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DLN: 93493043019696

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A F	or the	2014 ca	alendar year, or tax year beginni	ng 07-01-2014 , and ending 06-30-2	2015		_	
B Ch	eck if a	applicable	C Name of organization KNOX COLLEGE			D Emplo	yer ide	ntification number
┌ Ad	dress cl	hange	KNOX COLLEGE			37-06	7351	3
Пиа	me cha	anae	Doing business as			_	,, ,,,,,,	.
	tıal retu	_	boing basiness as					
Fir		••••	Number and street (or P O box if	mail is not delivered to street address) Room	n/suite	E Telepho	one num	nber
		mınated	2 E South Street			(309)	341-7	7212
┌ An	nended	return		ountry, and ZIP or foreign postal code		_		
Гар	plicatioi	n pending	Galesburg, IL 614014999			G Gross r	eceipts	\$ 100,788,001
			F Name and address of pr	rincipal officer	H(a) Is	 this a group	return	for
			TERESA LAMOTT			ordinates?	retuii	r Yes ▽ No
			2 EAST SOUTH STREET OFFICE OF THE PRESIDE	NT				
			GALESBURG, IL 6140149			e all subordı luded?	nates	┌ Yes ┌ No
I Ta	ax-exen	npt statu:	s 501(c)(3) 501(c)()	(insert no) 4947(a)(1) or 527			a lıst	(see instructions)
1 W	/ehsit/	e• • w/	ww knox edu		一、。。	aun avamnt		mhar k
					1	oup exempt		
		_	n 🔽 Corporation Trust Associat	tion Other 🕨	L Year of	formation 18	37 M	State of legal domicile IL
Pa	rt I	Sur	nmary					
				sion or most significant activities				
				a liberal arts education to students fr of our learning environment, our resid				
3		till dag.	- car carried and fine character	or our rearring environment, our resta	circiai campas	carcare, arre		Jiiiii y
Ē								
E E								
Governance	2	Check	this box 🔭 if the organization (discontinued its operations or dispose	ed of more than	1 25% of its	net as	ssets
	3	Numbe	r of voting members of the gove	rning body (Part VI, line 1a)		_	з	55
<u>8</u>				s of the governing body (Part VI, line			4	54
乭				n calendar year 2014 (Part V, line 2a			5	1,621
Activities &				necessary)			6	700
•			·	Part VIII, column (C), line 12			7a	65,551
	1			from Form 990-T, line 34			7b	-5,308
	+ -			.,		rior Year	1 / 5	Current Year
	8	Cont	ributions and grants (Part VIII.	line 1h)		23,280,	061	16,127,624
횰	9			line 2g)		65,158,	-	65,918,587
Ravenue	10			nn (A), lines 3, 4, and 7d)		5,114,4		10,069,932
걆	11), lines 5, 6d, 8c, 9c, 10c, and 11e)		, ,	0	0
	12	Total	l revenue—add lines 8 through 1	1 (must equal Part VIII, column (A),	line			
				<u> </u>		93,552,		92,116,143
	13			rt IX, column (A), lines 1–3)		29,310,		31,339,124
	14			IX, column (A), line 4)			0	0
ø	15	Salar 5-10	ries, other compensation, emplo	27,710,	977	28,459,301		
9 <u>9</u>	16a		essional fundraising fees (Part I)	_		0	0	
Expenses			fundraising expenses (Part IX, column (•			
ă	b				-			
	17			, lines 11a-11d, 11f-24e)		18,354,		19,715,365
	18		·	ust equal Part IX, column (A), line 25		75,376,		79,513,790
	19	Reve	nue less expenses Subtract lin	e 18 from line 12		18,176,		12,602,353
Not Assets or Fund Balances					Beginn	ing of Curre Year	nt	End of Year
9	20	Total	l assets (Part X, line 16)			195,133,0	000	197,820,060
8 8 B	21					50,706,		48,221,235
200	22			t line 21 from line 20		144,426,9		149,598,825
Pa	rt II		nature Block			, ,		, ,
				xamined this return, including accom	nanying schod	ulac and sta	temen	ts and to the hest of
				omplete Declaration of preparer (other				
prep	arer ha	as any l	knowledge					
		Tk			I	2016 02 12		
Sigi	•	Sıgı	nature of officer			2016-02-12 Date		
Her		'	th A Archer Treasurer					
			pe or print name and title					
		''	Print/Type preparer's name	Preparer's signature		heck I if	PTIN	
Pai	d	}	Firm's name	L	s	elf-employed		
	pare		Timi Silame 🔽			irm's EIN ►		
	Ωn		Firm's address ►		P	hone no		

May the IRS discuss this return with the preparer shown above? (see instructions) . .

