenses	16a		•	column (A), line 11e)	47,962		170,388	
<u>क</u>			fundraising expenses (Part IX, column (D)		-	,		
五	ь				-			
	17			ines 11a-11d, 11f-24e)		30,406,		31,297,049
	18			st equal Part IX, column (A), line 25		105,849,		111,529,949
. 02	19	Reve	nue less expenses. Subtract line	18 from line 12		10,844,		16,079,454
କୁଷ ଅଧିକ					Beginni	ng of Curre Year	ent	End of Year
Not Assets or Fund Balances	20	Total	assets (Part X. line 16)			279,981,	381	313,276,425
2. A. B.	21		l liabilities (Part X, line 26)		· .	56,080,		84,935,940
20	22			line 21 from line 20		223,900,		228,340,485
Par	t II		nature Block			, ,		, ,
				mined this return, including accomp	anvina schedi	les and sta	tement	s, and to the best of
my kr	rowled	lge and	I belief, it is true, correct, and com	plete Declaration of preparer (other				
prepa	rer ha	s any l	knowledge					
		***	***			2016-05-13		
Sign			nature of officer			Date		
Here		Pau	II H Loscheider VP of Business Affairs					
			pe or print name and title					
			Print/Type preparer's name	Preparer's signature	1	heck / ıf	PTIN	002
Paid	i	-	KENNETH J KEBER Firm's name ► CROWE HORWATH LLP	KENNETH J KEBER		elf-employed irm's EIN 🟲 3	P00240	
Pre	pare	r	TIMES HOLDER OF CROWE HORWAIT LLP			min s LIN 🚩 3	J-03Z108	
			Firm's address > 330 E Jefferson Blvd PO Box 7		PI	hone no (574	1) 232-39	92

South Bend, IN 466240007

VYes □No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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? <i>If "Yes," complete Schedule D, Part III</i>	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
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
L1	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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f G}$	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	
L2a	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
L3	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E 💆	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	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	
L6	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
L 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
L8	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		No
L9	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		Νo
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? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
L		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

	Check if Schedule O contains a response or note to any line in this Part V			_
	Check it Schedule O contains a response of note to any line in this Part V		Yes	No No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4,360			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
ь	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)?	4 a		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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6-	Does the example to bour annual gross require that are normally greater than \$100,000, and did the	5c 6a		N.o.
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	• • • • • • • • • • • • • • • • • • •		No
	were not tax deductible?	6b		
	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		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 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			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

- 17 List the States with which a copy of this Form 990 is required to be filed►IL
- 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
- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►Paul H Loscheider

30 N Brainard Street Naperville, IL 60540 (630) 637-5678

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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					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	M			
d	Total (add lines 1b and 1c)	▶	2,037,155	0	429,502
d	Total (add lines 1b and 1c)	•	2,037,155	0	429,

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►32

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual				
	on the lattites, complete schedule from such mulvidual	3		Νo	
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				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	Yes		

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				
BULLEY & ANDREWS LLC 1755 W ARMITAGE AVE CHICAGO, IL 60622	CONSTRUCTION SERVICES	4,511,023				
DUKANE PRECAST INC 1805 HIGH GROVE LANE NAPERVILLE, IL 60540	CONSTRUCTION SERVICES	4,030,476				
HOLABIRD ROOT LLC 140 S DEARBORN ST CHICAGO, IL 60603	ARCHITECTURAL SERVICES	2,094,332				
NAPERVILLE EXCAVATING INC 1805 HIGH GROVE LANE NAPERVILLE, IL 60540	CONSTRUCTION SERVICES	1,228,763				
THE MILLARD GROUP TOTAL 94346 EAGLE WAY CHICAGO, IL 60678	CLEANING SERVICES	797,715				
Total number of independent contractors (including but not limited to those listed above) who received more than						

Form 99 Part V		Statement o	of Revenue					Page 9
		Check If Schedu	ule O contains a respor	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ω &	1a	Federated cam	paigns 1a					
ant	ь	Membership du	ies 1b					
Grants	С	Fundraising eve	ents 1c					
Giffs, illar A	d	Related organiz	zations 1d					
<u>i</u> i i i		Government grants		1,670,473				
ns,	е	_						
er ë	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	10,826,596				
Contributions, Gifts, Grants and Other Similar Amounts	g		ons included in lines	3,636,629			İ	
Cont and	h	1a-1f \$ Total. Add lines	c 1 c 1 f		12,497,069			
ة ت	"	Total. Add filles	5 1 d - 1 1	· · · •	12,137,003			
<u>o</u>	3-	TUTTON (MICHIEL	THE ETHANICIAL ATD	Business Code				
eur	2a		ING FINANCIAL AID)	812900	90,032,157	90,032,157		
Fe.	b	COMMUNITY EDUC		812900	804,055	723,637	80,418	
<u>5</u>	С	STUDENT HOUSING ENTERPRISES	G/AUXILIARY	912900	15,174,046	15,174,046		
Ž.	d	STUDENT FEES		900099	582,194	582,194		
Ę	е	OTHER ATHLETIC, ADMIN	ACADEMIC, AND	900099	244,635	244,635		
Program Serwde Revenue	f		am service revenue		0	0	0	0
Ě	g	Total Add lines	s 2a-2f		106,837,087			
	3		ome (including dividen		100,037,087			
		and other simila	ar amounts)	•	2,752,573			2,752,573
	4		stment of tax-exempt bond	proceeds -				
	5	Royalties	() Dool	(··) Paragrah				
	6a	Gross rents	(ı) Real 682,463	(II) Personal				
	b	Less rental	203,271					
	c	expenses Rental income	479,192	0				
	d	or (loss)	me or (loss)		479,192	270,792	208,400	
	u u	Net rental medi	(i) Securities	► (II) O ther	,	,		
	7a	Gross amount from sales of assets other than inventory	44,803,859	,				
	b	Less cost or other basis and	40,585,045	584,626				
		sales expenses		·				
	С	Gain or (loss)	4,218,814	-584,626	2.624.100			2 624 100
	d 8a	Gross income f	ss)		3,634,188			3,634,188
eune	- Ou	events (not inc						
ır Rev		See Part IV, lin						
Other Revenue	b		penses b					
0	c 9a	Gross income f	(loss) from fundraising rom gaming activities ne 19	events 🛌				
	_		а					
	b c		penses b (loss) from gaming acti	vities				
		Gross sales of		vicies				
		returns and allo						
	ь	Less costofa	oods sold b					
	c		(loss) from sales of inve	entory 🛌				
		Miscellaneous		Business Code				
	11a	THEATRE GAT	E RECEIPTS	711130	1,118,306			1,118,306
	b	PARKING FEES	S/FINES	812930	214,782			214,782
	С	ATHLETIC GA	TE RECEIPTS	812900	61,222			61,222
	d	All other revenu			14,984	0	0	14,984
	e	Total. Add lines	s 11a-11d		1,409,294			
	12	Total revenue.	See Instructions .		127,609,403	107,027,461	288,818	7,796,055

Part IX Statement of Functional Expenses

			ions must comp		
	Check if Schedule O contains a response or note to any line in this	Part IX		(C)	<u></u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) 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				
2	Grants and other assistance to domestic individuals See Part IV, line 22	40,618,798	40,618,798		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	633,582	633,582		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,559,126	1,048,811	239,629	270,686
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	306,916	119,046	93,322	94,548
7	Other salaries and wages	28,270,422	25,237,024	2,317,569	715,829
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,307,836	1,990,062	223,262	94,512
9	Other employee benefits	4,257,656	2,662,934	1,475,456	119,266
10	Payroll taxes	2,108,176	1,855,658	241,267	11,251
11	Fees for services (non-employees)				
а	Management				_
ь	Legal	109,098	37,436	71,662	_
С	Accounting	126,190	26,038	100,152	
d	Lobbying	60,576			60,576
e	Professional fundraising services See Part IV, line 17	170,388			170,388
f	Investment management fees	698,302	139,660	558,642	_
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,958,859	2,557,725	300,888	100,246
12	Advertising and promotion	1,318,242	932,296	265,322	120,624
13	Office expenses	1,726,165	1,440,314	201,323	84,528
14	Information technology	934,953	576,764	352,199	5,990
15	Royalties	16,577	16,577		
16	Occupancy	8,274,787	7,841,461	432,720	606
17	Travel	1,045,343	939,052	40,358	65,933
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	317,864	262,950	48,180	6,734
20	Interest	1,410,703	1,351,566	59,137	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,714,003	5,474,473	239,530	
23	Insurance	170,833	167,637	3,196	
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	FOOD SERVICE	3,348,043	3,348,043		
b	EQUIPMENT RENTAL	1,066,198	845,865	100,799	119,534
c	HOSPITALITY	1,229,585	943,661	163,321	122,603
d	DUES AND SUBSCRIPTIONS	695,086	588,538	45,764	60,784
е	All other expenses	75,642	69,105	3,484	3,053
25	Total functional expenses. Add lines 1 through 24e	111,529,949	101,725,076	7,577,182	2,227,691
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

Par	T A	Check if Schedule O contains a response or note to any line i	n this l	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments			22,777,628	2	45,025,129
	3	Pledges and grants receivable, net			2,778,206	3	6,141,188
	4	Accounts receivable, net			4,093,840	4	3,378,478
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II	of	0	5	0
Assets	6	Loans and other receivables from other disqualified persons (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	d contr emplo	ibuting employers			
82	7	Notes and loans receivable, net			4,661,457	7	5,143,264
₹	8	Inventories for sale or use			1,551,151	8	5,115,251
	9	Prepaid expenses and deferred charges			1,582,457	9	3,920,815
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 10a	201,378,805	1,002,100		-1023,010
	ь	Less accumulated depreciation	10b	62,663,186	126,435,366	10c	138,715,619
	11	Investments—publicly traded securities			110,992,215	11	95,671,807
	12	Investments—other securities See Part IV, line 11			6,237,131	12	14,900,169
	13	Investments—program-related See Part IV, line 11			0	13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			423,081	15	379,956
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			279,981,381	16	313,276,425
	17	Accounts payable and accrued expenses			6,836,339	17	11,848,054
	18	Grants payable			3,000,000	18	,
	19	Deferred revenue			977,007	19	823,211
	20	Tax-exempt bond liabilities			41,500,000	20	66.159.000
	21	Escrow or custodial account liability Complete Part IV of Sc			11,555,555	21	35, 155,555
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	tors,			21	
Liabiliti		persons Complete Part II of Schedule L			0	22	
ä	23	Secured mortgages and notes payable to unrelated third part				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	,
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete P	lated t	nird parties,			
		D	6,767,238	25	6,105,675		
	26	Total liabilities. Add lines 17 through 25			56,080,584	26	84,935,940
seo		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	✓ ar	d complete			
<u>a</u>	27	Unrestricted net assets			152,691,581	27	151,287,191
8	28	Temporarily restricted net assets			28,957,913	28	32,873,714
귤	29	Permanently restricted net assets			42,251,303	29	44,179,580
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here Þ	- 「and			
s or	30	Capital stock or trust principal, or current funds				30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	_
Assets	32	Retained earnings, endowment, accumulated income, or other				32	
Šet	33	Total net assets or fund balances			223,900,797	33	228,340,485
Z	34	Total liabilities and net assets/fund balances			279,981,381	34	313,276,425
					=: -,:,-•		, ,

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		127,6	509,403
2	Total expenses (must equal Part IX, column (A), line 25)	2		111,5	529,949
3	Revenue less expenses Subtract line 2 from line 1	3			79,454
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			00,797
5	Net unrealized gains (losses) on investments	5			318,424
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		-1,8	321,344
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			 340,485
Par	t XIII Financial Statements and Reporting				-
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	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 2c	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?	е	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: 14000329 **Software Version:** 2014v1.0

EIN: 36-2169157 **Name:** North Central College

Form 990, Part VII - Compensation	of Officers,	Direct	ors,	Tru	ste	es, k	(ey	Employees, Hig	hest		
Compensated Employees, and Indo (A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor,	ox, u an of ⁄trus	nless ficer tee)		(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	
(1) MR TROY HAMMOND	60 00	х		х				331,747	0	109,607	
PRESIDENT (1) MR STEVEN H HOEFT	1 00	×		x				0	0	0	
CHAIRMAN OF THE BOARD (2) MS HOLLY HUMPHREY	1 00	,									
TRUSTEE, VICE CHAIR ACDMC AFF		Х		Х				0	0	0	
(3) MR DAVID W KELSCH VICE CHAIR, BUSINESS AFFAIRS	1 00	×		х				0	0	О	
(4) MS HOLLY I MYERS	1 00	x		х				0	0	0	
TRUSTEE, BOARD SECRETARY (5) MR JEFF OESTERLE	1 00										
TRUSTEE, VICE CHAIR, INST ADV		Х		Х				0	0	0	
(6) DR HERMAN B WHITE JR TRUSTEE, VICE CHAIR, STDT AFF	1 00	x		х				5,000	0	0	
(7) MR JOSEPH MALLON	1 00	х						0	0	0	
TRUSTEE, CHAIR AUDIT COMMITTEE (8) MS ESTHER T BENJAMIN	1 00	.,									
TRUSTEE (9) MS ERIN L BISHOP	1 00	×						0	0	0	
TRUSTEE		×						0	0	0	
(10) MR MATTHEW S BRILL	1 00	х						0	0	0	
TRUSTEE (11) MR JAMES J BOYNE	1 00	х						0	0	0	
TRUSTEE (12) BISHOP SALLY DYCK	1 00	х						0	0	0	
TRUSTEE (13) MR KEVIN M GENSLER	1 00	×						0	0	0	
TRUSTEE (14) MRS NANCY NANCY HANSON	1 00								0		
TRUSTEE		Х						0	0	0	
(15) MR PETER P JONES TRUSTEE	1 00	x						0	0	О	
(16) BISHOP HEE-SOO JUNG	1 00	х						0	0	0	
TRUSTEE (17) MR RAY KINNEY	1 00	×						0	0	0	
TRUSTEE (18) MRS SUSAN KORANDA	1 00	X						0	0	0	
TRUSTEE (19) MR RONALD LEUPTOW	1 00							0	0	0	
TRUSTEE		х						0	0	0	
(20) MR JAMES A MCDERMET TRUSTEE	1 00	×						0	0	0	
(21) MR MICHAEL R NASET TRUSTEE	1 00	х						0	0	0	
(22) MS LORI NOVAK	1 00	х						0	0	0	
TRUSTEE (23) MR STEVEN RUBIN	1 00	X						0	0	0	
TRUSTEE (24) MR STEPHEN T SELLERS	1 00										
TRUSTEE		х						0	0	0	

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

Compensated Employees, and Indo (A) Name and Title	(B) A verage hours per week (list any hours	Posit more the perso	ion (d nan oi n is b	ne b	ox, u an of	ınless fficer	3	(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	<u>≅</u>		Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(26) MR DONALD SHARP	1 00	x						0	0	0
TRUSTEE (1) DR JEFFREY K SHALLOW	1 00									
TRUSTEE		x						0	0	0
(2) MR SCOTT WEHRLI	1 00	.,								
TRUSTEE		Х						0	0	0
(3) MR ROBERT A WISLOW	1 00	x						0	0	0
TRUSTEE (4) MR LEE WOOLLEY	1 00									
• ,		х						0	0	0
TRUSTEE (5) MISS MARIA E WYNNE	1 00									
TRUSTEE		X						0	0	0
(6) DR HAROLD R WILDE	1 00	х						0	0	0
TRUSTEE		_ ^						0	0	0
(7) DR KATHRYN BIRKETT	1 00	x						0	0	0
TRUSTEE (8) MRS ROBIN BOREN	1 00									
TRUSTEE		х						0	0	0
(9) MR THOMAS HARTER	1 00									
TRUSTEE		Х						0	0	0
(10) MS LEAH RIPPE	1 00	х						0	0	0
TRUSTEE										
(11) MR PAUL LOSCHEIDER	60 00			х				207,825	0	40,505
VP FOR BUSINESS AFFAIRS (12) DR R DEVADOSS PANDIAN	60 00									
VP FOR ACADEMIC AFFAIRS				Х				227,778	0	34,193
(13) MR RICK E SPENCER	60 00									
VP INSTITUTIONAL ADVANCEMENT				Х				209,492	0	40,593
(14) MR MARTIN SAUER	60 00			х				186,577	0	35,422
VP FOR ENROLLMENT MANAGEMENT AND ATHLETICS									_	
(15) MS KIMBERLY SLUIS	60 00			х				147,916	0	13,162
VP FOR STUDENT AFFAIRS AND DEAN OF STUDENTS (16) MATTHEW BURDEN	50 00									
ASSISTANT VICE PRESIDENT/CIO						Х		139,352	0	31,756
(17) DR MARTI BOGART	50 00									
PROF OF ECON/ASSOCIATE DEAN						X		144,464	0	41,713
(18) DR FRANCINE NAVAKAS	50 00					Х		148,900	0	31,252
PROF OF ENGLISH/ASSOCIATE DEAN								110,500	Ů	
(19) BRUCE NORTELL	50 00					x		132,568	0	20,865
DIRECTOR OF PLANNED GIVING (20) DR RICHARD WILDERS	50 00									
PROF OF MATH/ASSOCIATE DEAN						х		155,536	0	30,434
FROI OI PIATTI/ASSUCIATE DEAN		<u> </u>			1		L			

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DLN: 93493134039416

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

North Central College					Employer identification number								
North	36-2169157												
Pa	rt I	Reason for Publi	c Charity S	Charity Status (All organizations must complete this part.) See instructions.									
The	organı	zation is not a private f	oundation bec	auseıtıs (Forlines 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(b)(1)(A)(i).						
2	<u>~</u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	\sqcap	A hospital or a coopei	ital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	Γ	A medical research or		erated in conjunction v	vith a hospital c	lescribed in se	ction 170(b)(1)(A)(iii	i). Enter the					
5	Г	hospital's name, city, An organization opera	ted for the her	nefit of a college or uni	versity owned o	r operated by	a governmental unit d	escribed in					
•	'	section 170(b)(1)(A)			versity owned	, operated by	a governmentar ame a						
6	Г	A federal, state, or loc		· ·	described in se	ection 170(b)(1)(A)(v)						
7	Ë	An organization that r	_	_				annoral nublic					
,	'	described in section 1	•	•	• •	om a governme	entar unit or nom the g	Jeneral public					
8	Γ	A community trust de				tII)							
9	Γ	An organization that r	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross					
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of					
		its support from gross											
		acquired by the organ	ızatıon after Ju	une 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)						
10	Г	An organization organ		•			•						
11		An organization organ	•	·	•	•		out the purposes of					
	·	one or more publicly s											
	_	the box in lines 11a tl											
а	ı	Type I. A supporting of											
		supported organizatio organization You mus				ty of the direct	ors or trustees of the	supporting					
ь	Г	Type II. A supporting				with its suppo	orted organization(s), l	by having control or					
		management of the su	-	•		• •							
	_	must complete Part I	<u>,</u>										
С	ı					connection with, and functionally integrated with, its							
d	Г				st complete Part IV, Sections A, D, and E. rganization operated in connection with its supported organization(s) that is								
-	'	not functionally integr											
		(see instructions) Yo						·					
е	Γ	Check this box if the					s a Type I, Type II, T	ype III functionally					
£		integrated, or Type II		•									
'		Enter the number of s Provide the following i											
g		Provide the following i	IIIOTIIIatioii ab	out the supported orga	iiiizatioii(s)								
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	janization	(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)	instructions)					
		section (see											
				ınstructions))			-						
					Yes	No							
		· · · · · · · · · · · · · · · · · · ·											