┌Yes ┌No

Par	t III	Statement of Program Se Check if Schedule O contains a				
	Brick	fly describe the organization's mis		any mie m mis Part.		
1 Knov		ge is dedicated to providing a liber		s students from diver	so backgrounds. Our mission is	carried out through our
		, the character of our learning envi				carried out tillough our
2		he organization undertake any sig orior Form 990 or 990-EZ?				┌ Yes ┌ No
	If"Y€	es," describe these new services o	on Schedule O			
3	servi	he organization cease conducting, ices?			nducts, any program	┌ Yes ┌ No
	If"Y€	es," describe these changes on Sc	hedule O			
4	exper	cribe the organization's program se nses Section 501(c)(3) and 501(otal expenses, and revenue, if any	c)(4) organizations	are required to repor		
4a	(Cod	le) (Expenses \$	68,672,333	ıncludıng grants of \$	31,339,124) (Revenue \$	65,840,011)
	Knox teach Foun It wa popu back	ner Education Our mission is carried out the X College has a tradition of free inquiry, in the Kollege has a tradition of free inquiry, in the Market with the traditional street was so nour campus that Abraham Lincoln chalation that includes students from 48 states ground, members of the Knox community ents)	dependent thought, and s and places, stretch the opposed to slavery, Kno ose to denounce slaver es and 51 countries, 25°	I diverse perspectives Ou eir intellect and their talent ex was one of the first coll y on moral terms for the f % U S students of color, a	r students choose their own path towar is, blend thought with action, and fuse eges in the United States open to both irst time, during the 1858 Lincoln-Doug and individuals from every imaginable r	d a degree, guided by scholar imagination with initiative women and people of color las Debate With a campus eligious and socioeconomic
4b	(Cod	de) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4 c	(Cod	de) (Expenses \$		including grants of \$) (Revenue \$)
4d		er program services (Describe in s penses \$ 0	Schedule O) including grants of	f \$	0) (Revenue \$	0)
4e	Tota	al program service expenses 🕨	68,672,333			

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <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
L O	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
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	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L 5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
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		No
L 8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
L 9	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
L		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			.[~
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,920			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country FR, SP, UK 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
C	In 163, to fine 3a of 3b, did the organization merofin 0000-17	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		res	
·	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. 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		
	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.			
	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	, and a superior of the superi			

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

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

Se	ection A. Governing Body and Management						
					Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	55				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	54				
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No	
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No	
5							
6	Did the organization have members or stockholders?			6		No	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?	lby)	members, stockholders,	7b		No	
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the				
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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No	
Se	ection B. Policies (This Section B requests information about policies not	requ	ired by the Internal R	eveni	ıe Cod	e.)	
					Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νo	
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	erning body before filing	11a	Yes		
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	990				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 $$.			12a	Yes		
b	Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?	ly inte	erests that could give	12b	Yes		
c	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	12c	Yes		
13	Did the organization have a written whistleblower policy?			13	Yes		
14	Did the organization have a written document retention and destruction policy? .			14		Νo	
15	Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of th						
а	The organization's CEO, Executive Director, or top management official			15a	Yes		
b	Other officers or key employees of the organization			15b	Yes		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	orsim	nilar arrangement with a	16a		No	
b	If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	estep	s to safeguard the	16b			

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 - ►Keith A Archer
 - 2 E South Street
 - Galesburg, IL 614014999 (309) 341-7212

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)						(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	Ŧ			
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	1,672,616	0	139,351

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►9

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PJ Hoerr Inc 107 Commerce Place Peoria, IL 616045285	Construction	7,368,006
Lake Flato Architects Inc 311 3rd Street San Antonio, TX 78205	Architects	403,418
IES Suite 2300 33 West Monroe Street Chicago, IL 606035405	Off Campus Programs	336,710
Associated Colleges of the Midwest Suite 800 11 East Adams St Chicago, IL 60603	Off Campus Programs	304,290
Generation Branding NO 121 231 Front Street Brooklyn, NY 11201	Branding and Communication Consultants	293,462
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 of compensation from the organization ►29	who received more than	