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 6,423,262 10,865,466 5,441,179 7,845,662 12,497,069 43,072,638 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 6,423,262 10,865,466 5,441,179 7,845,662 12,497,069 43,072,638 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 4,151,818 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 38,920,820 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 (c) 2012 (d) 2013 **(b)** 2011 (e) 2014 (f) Total beginning in) 🟲 5,441,179 7,845,662 Amounts from line 4 6,423,262 10,865,466 12,497,069 43,072,638 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,932,316 3,645,213 2,720,083 2,526,945 2,752,573 14,577,130 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 1,341,186 1,356,825 1,256,810 1,344,239 1,409,294 6,708,354 capital assets (Explain in Part VI) 11 Total support Add lines 7 64,358,122 through 10 12 Gross receipts from related activities, etc (see instructions) 480,164,142 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 14 60 48 % Public support percentage for 2013 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

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

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

Section D. Computation of Investment Income Percentage

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

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

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

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

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
Income	DESCRIPTION - THEATRE RECEIPTS, COLUMN A - 993723 0, COLUMN B - 1060614 0, COLUMN C - 958844 0, COLUMN D - 1050260 0, COLUMN E - 1118306 0, COLUMN F - 5181747 0, DESCRIPTION - PARKING FEES/FINES, COLUMN A - 186557 0, COLUMN B - 172161 0, COLUMN C - 199001 0, COLUMN D - 196369 0, COLUMN E - 214782 0, COLUMN F - 968870 0, DESCRIPTION - ATHLETIC GATE RECEIPTS, COLUMN A - 142157 0, COLUMN B - 95849 0, COLUMN C - 81449 0, COLUMN D - 77935 0, COLUMN E - 61222 0, COLUMN F - 458612 0, DESCRIPTION - OTHER, COLUMN A - 18749 0, COLUMN B - 28201 0, COLUMN C - 17516 0, COLUMN D - 19675 0, COLUMN E - 14984 0, COLUMN F - 99125 0,

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493134039416

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

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

	me of the organization th Central College			Employer idei	ntification number
1101	an central conege			36-2169157	,
Par'	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a section 527	7 organization.
1	Provide a description of the org	ganization's direct and indirect politi	cal campaıgn act	ivities in Part IV	
2	Political expenditures	▶	\$		
3	Volunteer hours				
Dar	t In: Complete if the or	ganization is exempt under	section FO1/	c)(3)	
1	<u> </u>	e tax incurred by the organization un			ф.
	·	·			\$
2		e tax incurred by organization manag		114955	\$ Г Yes Г No
3	-	ection 4955 tax, did it file Form 472	to for this year?		
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV			a) assault as alian E/	24/-2/22
	-	ganization is exempt under)1(c)(3).
1		ended by the filing organization for se			\$
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to ot	ther organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file ${f F}$	Form 1120-POL for this year?			☐ Yes ☐ No
	organization made payments f amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro Iirectly delivered	om the filing organization's to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) Amount 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-
For P	aperwork Reduction Act Notice, se	e the instructions for Form 990 or 990)-EZ. (Cat No 50084S Schedule C	(Form 990 or 990-F7) 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	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

	filed Form 5768 (election under section 501(h)).	(a	a)		(b)	
For e activ	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No		moun	t
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?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo			
C	Media advertisements?		Νo			
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?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?	Yes			6	0,576
j	Total Add lines 1c through 1i				6	0,576
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
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?					
Par	t IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(5), c	r se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			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		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, 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	
C	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	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
DETAILED DESCRIPTION OF THE	\$60,209 paid to Dixon and Company, Inc. for professional lobbying fees - sending letters and meeting with Illinois state government officials to attempt to secure potential capital funding, \$311 paid to the state of Illinois for lobbyist registration fees, \$56 paid for miscellaneous supplies

Part IV Supplemental Info	Part IV Supplemental Information (continued)					
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493134039416

OMB No 1545-0047

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.

Open to Public Inspection

	ne of the organization h Central College	Employer identification number			
IOIL	n Central College		36-	2169157	
^o a	rt I Organizations Maintaining Donor Ad organization answered "Yes" to Form 990		Funds	or Accounts. Com	plete if the
	organization answered tes to Form 990	(a) Donor advised funds		(b) Funds and other ac	counts
	Total number at end of year				
	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 advis funds are the organization's property, subject to the o		nor adv	ised	es Γ No
	Did the organization inform all grantees, donors, and c used only for charitable purposes and not for the bene conferring impermissible private benefit?				es 「No
a r	t II Conservation Easements. Complete if	f the organization answered "Yes"	to Forn	n 990, Part IV, line	7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of a	ı certifie	d historic structure	rea
	easement on the last day of the tax year	·		Ţ	
				Held at the End of	the Year
l	Total number of conservation easements		2a		
	Total acreage restricted by conservation easements		2b		
	Number of conservation easements on a certified hist	· <i>'</i>	2c		
	Number of conservation easements included in (c) acc historic structure listed in the National Register		2d		
	Number of conservation easements modified, transfer	red, released, extinguished, or termina	ted by th	ne organization during	
	the tax year 🛌				
	Number of states where property subject to conservat	tion easement is located ►			
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha	ndling of	f violations, and	es 「No
	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ements o	during the year	
	-				
	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easemen	ts durin	g the year	
	▶ \$				
	Does each conservation easement reported on line 2(and section $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of se	ection 17	70(h)(4)(B)(ı) 	es 「No
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's financia			
T	Complete if the organization answered "		, or Ot	her Similar Asset	s.
	If the organization elected, as permitted under SFAS: works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education	, or rese	earch in furtherance of	
•	If the organization elected, as permitted under SFAS : works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	116 (ASC 958), to report in its revenue ets held for public exhibition, education	e statem	nent and balance sheet	
	(i) Revenue included in Form 990, Part VIII, line 1			► \$	0
	(ii) Assets included in Form 990, Part X			► \$	0
	If the organization received or held works of art, historical following amounts required to be reported under SFAS				
	Revenue included in Form 990, Part VIII, line 1	-		► \$	0
,	Assets included in Form 990, Part X				
	maacta micruucu nii runni aau, rail A			F P	-

Par	Organizations Maintaining Co	<u>llections of Art, H</u>	istori	cal Tre	asures, or O	<u>ther</u>	Similar As:	sets (c	ontınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records,	check	any of the	e following that a	re a s	significant use	of its	
а	Public exhibition	d	Γ	Loan or	exchange progr	ams			
b	Scholarly research	e	Γ	Other					
c	✓ Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain h	ow the	y further	the organization	's exe	mpt purpose ı	n	
5	During the year, did the organization solicit	or receive donations of	art, his	storical tr	easures or other	sımıl			
	assets to be sold to raise funds rather than t	·					<u>'</u>	Yes	✓ No
Pai	Part IV, line 9, or reported an an					1 "Ye	s" to Form 9 ————	90, 	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ıan or other ıntermedıa	ry for c	ontribution	ons or other ass	ets no		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the foll	owing	table	_				
					-		Am	ount	
С	Beginning balance				-	1c			
d	Additions during the year				_	1d			
е	Distributions during the year				—	1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21	., for e	scrowor	custodial accour	nt liab	ulity? [Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the exp	planatı	on has be	en provided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete	f the organization ar	nswer						
		· · · · · · · · · · · · · · · · · · ·	b) Prior		(c)Two years back				rears back
1a	Beginning of year balance	109,479,724	96	,838,694	91,274,932		94,092,598		78,969,002
b	Contributions	1,839,569		802,185	1,267,004		2,296,389		808,468
С	Net investment earnings, gains, and losses	-2,647,138	15	,496,936	7,676,111		-2,014,713		17,217,140
d	Grants or scholarships	1,173,152	1	,086,930	989,273		868,206		794,674
e	Other expenditures for facilities and programs	2,449,913	2	,275,738	2,120,591		1,987,623		1,877,213
f	Administrative expenses	264,815		295,423	269,489		243,513		230,125
g	End of year balance	104,784,275	109	,479,724	96,838,694		91,274,932		94,092,598
2	Provide the estimated percentage of the cur	ent year end balance (I	ine 1g	, column	(a)) held as				
а	Board designated or quasi-endowment ►	46 5 %							
b	Permanent endowment ► 41 13 %								
С	Temporarily restricted endowment ► 12 The percentages in lines 2a, 2b, and 2c sho	37 % uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organizatio	n that	are held a	and administered	for th	he		
	organization by							Yes	+
	(i) unrelated organizations					•	3a(
L	(ii) related organizations If "Yes" to 3a(ii), are the related organization						3a(i		No
ь 4	Describe in Part XIII the intended uses of the	•				•	30	<u>'</u>	
	t VI Land, Buildings, and Equipme				answered 'Yes	' to F	orm 990 Pa	rt IV I	ine
	11a. See Form 990, Part X, line		organ	nzacion (4115476164 165		o i i i i j j j j i i i i i i i i i i i		
	Description of property			Cost or oth s (investme			(c) Accumulated depreciation	(d) Bo	ook value
	Land		\top	315,9	930 7,598,	268		 	7,914,198
	Buildings			500,0		_	46,152,759	1/	08,175,057
c	Leasehold improvements						<u> </u>		·
	Equipment				22,437,	985	16,510,427		5,927,558
е	Other				16,698,		· · · · · · · · · · · · · · · · · · ·		16,698,806
	I. Add lines 1a through 1e (Column (d) must e		olumn (B), line 10	D(c).)			+	38,715,619
	- · · · ·	· · · · · ·	<u> </u>				Schedule D		