Part V	1111	Statement o		es or note to any lin	o in this Dart VIII			
		Check if Schedi	ule O contains a respon	se 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
its its	1a	Federated cam		0				
iran Ioui	b	Membership du						
s, G Am	С		ents 1c					
Giff ilar	d	Related organiz		0				
ns, Sim	е	Government grants		2,241,507		ļ		
utio ier (f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	13,886,117				
trib Oth	g	Noncash contribute	ons included in lines	2,549,417		j		j
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f	🕍	16,127,624			
				Business Code				
Program Serwce Revenue	2a	TUITION AND FEES	5	611310	54,842,840	54,842,840	0	0
Revo	ь	AUXILIARY ENTERF	PRISESCATERING	722320	78,576	0	78,576	0
ıce	С	AUXILIARY ENTERF	PRISESPROGRAM	611710	9,484,935	9,484,935	0	0
Serv	d							
an	e	A.II I						
েণ্ড	f		am service revenue		1,512,236	1,512,236	0	0
	g		s 2a – 2f		65,918,587			
	3		ome (including dividend ar amounts)		2,217,370	0	-13,025	2,230,395
	4		stment of tax-exempt bond p	proceeds	0	0	0	0
	5	Royalties	(ı) Real	(u) Darsanal	0	0	0	0
	6a	Gross rents	(I) Real 0	(II) Personal 0				
	ь	Less rental	0	0				
	c	expenses Rental income	0	0				
	d	or (loss) Net rental inco	ll me or (loss)		o	0	0	О
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	16,524,420	0				
	ь	Less cost or other basis and	8,671,858	0				
	С	sales expenses Gaın or (loss)	7,852,562	0				
	d	Net gain or (los	ss)		7,852,562	0	0	7,852,562
Other Revenue	8a	Gross income f events (not inc \$ of contributions See Part IV, lin	luding 0 s reported on line 1c)					
rther R	ь	Less direct ex	a penses b					
C	9a		(loss) from fundraising e from gaming activities ie 19	events 🛌				
	b	Less direct ex	a penses b					
			(loss) from gaming activ	/ities . ►				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inve					
	11-	Miscellaneous	s Revenue	Business Code				
	11a b							
	C							
	d	All other reven	ue					
	e	Total. Add lines	L					
	12	Total revenue.	See Instructions		02 116 142	CE 040 044		10.000.05
	I			· I	92,116,143	65,840,011	65,551	10,082,957

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column	All other organizations must complete column (/	Allother	t complete all columns	organizations must	c)(4)	and 501(c	n 501(c)(3	Sectio
---	---	----------	------------------------	--------------------	-------	-----------	------------	--------

	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this	_			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	28,143,670	28,143,670		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	3,195,454	3,195,454		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,330,766	147,886	1,025,610	157,270
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$.	0	0	0	0
7	Other salaries and wages	21,157,763	16,260,342	3,176,241	1,721,180
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	622,110	455,776	114,469	51,865
9	Other employee benefits	3,866,628	2,900,332	647,526	318,770
10	Payroll taxes	1,482,034	1,085,781	272,696	123,557
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal	285,963	0	285,963	0
c	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,489,756	1,585,865	803,387	100,504
12	Advertising and promotion	39,199	5,188	25,798	8,213
13	Office expenses	5,893,445	5,002,647	366,917	523,881
14	Information technology	375,784	200,490	175,294	0
15	Royalties	0	0	0	0
16	Occupancy	1,506,331	699,432	806,899	0
17	Travel	1,345,337	1,197,862	49,869	97,606
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	84,069	49,074	8,162	26,833
20	Interest	1,304,403	1,047,325	257,078	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	3,510,356	2,643,355	867,001	0
23	Insurance	411,103	117,852	293,251	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Auxiliaries Bookstore/Food Svc	2,469,619	2,469,619	0	0
b	AllocationsM&R, Admin Exp	0	1,464,383	-1,475,415	11,032
c					
d					
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	79,513,790	68,672,333	7,700,746	3,140,711
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year	-	(B) End of year
	1	Cash-non-interest-bearing	3,087,372	1	2,966,156
	2	Savings and temporary cash investments	15,402,934	2	7,875,901
	3	Pledges and grants receivable, net	6,475,125	3	1,923,062
	4	Accounts receivable, net	659,195	4	989,401
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	-	0
×	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			0
Se.			0		0
Assets	7	Notes and loans receivable, net	0	7	0
_	8	Inventories for sale or use	202,016		88,922
	9	Prepaid expenses and deferred charges	480,748	9	1,208,408
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 114,037,596	4		
	Ь	Less accumulated depreciation	· · · · · ·		49,587,280
	11	Investments—publicly traded securities	116,969,150	11	116,519,146
	12	Investments—other securities See Part IV, line 11	491,125	12	699,944
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	9,503,444	15	15,961,840
	16	Total assets. Add lines 1 through 15 (must equal line 34)	195,133,000	16	197,820,060
	17	Accounts payable and accrued expenses	4,425,309	17	3,108,906
	18	Grants payable	0	18	0
	19	Deferred revenue	465,507	19	404,753
	20	Tax-exempt bond liabilities	24,700,000	20	24,700,000
ø	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	21,115,269	25	20,007,576
	26	Total liabilities. Add lines 17 through 25	50,706,085	26	48,221,235
Š		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
a B	27	Unrestricted net assets	21,700,471	27	33,406,246
_ B3	28	Temporarily restricted net assets	45,488,938	28	32,535,906
됟	29	Permanently restricted net assets	77,237,506	29	83,656,673
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net ,	33	Total net assets or fund balances	144,426,915	33	149,598,825
Ż	34	Total liabilities and net assets/fund balances	195,133,000	-	197,820,060
	1	,	1		, . — . , . —