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security) (1)Financial derivatives		Cost or end-of-year market value
2)Closely-held equity interests		
ther		
		+
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
art VIII Investments—Program Related. Co	omplete if the organization	on answered 'Yes' to Form 990, Part IV, lin
See Form 990, Part X, line 13.	(h) Dook wales	(a) Mathad of valueties
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	n anawayad 'Vaa' ta Farm 00	O Port IV line 11d Coe Form 000 Port V line
Part IX Other Assets. Complete if the organizatio (a) Description		(b) Book value
Fotal. (Column (b) must equal Form 990, Part X, col.(B) line 1		to Form 000 Dark IV line 445 5 445 C
Other Liabilities. Complete if the organization Form 990, Part X, line 25.	anization answered Yes	to Form 990, Part IV, line 11e or 11f. See
(a) Description of liability	(b) Book value	
Federal income taxes		
SPLIT INTEREST AGREEMENTS	1,922,683	
REFUNDABLE LOAN	1,272,489	
NTEREST RATE SWAP	2,910,503	
		1
		1
	1	1
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	6,105,675	

financial statements

Par		evenue per Audited Financial State ered 'Yes' to Form 990, Part IV, line 1		ents With Revenue	er Re	turn Complete if
1		r support per audited financial statements			1	77,375,452
2		t not on Form 990, Part VIII, line 12				, ,
а	Net unrealized gains (losses) o	·	2a	-9,818,424		
b		icilities	2b	<u> </u>		
c	Recoveries of prior year grants		2c			
d			2d	-40,618,798		
e	Add lines 2a through 2d .				2e	-50,437,222
3	Subtract line 2e from line 1 .				3	127,812,674
4		D, Part VIII, line 12, but not on line 1				
а		ided on Form 990, Part VIII, line 7b	4a			
b	•		4b	-203,271		
c			L	<u> </u>	4c	-203,271
5		4c. (This must equal Form 990, Part I, line			5	127,609,403
		xpenses per Audited Financial Sta			s per l	<u> </u>
		swered 'Yes' to Form 990, Part IV, line				<u> </u>
1	Total expenses and losses per	audited financial statements	•		1	71,114,420
2	A mounts included on line 1 but	not on Form 990, Part IX, line 25				
а	Donated services and use of fa	cilities	2a]	
b	Prior year adjustments		2b]	
C	Other losses		2c]	
d	Other (Describe in Part XIII)		2d	203,271]	
e	Add lines 2a through 2d				2e	203,271
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	70,911,149
4	A mounts included on Form 990), Part IX, line 25, but not on line 1:				
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b	40,618,798		
C	Add lines 4a and 4b				4c	40,618,798
5	Total expenses Add lines 3 an	d 4c. (This must equal Form 990, Part I, lin	e 18)	5	111,529,947
	Return Reference	Explanation THE NORTH CENTRAL COLLEGE ARCHI				
collec	tions of art - description of tions	PHOTOGRAPHS, AUDIO-VISUAL MATE MATERIALS DOCUMENTING THE HISTOTYPES OF MATERIALS FOR TWO ADDIT ARCHIVES (WHICH SEEKS TO DOCUME REGION FOLLOWING WORLD WAR II) A HARRIS W FAWELL THE NORTH CENTRORGANIZE, DESCRIBE, PRESERVE AND THE HISTORY OF THE COLLEGE AND TARCHIVES SUPPORTS THE COLLEGE CAND PROVIDES REFERENCE ASSISTAN CAMPUS NORTH CENTRAL COLLEGE'S (INDEPENDENT OF THE ARCHIVES) INCOTHER FAMOUS PERSONS SIGNATURE UNIQUE COLLECTION OF BOOKS ON COSHEET MUSIC JAZZ NORTH CENTRAL COLLEGE BY GUSTAV BORGLUM AND CHRISTIAN GAMERSFELDER NAUMANN	DRY O IONA NT TI ND TH AL CO MAK HE LO OMMI CE TO OEST CLUD S, A F HICA COLLI S A V	OF THE COLLEGE THE ALL COLLECTIONS, THE HE TRANSITION OF CHEE PAPERS OF RETIRES OF A RESPONSIVE OF THE PAPERS OF A REATE UNITY'S NEED FOR HIS OF ARCHIVAL RESEARCIERLE LIBRARY SPECIAL ES A COLLECTION OF TRATE EDITIONS COLLEGION OF TRATE EDITIONS COLLEGION ARIETY OF MEDIA AND ARIETY OF M	ARCHIV SUBUR ICAGO US CO SSION I EARCH D TO TH TORIC HERS O AL COLL PRESID ECTION ND A SE N IS OI O ARTIS	YES HOLDS SIMILAR BAN STUDIES 'S WEST SUBURBAN ONGRESSMAN IS TO COLLECT, MATERIALS ON HE COLLEGE THE AL INFORMATION ON AND OFF LECTIONS OF BOOKS, A ET OF BOOKS AND N DISPLAY ITS, FROM BRONZES
	lule D, Part V , Line 4 Intended of endowment funds	THE INTENDED USE OF THE ORGANIZA FUNDS TOWARD PROFESSIONAL FACU MAINTENANCE, LIBRARY ENHANCEME	LTY C	HAIRS, SCHOLARSHIP	S, FACI	ILITIES
	lule D, Part X, Line 2 FIN 48 740) footnote	The FASB issued guidance that requires to the financial statements only if the position to be challenged by a taxing authority. Ma positions that require recognition in the fir taxes is reflected in these financial statem by the expenses directly connected with the taxes are no interest or penalties recognized position.	n is m nagen iancia nents ne cor	ore likely than not to be nent has determined ther I statements Additionall as the College's unrelate iduct of the activity crea	sustain e are no y, no pr d busin ting a ne	ed if the position were material uncertain ovision for income ess income was offset et operating loss
reven	lule D, Part XI, Line 2(d) O ther ues in audited financial nents not in form 990	FINANCIAL AID40618798				
reven financ	lule D, Part XI, Line 4(b) O ther ues in form 990 not in audited ial statements	RENTAL EXPENSES NETTED WITH REVE				
		RENTAL EXPENSES NETTED WITH REVE	NUE	- 203271		
•	ses in audited financial nents not in form 990					

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Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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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

Name of the organization North Central College Employer ident			ification number				
NOILI		36-2169157					
Pa	rt I		YES	NO			
1	Does the organization have a racially nondiscriminatory policy toward students by statement in it other governing instrument, or in a resolution of its governing body?		L Yes				
2	Does the organization include a statement of its racially nondiscriminatory policy toward students brochures, catalogues, and other written communications with the public dealing with student adm programs, and scholarships?	nissions,					
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadc		2 Yes	+			
3	the period of solicitation for students, or during the registration period if it has no solicitation prog that makes the policy known to all parts of the general community it serves? If "Yes," please des	ıram, ın a way					
	please explain If you need more space use Part II		Yes				
4	Does the organization maintain the following?						
i	Records indicating the racial composition of the student body, faculty, and administrative staff?	4	a Yes				
١	b Records documenting that scholarships and other financial assistance are awarded on a racially r basis?	ondiscriminatory 4	b Yes				
•	Copies of all catalogues, brochures, announcements, and other written communications to the pul	_					
	with student admissions, programs, and scholarships?		c Yes				
•	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	4	d Yes	+			
5	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5	a	No			
I	b Admissions policies?	5	b	No			
•	c Employment of faculty or administrative staff?	5	с	No			
(d Scholarships or other financial assistance?	50	d	No			
•	e Educational policies?	56	e	No			
1	f Use of facilities?	5	f	No			
,	g Athletic programs?	_ 5	g	No			
l	h Other extracurricular activities?	5	h	No			
c	If you answered "Yes" to any of the above, please explain If you need more space, use Part II		- Vaa				
	a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended?	6	_	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 (110			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pondiscrimination? If "No." explain on Par	_	, _V				

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

Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	THE COLLEGE'S POLICY IS ONE OF NON-DISCRIMINATION WITH RESPECT TO THE PUBLIC SERVED BY THE INSTITUTION AND WITH RESPECT TO THE COLLEGE PERSONNEL ADVERTISEMENTS, BROCHURES, PUBLICATIONS, APPLICATION FOR ADMISSIONS, ETC, CONTAIN A STATEMENT TO THE EFFECT THAT THE COLLEGE DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, GENDER, AGE, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, SEXUAL ORIENTATION, HANDICAP, DISABILITY, VETERAN STATUS OR UNFAVORABLE DISCHARGE FROM MILITARY SERVICE A CLASSIFIED ADVERTISEMENT IS RUN ONCE PER TERM WITH THE COLLEGE'S ANTI-DISCRIMINATION POLICY
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	NORTH CENTRAL COLLEGE APPLIES FOR AND RECEIVES EDUCATIONAL GRANTS, AS APPROVED ON A CASE BY CASE BASIS, FROM FEDERAL AND STATE AGENCIES THE COLLEGE ALSO PARTICIPATES ANNUALLY IN FEDERAL & STATE FINANCIAL PROGRAMS, SPECIFICALLY PELL, SEOG, FEDERAL WORK STUDY, PERKINS, FEDERAL DIRECT LOANS, AND VARIOUS OTHER STATE OF ILLINOIS GRANT PROGRAMS FOR QUALIFIED STUDENTS THE FEDERAL GRANTS AND LOANS ARE REPORTED IN THE COLLEGE'S A-133 SINGLE AUDIT

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

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As Filed Data -

DLN: 93493134039416

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public **Inspection**

Name of the organization				Employer ident	ification number			
North Central College				36-2169157				
Part I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered			
and other assistance, the gra	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 assistance outside the United		ganızatıon's pr	rocedures for monitorii	ng the use of its gran	ts and other			
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ace is needed)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region			
(1) See Add'l Data		-						
(2)								
(3)								
(4)								
(5)								
3a Sub-total	0	1			654,972			
b Total from continuation sheets to Part I	0	0			(
c Totals (add lines 3a and 3h)	<u>۱</u>	l 1	1	I	654 97			

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

1 (a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash	(g) A mount of non-cash	(h) Description of non-cash	(i) Method of valuation
	and EIN (If applicable)				disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

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	[~	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	▽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	ত	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	~	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	V	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	্ন	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	DURING THE TAX YEAR, THE COLLEGE OFFERED STUDENTS STUDY ABROAD OPPORTUNITIES IN VARIOUS FO REIGN COUNTRIES WHEN STUDYING ABROAD, STUDENTS ARE STILL ELIGIBLE FOR ALL FINANCIAL AID A S IF THEY WERE ATTENDING CLASSES AT THE COLLEGE THE COLLEGE WIRES THE FUNDS ON THE STUDEN T'S BEHALF TO THESE FOREIGN INSTITUTIONS THE COLLEGE ALSO WORKED WITH TWO FOREIGN AGENCIE S DURING THE TAX YEAR THESE AGENCIES HAVE HELPED THE COLLEGE RECRUIT STUDENTS FROM FOREIG N COUNTRIES

990 Schedule F, Supplemental Information

o Schedule F, Supplemental Information						
Return Reference	Explanation					
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS	DURING THE TAX YEAR, THE COLLEGE OFFERED STUDENTS STUDY ABROAD OPPORTUNITIES IN VARIOUS FO REIGN COUNTRIES WHEN STUDY ING ABROAD, STUDENTS ARE STILL ELIGIBLE FOR ALL FINANCIAL AID A S IF THEY WERE ATTENDING CLASSES AT THE COLLEGE THE COLLEGE WIRES THE FUNDS ON THE STUDEN T'S BEHALF TO THESE FOREIGN INSTITUTIONS THE COLLEGE ALSO WORKED WITH TWO FOREIGN AGENCIE S DURING THE TAX YEAR THESE AGENCIES HAVE HELPED THE COLLEGE RECRUIT STUDENTS FROM FOREIG N COUNTRIES					

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 36-2169157

Name: North Central College

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Grantmakıng	STUDY ABROAD	8,306
East Asia and the Pacific			Grantmakıng	STUDY ABROAD	64,136
Europe (Including Iceland and Greenland)			Grantmakıng	STUDY ABROAD	523,174

Form 990 Schedule F	<u> Part I - Activit</u>	ties Outside T	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		1	Program Services	RECRUITMENT	21,390
Middle East and North Africa	0	0	Grantmakıng	STUDY ABROAD	26,434
South America	0	0	Grantmakıng	STUDY ABROAD	6,800

Form 990 Schedule F I	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Grantmakıng	STUDY ABROAD	4,732

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(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	(ı) Method of valuation (book, FMV, appraisal, other)		
		Central America and the Caribbean	STUDY ABROAD	8,306	WIRE TRANSFER			0		
		Europe (Including Iceland and Greenland)	STUDY ABROAD	523,174	WIRE TRANSFER			0		
		East Asia and the Pacific	STUDY ABROAD	64,136	WIRE TRANSFER			0		
		Middle East and North Africa	STUDY ABROAD	26,434	WIRE TRANSFER			0		

Form 990 Scheau	orm 990 Schedule F Part II - Grants or Entities Outside The United States											
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(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	(ı) Method of valuatıon (book, FMV , appraısal, other)				
		South America	STUDY ABROAD	6,800	WIRE TRANSFER			0				

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

DLN: 93493134039416

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury

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.

Open to Public Inspection

Internal Revenue Service Name of the organization North Central College

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

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

	Mail solicitations Internet and email soli Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at least	a written or oral agre Form 990, Part VII) St paid individuals or	entities (finization	in connec	ction with professional fi	ernment grants g events s, directors, trustees undraising services?	Yes N draiser is (vi) A mount paid to (or retained by)
	or entity (fundraiser)		cont contrib	ody or rol of outions?		fundraiser listed in col (i)	organization
1	WILSON-BENNETT TECH	PHONATHON	Yes	No No	138,316	47,708	90,608
2	ROYALL & COMPANY 1920 E Parham Road	FUNDRAISING STRATEGY		No	54,820	122,680	-67,860
3	Richmond, VA 23228						
4							
5							
6							
7							
8							
9							
10							
Tota	ıl			.	193,136	170,388	22,748
3	List all states in which the registration or licensing	organization is regis	tered or lic	censed to	o solicit contributions oi	has been notified it is	exempt from
I L							

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported les 1 and 6b. List
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
₽ ΛΦ	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
£O.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
<u>Ф</u>		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>~</u>	1	Gross revenue				
Expenses	2	Cash prizes				
xper	3	Non-cash prizes				
Dreat E	4	Rent/facility costs				
چ	5	Other direct expenses				
	6	Volunteer labor			│ Yes	
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ation conducts gaming a	ctivities		
а		the organization licensed to conduct				Г _{Yes} Г _{No}
b		No," explain				
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?	
U	TI	163, EXPIAIII				

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							
c	If "Yes," enter name and address of the	e 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: 93493134039416 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 North Central College 36-2169157 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) ACADEMIC SCHOLARSHIPS & GRANTS	2952	40,618,798			

Part IV Supplemental I	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanation									
Schedule I, Part I, Line 2 Description Of Procedure For Monitoring Use Of Grant Funds	THE COLLEGE PROVIDES SCHOLARSHIPS TO STUDENTS MATRICULATING AT THE COLLEGE, ALL FUNDS ISSUED TO STUDENTS ARE REQUIRED TO DEFRAY THE COST OF TUITION AND NO STUDENT MAY USE THE FUNDS FOR OTHER THAN EDUCATIONAL PURPOSES SINCE THE STUDENTS HAVE NO DISCRETION IN THE USE OF THE FUNDS, THE COLLEGE DOES NOT NEED TO MONITOR THE GRANTS ONCE ISSUED									
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	THE COLLEGE PROVIDES SCHOLARSHIPS TO STUDENTS MATRICULATING AT THE COLLEGE, ALL FUNDS ISSUED TO STUDENTS ARE REQUIRED TO DEFRAY THE COST OF TUITION AND NO STUDENT MAY USE THE FUNDS FOR OTHER THAN EDUCATIONAL PURPOSES SINCE THE STUDENTS HAVE NO DISCRETION IN THE USE OF THE FUNDS, THE COLLEGE DOES NOT NEED TO MONITOR THE GRANTS ONCE ISSUED									

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

DLN: 93493134039416

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 North Central College

Employer identification number

36-2169157

			30-2109137			
Pa	rt I Questions Regarding Compensati	ion				
			1		Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part 1		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	<u>~</u>	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex	2	Yes			
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all used by a related organization to establish compe	that appl				
	▼ Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	0, Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contr	ol paymen	nt?	4a		No
ь	Participate in, or receive payment from, a supplen	nental non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity			4c		No
	If "Yes" to any of lines 4a-c, list the persons and					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organic	zations m	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of					
а	The organization?			5a		No
ь	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
Ь	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,			7		No
8	Were any amounts reported in Form 990, Part VII					
-	subject to the initial contract exception described		itions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow section 53 4958-6(c)?	the rebutt	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-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
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
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	VALUE OF HOUSING PROVIDED TO THE PRESIDENT OF THE COLLEGE (NON-TAXABLE) IRS INSTRUCTIONS TO FORM 990, PART VII, SECTION A AND SCHEDULE J, PART II AS A CONDITION OF EMPLOYMENT, THE PRESIDENT OF NORTH CENTRAL COLLEGE IS REQUIRED TO RESIDE ON THE CAMPUS PREMISES THE RESIDENCE SERVES BOTH AS A PERSONAL RESIDENCE AS WELL AS A VENUE FOR REGULAR CARRYING ON OF COLLEGE BUSINESS THE COLLEGE HAS DETERMINED THAT THE VALUE OF THE USE OF THIS PERSONAL RESIDENCE IS NOT CONSIDERED TAXABLE INCOME TO THE PRESIDENT AS PROVIDED FOR IN INTERNAL REVENUE CODE SECTION 119 FOR TAX YEAR 2014, THE VALUE OF THE PRESIDENT'S USE OF THE RESIDENCE CONSERVATIVELY ESTIMATED TO BE \$51,300 THIS ESTIMATED VALUE IS BASED ON THE FAIR RENTAL VALUE OF \$4,275 PER MONTH FOR SIMILAR HOUSES IN THE AREA DURING CALENDAR YEAR 2014, SCHEDULE J, PART II, COLUMN (D) INCLUDES \$51,300 OF NON-TAXABLE INCOME ASSOCIATED WITH THE USE OF THE RESIDENCE PROVIDED BY THE COLLEGE
Schedule J, Part I, Line 1a Health or social club dues or initiation fees	TROY HAMMOND, COLLEGE PRESIDENT, INCURS EXPENSES FOR COUNTRY CLUB DUES IN THE AMOUNT OF \$3,873, SOCIAL CLUB DUES IN THE AMOUNT OF \$1,200 AND NON-TAXABLE AUTO OF \$3,875 SUCH PAYMENTS ARE GENERALLY PROVIDED BASED ON THE PROVISIONS OF A SERVICES AGREEMENT THE PAYMENTS FOR SUCH ITEMS ARE NONTAXABLE TO THE PRESIDENT, AS THEY ARE USED FOR COLLEGE BUSINESS
Schedule J, Part I, Line 1a Personal services	SCHEDULE J, PART I, LINE 1A CLEANING SERVICES AN OUTSIDE SERVICE IS USED AS NEEDED TO PROVIDE CLEANING SERVICES NECESSARY FOR THE FUNCTION OF THE PRESIDENT'S HOUSE THE PAYMENT FOR SUCH ITEMS ARE TAXABLE TO THE PRESIDENT FOR THE PERSONAL SPACES OF THE HOUSE
Schedule J, Part I, Line 4b Supplemental nonqualified retirement plan	EFFECTIVE NOVEMBER 1, 2013, THE COLLEGE ESTABLISHED A NEW 457(B) DEFERRED COMPENSATION PLAN WITH THE PRESIDENT AND VICE PRESIDENTS. THE COLLEGE IS CONTRACTUALLY OBLIGATED TO MAINTAIN THESE BALANCES IN SEPARATE ACCOUNTS, AS ELECTED BY THE PARTICIPANTS. THESE ACCOUNTS ARE INCLUDED IN THE COLLEGE'S INVESTMENT SECURITIES AND ARE AVAILABLE TO THE GENERAL CREDITORS. THE PLAN IS FUNDED BY THE PARTICIPANTS. THE COLLEGE DOES NOT FUND THE PLAN AT THIS TIME. THE INDIVIDUALS LISTED BELOW HAD THE FOLLOWING ACCOUNT VALUES AT JUNE 30, 2015. DR. TROY HAMMOND, PRESIDENT \$37,850, MR. PAUL LOSCHEIDER, VP. FOR BUSINESS AFFAIRS. \$38,588, MR. R. D. PANDIAN, VP. FOR ACADEMIC AFFAIRS. \$36,893, MS. KIMBERLY. SLUIS, VP. FOR STUDENT. AFFAIRS. AFFA