Pai	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				দ
	, , , , , , , , , , , , , , , , , , , ,				•
1	Total revenue (must equal Part VIII, column (A), line 12)	1		92,1	16,143
2	Total expenses (must equal Part IX, column (A), line 25)	2		79,5	513,790
3	Revenue less expenses Subtract line 2 from line 1	3			 502,353
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			126,915
5	Net unrealized gains (losses) on investments	5			81,943
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,2	251,500
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			 598,825
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	וי		
	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 sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
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?	9	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: 14000267 **Software Version:** v1.00

EIN: 37-0673513 Name: KNOX COLLEGE

Form 990, Part VII - Compensation Compensated Employees, and Inde	n of Officers, ependent Cor	Direct itracto	ors, ers	Tru	ste	es, k	(ey	Employees, Higl	nest	
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (nan o n is b	ne b	ox, u an of	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) Anderson Thomas L	2 00	х						0	0	0
Secretary to the Board	0							<u> </u>		
(1) Andrew Laurel J	1	Х						0	0	0
Trustee (2) Bastian Joseph	0									
Trustee	0	Х						0	0	0
(3) Bayer Douglas	2							_		_
Chair for Committee on Admission/Financial Aid	0	Х						0	0	0
(4) Bibb Harold D	0 25	x						0	0	0
Life Trustee	0							Ů		
(5) Blew Susan	2	х						0	0	0
Chair for Committee on Advancement (6) Carlin Nancy B	0									
Trustee		Х						0	0	0
(7) Castendyck Robert W	0 25									
Life Trustee	0	X						0	0	0
(8) Cecil Jarvis B	0	×						0	0	0
Life Trustee Chair Emeritus	0	^						Ů		
(9) Cusimano John S	1	X						0	0	0
Trustee (10) DeGraff Deborah	0 1									
		х						0	0	0
Trustee (11) Fridovich David P LTG	0 1									
Trustee	0	X						0	0	0
(12) Frum Sandra E	0 25	x						0	0	0
Life Trustee	0	_ ^						0	0	0
(13) Gibbs Charles	1	X						0	0	0
Trustee (14) Glossberg Joseph B	0 1									
		х						0	0	0
Trustee (15) Goossen Isabelle C	0 1									
Trustee	0	Х						0	0	0
(16) Graham Patrick F	0 25	x						0	0	0
Life Trustee	0	_ ^						Ů.	0	0
(17) Harmon Don	1	X						0	0	0
Trustee (18) Hartog Elzelien	0									
		х						0	0	0
Trustee (19) Hertko Joyce	0 1									
Trustee	0	Х						0	0	0
(20) Hinz Mary M	0 25	, , , , , , , , , , , , , , , , , , ,								
Life Trustee	0	Х						0	0	0
(21) Jacobson Gary L	1	х						0	0	0
Trustee (22) Jamieson Robert	0 0 25		<u> </u>				_		_	
		х						0	0	О
Life Trustee (23) Kerous Frank J	0 0 25									
Life Trustee		х						0	0	0
(24) Kılts James M	0 25	\ \						_	^	
Life Trustee	0	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours organization (Wand a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Individual or director Highest employe Former organizations related Institutional Trustee below emplo)ee organizations dotted line) t compensated ee trustae (26) Kleine Mark 2 Χ 0 0 Chair for Committee on Facilities/Infrastructure 0 0 25 (1) Koran Janet M Χ 0 0 0 Life Trustee Chair Emerita 0 (2) Luetger Steven P 2 Χ 0 0 Chair for Committee on Campus Life/Athletics 0 (3) Lyn Patrick St Aubyn 1 0 0 0 Х 0 Trustee (4) Martin Dan M 0 25 Х 0 0 0 Life Trustee 0 (5) Maskus Keith E 1 0 0 0 0 0.25 (6) Masterson Joe A Χ 0 0 0 Life Trustee (7) Matkov George J Jr 1 Х 0 0 0 Trustee (8) Perille Ann Feldman 1 Χ 0 0 0 Trustee 0 2 (9) Petrovich Dushan Χ 0 0 0 0 (10) Podesta John D 0.25 Х 0 0 0 Life Trustee 0 (11) Potter James R 1 Χ 0 0 0 Trustee 0 (12) Procknow Eugene A 1 0 0 1 (13) Ramanan Hariharan 0 0 0 Х (14) Riddell Richard V 2 Χ 0 0 0 Chair for Committee on Academic Affairs 0 (15) Reilly Thomas V 1 Χ 0 0 0 0 25 (16) Rosenberg Diane S Χ 0 0 0 Life Trustee Chair Emerita (17) Rosene Laura 1 Х 0 0 0 0 Trustee (18) Sampson Walter E 0 25 Χ 0 0 0 0 (19) Schuler Tino H 1 0 Χ 0 0 0 (20) Schulz David A 2 0 0 0 Χ 0 Chair for Committee on Trustees (21) Sharry Janice Vyn 1 0 0 Χ 0 (22) Smith Charles F 1 Χ 0 0 0