Schedule J (Form 990) 2014

Additional Data

(A) Name and Title

Software ID: 14000329

Software Version: 2014v1.0

EIN: 36-2169157

Name: North Central College

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

(B) Breakdown of W-2 and/or 1099-MISC compensation

	(i) Base (ii) Bonus & Compensation incentive compensation		incentive	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
MR TROY HAMMOND PRESIDENT	(I) (II)	254,821 0	50,000 0	26,926 0	22,100 0	87,507 0	441,354 0	0
MR PAUL LOSCHEIDER VP FOR BUSINESS AFFAIRS	(I) (II)	169,627 0	18,750 0	19,448 0	20,774 0	19,731 0	248,330 0	0
DR R DEVADOSS PANDIAN VP FOR ACADEMIC AFFAIRS	(I) (II)	182,707 0	25,000 0	20,071 0	21,514 0	12,679 0	261,971 0	0 0
MR RICK E SPENCER VP INSTITUTIONAL ADVANCEMENT	(I) (II)	188,802 0	18,750 0	1,940 0	20,714 0	19,879 0	250,085 0	0 0
MR MARTIN SAUER VP FOR ENROLLMENT MANAGEMENT AND ATHLETICS	(I) (II)	167,319 0	18,750 0	508 0	16,504 0	18,918 0	221,999 0	0
MS KIMBERLY SLUIS VP FOR STUDENT AFFAIRS AND DEAN OF STUDENTS	(I) (II)	126,076 0	18,750 0	3,090 0	11,719 0	1,443 0	161,078 0	0
MATTHEW BURDEN ASSISTANT VICE PRESIDENT/CIO	(I) (II)	133,058 0	6,000 0	294 0	12,081	19,675 0	171,108 0	0
DR MARTI BOGART PROF OF ECON/ASSOCIATE DEAN	(I) (II)	137,674 0	6,000 0	790 0	14,214 0	27,499 0	186,177 0	0
DR FRANCINE NAVAKAS PROF OF ENGLISH/ASSOCIATE DEAN	(I) (II)	144,330 0	3,000 0	1,570 0	15,925 0	15,327 0	180,152 0	0
BRUCE NORTELL DIRECTOR OF PLANNED GIVING	(I) (II)	130,099 0	1,250 0	1,219 0	13,608 0	7,257 0	153,433 0	0
DR RICHARD WILDERS PROF OF MATH/ASSOCIATE DEAN	(I) (II)	153,436 0	500 0	1,600	16,017 0	14,417 0	185,970 0	0

(C) Retirement and

(D) Nontaxable (E) Total of columns

(F) Compensation in

DLN: 93493134039416

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

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** Employer identification number

	th Central College	rth Central College								ac at cot 57					
							3	6-21691	.5/						
Pa	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g)	be		behalf of		Pool ncing			
							Yes	. No	Yes	uer No	Yes	No			
A	ILLINOIS FINANCE AUTHORITY	86-1091967	45200FNS4	10-16-2008	17,000,000	SEE SUPPLEMENTAL INFORMATION			Х			X			
В	ILLINOIS FINANCE AUTHORITY	86-1091967	452001Q86	05-31-2005	21,200,000	SEE SUPPLEMENTAL INFORMATION			Х		Х				
c _	ILLINOIS FINANCE AUTHORITY	86-1091967	452001ZF0	05-31-2005	36,500,000	SEE SUPPLEMENTAL INFORMATION	×		Х		Х				
D_	Illinois Finance Authority	86-1091967		12-04-2014	33,953,000	SEE SUPPLEMENTAL INFORMATION		X				×			
Pa	Trill Proceeds														
					Α	В		С			D				
1	A mount of bonds retired					0 3,400,000		7,00	0,000						
2	A mount of bonds legally defe	ased			17,000	,000 10,000,000		14,500,00							
3	Total proceeds of issue				17,000	,000 21,200,000		36,500,000			33,	953,000			

		- 1	- / · /	. //	
2	A mount of bonds legally defeased	17,000,000	10,000,000	14,500,000	
3	Total proceeds of issue	17,000,000	21,200,000	36,500,000	33,953,000
4	Gross proceeds in reserve funds	0	0		
5	Capitalized interest from proceeds	105,630	0		
6	Proceeds in refunding escrows	0	21,200,000	36,500,000	31,505,589
7	Issuance costs from proceeds	289,481	0		203,325
8	Credit enhancement from proceeds	420,342	0		
9	Working capital expenditures from proceeds	0	0		
10	Capital expenditures from proceeds	16,351,973	0		
11	O ther spent proceeds	64,900	0		2,249,675
12	O ther unspent proceeds	0	0		
13	Year of substantial completion	2009	2000	•	2014

12	Other unspent proceeds		0		0			1	
13	Year of substantial completion	20	09	20	00			2014	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	Х		X		Х	
15	Were the bonds issued as part of an advance refunding issue?		Х		Х		Х		×
16	Has the final allocation of proceeds been made?	Х		Х		Х		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х		Х		Х		×	
Par	Private Business Use								

	1111410 240111000 000											
		A		В		С			0			
		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?		×		×		×		X			
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X			

Page 2 Part IIII Private Business Use (Continued) В С D Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ Χ of bond-financed property? 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 Χ Χ Χ Х property? Are there any research agreements that may result in private business use of bond-Χ Χ Х Χ financed property? 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? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government 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 Total of lines 4 and 5 6 0 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Х Χ 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 Χ Χ Χ Χ If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В С D Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Χ Χ Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due yet? а Χ Exception to rebate? b Χ Χ Х No rebate due? Χ Χ c If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? BANK OF AMERICA BANK OF AMERICA Name of provider NΑ NΑ Term of hedge 299 200 100 Was the hedge superintegrated? d Χ Χ Χ Was the hedge terminated? Χ Χ Х

Part IV	Arbitrage	(Continued)
---------	-----------	-------------

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
Schedule K, Part V PROCEDURES	NORTH CENTRAL COLLEGE HAS NOT VIOLATED ANY APPLICABLE REQUIREMENTS FOR TAX EXEMPT BONDS BENEFITING THE COLLEGE THE
TO UNDERTAKE CORRECTIVE	COLLEGE WORKED WITH BOND COUNSEL TO ESTABLISH WRITTEN PROCEDURES TO ENSURE TIMELY INDENTIFICATION OF FEDERAL TAX
ACTION	REQUIREMENTS AND TIMELY CORRECTION OF ANY IDENTIFIED VOILATIONS

Return Reference	Explanation
Schedule K, Part I, Column (f) DESCRIPTION OF PURPOSE - 45200FNS4	THE BONDS WERE ISSUED TO FINANCE OR REIMBURSE THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF CERTAIN EDUCATIONAL FACILITIES

Return Reference	Explanation
Schedule K, Part I, Column (f) DESCRIPTION OF PURPOSE - 452001Q86	THE 1999 BONDS (DEFINED BELOW) WERE ISSUED TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS THE BONDS WERE ISSUED IN THE AMOUNT OF \$21,200,000 NORTH CENTRAL COLLEGE BENEFITTED FROM \$10,000,000 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 TO BE 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 NORTH CENTRAL COLLEGE WERE USED TO FINANCE OR REIMBURSE THE COSTS OF THE ACQUISITION, CONTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES

Return Reference	Explanation
Schedule K, Part I, Column (f) DESCRIPTION OF PURPOSE - 452001ZF0	THE 1998 BONDS (DEFINED BELOW) WERE ISSUED TO PROVIDE FUNDS TO SEVERAL SECTION 501(C)(3) NONPROFIT ORGANIZATIONS NORTH CENTRAL COLLEGE BENEFITTED FROM \$15,000,000 OF THE PROCEEDS OF THE BONDS THE BONDS WERE ISSUED IN THE AMOUNT OF \$36,500,000 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 TO BE 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 NORTH CENTRAL COLLEGE, WERE USED TO FINANCE FOR REIMBURSEMENT OF THE COSTS OF THE ACQUISITION, CONSTRUCTION, RENOVATION, IMPROVEMENT AND EQUIPPING OF EDUCATIONAL FACILITIES IN APRIL OF 2006, NORTH CENTRAL COLLEGE PAID \$500,000 OF PRINCIPAL, THEREFORE \$14,500,000 IS STILL OUTSTANDING

Return Reference	Explanation
Schedule K, Part I, Column (f) DESCRIPTION OF PURPOSE - SERIES 2014A	The bonds were issued to refund all outstanding bonds issued in 2008, \$17,000,000, 1998, \$14,500,000 and the 2008 Bonds' swap termination \$2,249,675

Return Reference	Explanation
Schedule K, Part I, Column (f) DESCRIPTION OF PURPOSE - SERIES 2014B	The bonds were issued to refund the 1999 bonds, \$10,000,000, and to finance the planning, design, acquisition, construction, furnishing and equipping of a new residence hall, \$22,000,000

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

DLN: 93493134039416OMB No 1545-0047

2014

Open to Public Inspection

	rnal Revenue Service	►Informati	on about Schedule	e K (Form 990) and i	ts instructions	s is at 1	<u>www.i</u>	rs.gov/fori	<u>n 990</u> .				Inspec	ction	
Nam	e of the organization									Em	ployer id	entifica	ation nun		
Nor	th Central College									36	-21691	57			
Pa	art I Bond Issues	_					_								
	(a) Issuer name (b) Issuer EIN		(c) CUSIP #	(d) Date issued	(e) Issue price (f)) Description	n of purpose	(g) De	feased	1 ' '		(i) Pool		
												l	alf of suer	ппа	ncing
										Yes	No	Yes	No	Yes	No
Α	Illinois Finance Authority	86-1091967		12-04-2014	32,206	5,000	SEE S	SUPPLEMEN RMATION	TAL		Х				Х
Pa	rt III Proceeds						1111 0								l
						4		I	в		С			D	
1	Amount of bonds retired												ı		
2	Amount of bonds legally defe	ased											ı		
3	Total proceeds of issue					32,20	6,000								
4	Gross proceeds in reserve fu	ınds											ı		
5	Capitalized interest from pro-	ceeds													
6	Proceeds in refunding escrov	NS				10,00	0,000								
7	Issuance costs from proceeds				206,000							ı			
8	Credit enhancement from pro	oceeds											1		
9	Working capital expenditures	from proceeds													
10	Capital expenditures from pr	oceeds				22,00	0,000						1		
11	Other spent proceeds												·		
12	Other unspent proceeds												1		
13	Year of substantial completion	on			20	14			•						
					Yes	N	No	Yes	No	Yes	N	10	Yes		No
14	Were the bonds issued as pa	rt of a current refund	ing issue?		X										
15	Were the bonds issued as pa	rt of an advance refu	nding issue?			>	х								
16	Has the final allocation of pro	oceeds been made?			Х										
17	Does the organization mainta allocation of proceeds?	aın adequate books a	nd records to sup	port the final	X										
Pa	rt IIII Private Business	Use													
					<i>Y</i> = 2				B No.		C			D	N
1	Was the organization a partno property financed by tax-exe		ra member of an I	LLC, which owned	Yes		lo X	Yes	No	Yes		lo	Yes		No
	Are there any lease arranger	ments that may resul	t in private busine	ess use of bond-			,								

financed property?

Χ

Par	Private Business Use (Continued)									
				4		В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private by of bond-financed property?	usiness use	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?									
С	Are there any research agreements that may result in private business use of bond-financed property?			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					•		•		•
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5			0 %						
7	Does the bond issue meet the private security or payment test?			Х						
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						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or di	isposed 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 nonque bonds of the issue are remediated in accordance with the requirements unde Regulations sections 1 141-12 and 1 145-2?		X							
Par	t IV Arbitrage									
		Α			В		С		D	
		Yes	No	Yes	No	<u> </u>	'es	No	Yes	No
1	Has the Issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X							
2	If "No" to line 1, did the following apply?									
a	Rebate not due yet?	Χ								
b	Exception to rebate?									
С	No rebate due?									
	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?	Χ								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X								
b		PNC Bank Na Association	ational							
c	Term of hedge		29 5							
d	Was the hedge superintegrated?		Х							
е	Was the hedge terminated?		X							

No

Pai	Talv Arbitrage (Continued)								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		Х						
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?		Х						
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В		c		D	

Χ

Α		В		С		
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?

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

Schedule K (Form 990) 2014

Yes

DLN: 93493134039416

OMB No 1545-0047

Transactions with Interested Persons Schedule L

(Form 990 or 990-EZ)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** North Central College 36-2169157 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

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

2	Enter the amount of tax incurred by organization managers or disqualified persons during the year under section
	4958
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	 (d) Loan or from th organization	ne	(e)Original principal amount	(f) Balance due	(g) defau	ılt?	(h) Approv by boar commit	d or	(i)Writi agreeme	
		То	From			Yes	No	Yes	No	Yes	No
											·

Total	₽ \$					i	
Part IIII Grants or A							
Complete if t	he organization answered	l "Yes" on Form 990, Par	t IV, line 27.				
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance	(d) Type of a	assistance	(e) Purpose	e of assistance	
(1) NA	N/A	3,323	MERIT BASED	ı	SCHOLARSI	HIP	

t IV	Business	Transactions	Involving	Interested	Persons.
------	----------	---------------------	-----------	------------	----------

. ,					9
Part IV Business Transactions Complete if the organiza	s Involving Interested tion answered "Yes" on F		ne 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
				Yes	No
(1) KEVIN GENSLER	BOARD MEMBER	60,648	LAW SERVICES	Yes	
(2) DAVID KELSCH	BOARD MEMBER	341,972	TECHNOLOGY	Yes	
(3) RAY KINNEY	BOARD MEMBER	339,901	PRINTING SERVICES	Yes	
(4) ROBERT WISLOW	BOARD MEMBER	282,554	PROFESSIONAL SERVICES	Yes	
(5) SCOTT WEHRLI	BOARD MEMBER	5,259,239	CONSTRUCTION SERVICES	Yes	
(6) LEAH RIPPE	BOARD MEMBER	9 240	ADVERTISING	Yes	

Return Reference Schedule L, Part III GRANTS OR ASSISTANCE BENEFITING INTEREST IN TOBJECTIVELY ISCHOLARSHIPS ASSESSMENT OF SIMILAR STAND WITH ANY POTSELECTION PRESCRICTORY Schedule L, Part IV BUSINESS TRANSACTIONS WITH PARTNER OF THE INTERESTED PERSONS Schedule L, Part IV BUSINESS TRANSACTIONS WITH PARTNER OF THE PARTNER OF THE PARTNER OF THE PARTNER OF THE PROVIDED TO THE BOARD OF ADVANCED DATECH \$341,972 TRANSACTION INC WAS CONDITO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PERSONAL PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PERSONAL PER		9,240 ADVERTISI	NG	Yes				
Return Reference Schedule L, Part III GRANTS OR ASSISTANCE BENEFITING INTEREST IN T OBJECTIVELY I SCHOLARSHIP: ASSESSMENT OF SELECTION PR Schedule L, Part IV BUSINESS KEVIN GENSLE TRANSACTIONS WITH PARTNER OF THE INTERESTED PERSONS Schedule L, Part IV BUSINESS KEVIN GENSLE TRANSACTIONS WITH PARTNER OF THE INTERESTED PERSONS CORRIGAN, & B PROFESSIONAL COLLEGE AND BERNHARD, LTI PROVIDED TO THE BOARD OF ADVANCED DATECH \$341,972 TRANSACTION INC WAS CONDITO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUBSTANTIAL OFFICER OF MAMINUTEMAN PROVIDED TO THE COLLEGOF NORTH CENSUS TO THE COLLEGOF NORT	to be annothing on Cabada to the							
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Schedule L, Part III GRANTS OR ASSISTANCE BENEFITING INTERESTED PERSONS DBJECTIVELY I SCHOLARSHIP: ASSESSMENT C SIMILAR STANI WITH ANY POT SELECTION PR Schedule L, Part IV BUSINESS TRANSACTIONS WITH INTERESTED PERSONS KEVIN GENSLE CORRIGAN, & B PROFESSIONAL COLLEGE AND BERNHARD, LTI PROVIDED TO THE BOARD OF ADVANCED DA TECH \$341,972 TRANSACTION INC WAS COND TO THE COLLEGE OF NORTH CEN SUBSTANTIAL OFFICER OF MA MINUTEMAN PF FISCAL YEAR 2 BUSINESS TRA GROUP, AND BI VALUE PRICE V WISLOW IS A T CHAIRMAN/CEC PAID \$157,554	s to questions on semedure i	Explanation						
TRANSACTIONS WITH INTERESTED PERSONS CORRIGAN, & B PROFESSIONAL COLLEGE AND BERNHARD, LTI PROVIDED TO THE BOARD OF ADVANCED DA TECH \$341,972 TRANSACTION INC WAS COND TO THE COLLEG OF NORTH CEN SUBSTANTIAL OFFICER OF MA MINUTEMAN PERSONNEL GROUP, AND BE VALUE PRICE V WISLOW IS A T CHAIRMAN/CEG PAID \$157,554	ERE MAY BE RECIPIENTS V HE INSTITUTION, SUCH RI DETERMINABLE BASIS WIT S AND FELLOWSHIPS ARE I ON THE BASIS OF ACADEM DARDS ANY SCHOLARSHI ENTIAL RECIPIENT OF SCI	ECIPIENTS ARE SEL H OTHER RECIPIEN JUDGED WORTHY BY IC ACHIEVEMENT, P COMMITTEE MEM HOLARSHIP MONEY ULAR CANDIDATE	ECTED ON AN EQUA ITS ALL STUDENTS F THE INSTITUTION' FINANCIAL NEED AN BER WHO HAS A REL IS NOT INCLUDED I	L, RECEIV S ID OTH ATION! N THE	ER SHIP			
EQUITIES REAL VALUE PRICE V A TRUSTEE OF DUKANE PRECA \$4,030,476 TO CONSTRUCTIO TRANSACTION NAPERVILLE EX PRICE WAS PRO TRUSTEE OF TH NAPERVILLE M FOR MAGAZINE TRANSACTION CONDUCTED A COLLEGE FOR T INTERESTED PI COLLEGE HIS I RELATIONSHIP EMPLOYS ANDE RELATIONSHIP SALARY ARE NO SERVICES PRO PERSON DUE T EMPLOYMENT A ARE AT FAIR V WHITE WHO IS TRUSTEE OF TH	R IS A TRUSTEE OF THE BOTE LAW FIRM DOMMERMUT BERNHARD, LTD DURING TO LISERVICES THE BUSINES DOMMERMUTH, COBINE, WO WAS CONDUCTED AT AR THE COLLEGE FOR SERVICE TA TECHNOLOGIES INC NORTH CENTRAL COLLEGE TO THE SERVICES PROJECTED AT ARM SERVICES IN RELATION BETWEEN NORTH CONTROLOGIES FOR THE BOARD OF NORTH CENTRAL COLLEGE AND SERVICES IN RELATION SETWEEN NORTH CENTRAL ADVERTISEMENTS DURING SETWEEN NORTH CENTRAL ADVERTISEM	H, COBINE, WEST, CHE 2015 FISCAL YEAS TRANSACTION BEVEST, GENSLER, PHIM'S LENGTH AND A CES PROVIDED DAVE, HE IS ALSO THE LORTH CENTRAL COVICES DURING FISCAL COLLEGE AND AD A PAIR MARKING OF A PRINCIPAL OF MPANY ADDITION, ING COLOR NORTH ROUP \$70,090, AND A GROUP \$70,090, AND \$125,000 TO A SETWEEN NORTH CONDUCTED AT AR A COLLEGE FOR SERVICES PROUP AND A GROUP \$70,090, AND A GROUP \$70,0	GENSLER, PHILIPCHUAR, NCC PAID \$60,65 ETWEEN NORTH CEN LIPCHUCK, CORRIGA FAIR MARKET VALUE VID KELSCH IS A TRU PRESIDENT AND CEO LLEGE PAID ADVAN CALYEAR 2015 THE DVANCED DATA TEC ET VALUE PRICE WA EY IS A TRUSTEE OF MINUTEMAN PRESS ALLY, RAY KINNEY IS H CENTRAL COLLEGE D BLOOMING COLOR RANSACTION OF \$3 GE, MINUTEMAN PRI SCURING 2015 FISCAL COLLEGE HE IS ALSO CURING 2015 FISCAL CORRE, INC FOR PRO I CENTRAL COLLEGE M'S LENGTH AND A FAIR RVILEE PROVIDED SCOTE EIS ALSO PART OWN 2015 FISCAL YEAR, INC CORY THE BUSINESS OUKANE PRECAST AN INTERIOR TO THE PUBLI APERVILLE MAGAZIN ENTILE EXCAVATING CORY THE BUSINESS OUKANE PRECAST AN INTERIOR THE PUBLI APERVILLE MAGAZIN ENTILE MAGAZ	JCK, FOR A PRICE STANDARD DE S	E WAS DF ATA ESS GIES /IDED ATA ESS GIES /IDED ATA ESS GIES /IDED ATA ESS ARD			

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DLN: 93493134039416

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶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.

Noncash Contributions

Open to Public Inspection

	Central College				cmp	oyer identii icat	ion nu	mber	
					36-2	169157			
Pa	rt I Types of Property								
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) Method of de noncash contrib	etermi		ts
1	Art—Works of art								
2	Art—Historical treasures .								
3	Art—Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities—Publicly traded .	Х	28	3,636,629	Mark	et value			
10	Securities—Closely held stock .								
11	Securities—Partnership, LLC, or trust interests								
12	Securities—Miscellaneous								
13	Qualified conservation contribution—Historic structures								
14	Qualified conservation contribution—Other								
15	Real estate—Residential .								
16	Real estate—Commercial								
17	Real estate—O ther								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies .								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► ()								
	O ther ▶()								
27	O ther ▶()								
28	O ther ▶ ()								
29	Number of Forms 8283 received for which the organization comple				29				0
								Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 thi	ough 28, that			
	ıt must hold for at least three ye	ars from the	e date of the initial contribu	ition, and which is not requ	ired to	be used			
	for exempt purposes for the enti	re holding p	period?				30a		Νo
b	If "Yes," describe the arrangem	ent in Part 1	II						
31	Does the organization have a gi	ft acceptand	ce policy that requires the i	review of any non-standard	conti	ributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	les or related organizations	to solicit, process, or sell	nonca	ash 	32a		No
b	If "Yes," describe in Part II								
	If the organization did not report	t an amount	: in column (c) for a type of	property for which column	(a) ıs	checked,			

describe in Part II

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493134039416

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and it

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

Name of the organization
North Central College

36-2169157

Form 990, Part III, Line
1 ORGANIZATION'S
MISSION

NORTH CENTRAL COLLEGE IS A COMMUNITY OF LEARNERS DEDICATED TO PREPARING STUDENTS TO BE
INFORMED, INVOLVED, PRINCIPLED AND PRODUCTIVE CITIZENS AND LEADERS OVER THEIR LIFETIME. IN 2014-2015,
THE COLLEGE SERVED 3,043 FULL AND PART-TIME STUDENTS 33 STATES AND U S TERRITORIES AND 40 FOREIGN
COUNTRIES ARE REPRESENTED IN OUR STUDENT POPULATION ABOUT 1,5000 STUDENTS RESIDE ON THE COLLEGE
CAMPUS EACH TERM NORTH CENTRAL COLLEGE CONFERRED 735 UNDERGRADUATE DEGREES AND 101
MASTER'S DEGREES IN THE 2014-2015 ACADEMIC YEAR THE COLLEGE ALSO SERVED 2,564 PEOPLE IN NONCREDIT EDUCATIONAL AND COMMUNITY PROGRAMS

Return Reference	Explanation
Form 990, Part VI, Line 1a MATERIAL DIFFERENCES IN MEMBERS' VOTING RIGHTS	THERE WERE 33 VOTING MEMBERS AT THE BEGINNING OF FISCAL YEAR 2015 AND 35 VOTING MEMBERS AT THE END OF FISCAL YEAR 2015. THE PRESIDENT AND 8 OTHER MEMBERS OF THE BOARD HAVE A CONFLICT BASED ON THE CRITERIA PROVIDED EXECUTIVE COMMITTEE CHAIR. THERE SHALL BE AN EXECUTIVE COMMITTEE OF UP TO THIRTEEN MEMBERS, COMPOSED OF THE CHAIR, THE FOUR VICE-CHAIRS, THE SECRETARY, THE AUDIT COMMITTEE CHAIR, THE PRESIDENT OF THE COLLEGE AND UP TO FIVE AT-LARGE MEMBERS. A QUORUM SHALL CONSIST OF SEVEN MEMBERS DUTIES THE EXECUTIVE COMMITTEE SHALL TRANSACT SUCH BUSINESS AS MAY BE REFERRED TO IT BY THE BOARD OF TRUSTEES, AND ANY OTHER BUSINESS WHICH THE INTERESTS OF THE COLLEGE MAY REQUIRE DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD IT SHALL HOLD SUCH MEETINGS AS IT MAY DEEM DESIRABLE, AND SHALL KEEP AN ACCURATE RECORD OF ITS PROCEEDINGS AND RECEIVE APPROVAL OF THESE MINUTES AT THE NEXT REGULARLY SCHEDULED MEETING OF THE BOARD AND TO SUCH OTHER PERSONS AS THE COMMITTEE MAY DESIGNATE. THE COMMITTEE SHALL ANNUALLY SET BY JUNE 30 THE SALARY AND BENEFITS TO BE PROVIDED THE PRESIDENT OF THE COLLEGE FOR THE FOLLOWING FISCAL YEAR.

Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	JEFF OESTERLE AND SCOTT WHERLI - Business relationship, KEVIN GENSLER, RAY KINNEY, AND SCOTT WEHRLI - Business relationship

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	A REVIEW WAS CONDUCTED PRIOR TO FILING THE 990 WITH THE IRS THE ASSISTANT VP OF FINANCE/CONTROLLER AND ASSISTANT CONTROLLER GATHER ALL INFORMATION FROM VARIOUS AREAS OF THE COLLEGE AND SUBMIT TO TAX PROFESSIONALS FOR THE FIRST DRAFT OF THE 990 THE ASSISTANT VP OF FINANCE/CONTROLLER AND ASSISTANT CONTROLLER REVIEW AND MAKE NECESSARY CHANGES THE SECOND DRAFT WAS REVIEWED BY THE VP FOR BUSINESS AFFAIRS AND THE COLLEGE PRESIDENTS AGAIN, UPDATES AND CHANGES WERE MADE IF NECESSARY A FINAL DRAFT WAS SENT VIA EMAIL TO ALL VOTING BOARD MEMBERS FOR THEIR REVIEW IF ANY CHANGES WERE REQUIRED AFTER BOARD REVIEW, THEY WERE SENT TO THE TAX PROFESSIONALS FOR INCORPORATION INTO THE FORM 990

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	THE CONFLICT OF INTEREST STATEMENTS ARE SENT TO EACH BOARD MEMBER WITH THE MAY BOARD PACKET, WHICH INCLUDES READING MATERIALS FOR THE UPCOMING MEETING ALL BOARD MEMBERS ARE EXPECTED TO RETURN THE CONFLICT OF INTEREST STATEMENTS AT THE MAY BOARD MEETING, IF NOT SOONER A PROCESS HAS BEEN ESTABLISHED TO FOLLOW UP WITH ANY MEMBERS WHO HAVE NOT RETURNED THE CONFLICT OF INTEREST STATEMENTS WITH THE GIVEN PARAMETERS THE COLLEGE MONITORS CONFLICTS OF INTEREST BY SENDING OUT A QUESTIONNAIRE ANNUALLY, AS WELL AS AT EVERY MEETING THE QUESTION IS RAISED IF A CONFLICT ARISES IF A CONFLICT ARISES, THAT INDIVIDUAL IS PROHIBITED FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS IN THE TRANSACTION UNDER DISCUSSION

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	THE COMPENSATION COMMITTEE (A SUB-COMMITTEE OF THE BOARD) IS RESPONSIBLE FOR DETERMINING THE PRESIDENT'S SALARY AND REVIEWING THE VICE PRESIDENT'S SALARIES THE COMPENSATION COMMITTEE WORKS WITH HUMAN RESOURCES (AND POSSIBLY OUTSIDE CONSULTANTS) TO OBTAIN COMPARABLE SALARY/BENEFIT DATA FROM ORGANIZATIONS SUCH AS COLLEGE AND UNIVERSITY PERSONNEL ASSOCIATION (CUPA), IN ORDER TO ESTABLISH APPROPRIATE SALARY/BENEFIT PACKAGES THE COMPENSATION COMMITTEE CONSISTS OF THE CHAIR OF THE BOARD AND TWO ACTIVE TRUSTEES, WHO ARE NOT RELATED TO THE PRESIDENT OR VICE PRESIDENTS AND DO NOT PERFORM MANAGEMENT-DIRECTED SERVICES TO THE COLLEGE. THE COLLEGE HAS AN ANNUAL REVIEW OF THEIR COMPENSATION PROCESS ANNUALLY, THE EXECUTIVE COMMITTEE REVIEWS THE COMPENSATION COMMITTEE'S RECOMMENDATIONS AND APPROVES THE PRESIDENT'S COMPENSATION THE VICE PRESIDENTS' COMPENSATION IS BROUGHT BEFORE THE BOARD OF TRUSTEES IN AN EXECUTIVE SESSION AT THE FALL MEETING CONTEMPORANEOUS DOCUMENTATION IS MAINTAINED FOR ALL COMPENSATION DECISIONS

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	SEE NARRATIVE FOR LINE 15A

Return Reference	Explanation
documents available to the public	THE CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND PUBLIC DISCLOSURE COPIES OF THE 990 AND 990T ARE AVAILABLE TO THE PUBLIC AT NORTH CENTRAL COLLEGE'S WEBSITE WWW NOCTRL EDU

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	Vending - Total Revenue 14984, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 14984,

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Change in Fair Value of Interest Rate Swap Agreement1739098, Change in Value of Split-Interest Agreement82246,