0 25

0 25

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0

0

0

0

0

0

(23) Sparks Robert

(24) Stevenson Smith Fay

Life Trustee

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

Compensated Employees, and Inde	pendent Cor	ntracto	rs				1	l	I	1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (nan o n is b	ne b	ox, u an of	nless ficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(51) Tucker Caroline H	0 25	x						0	0	0
Life Trustee	0									
(1) Vovis Gerald F	2	x						0	0	0
Chair for Committee on Finance (2) Walter Ralph	0 1			-						
Trustee	0	x						0	0	0
(3) Winning R Kyle	1							_		
Trustee	0	Х						0	0	0
(4) Amott Teresa L	55			, , , , , , , , , , , , , , , , , , ,				267.406		42.020
President	0			Х				267,496	0	13,930
(5) Behling Laura	40			.,				474.706		10.100
Vice President/Dean	0			Х				174,786	0	10,498
(6) Bailey Denise	40			,,				47.620		0.422
Secretary	0			Х				47,629	0	8,423
(7) Axtell Thomas B	40			.,				100 720		46 544
Treasurer/Vice President	0			Х				190,728	0	16,511
(8) Jones Vicky	40			.,				54.000		
Assistant Secretary	0			Х				54,338	0	174
(9) Hall Steve	40									
Vice President/Chief Information Officer	0			Х				95,312	0	19,786
(10) Holmes Beverly	40									
Vice President				Х				151,749	0	10,850
(11) Steenis Paul	40									
Vice President				Х				128,388	0	10,042
(12) Maurer Bobby Jo	40									
Controller/Assistant Treasurer				Х				87,412	0	8,827
(13) Breitborde Lawrence	40									
Professor						Х		140,712	0	14,875
(14) Wilson J Mark	40					х		122,425	0	3,927
Assoc VP Major Gifts	0							122,423	0	3,321
(15) Beck Diana	40					х		100 142	0	Q 224
Professor	0	<u> </u>						109,143		8,324
(16) McAndrew Frank	40					х		102,498	0	13,184
Professor	0					_ ^		102,438	0	13,104
										

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OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		ne organization					Employer identification	ation number
KNUX	COLLEC	JE					37-0673513	
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this p		ons.
		zation is not a private f						
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).	
2	✓	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Г	A hospital or a cooper	ative hospital	service organization (described in sec	tion 170(b)(1)	(A)(iii).	
4	Γ	A medical research or	ganızatıon ope	_). Enter the
5	Г	hospital's name, city, An organization opera	and state	efit of a college or uni	versity owned o	r operated by a	a governmental unit d	escribed in
•	'	section 170(b)(1)(A)			versity owned c	operated by t	a governmentar ame a	escribed iii
6	_	A federal, state, or loc			doccribod in co	oction 170(h)(1	\(A\(\\)	
7	<u>'</u>	An organization that n						ianaral nublic
•	'	described in section 1				oni a governine	incar unit or nom the g	Jeneral public
8	Γ	A community trust de				tII)		
9	Γ	An organization that n	ormally receiv	es (1) more than 331	1/3% of its supp	ort from contro	butions, membership	fees, and gross
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	nd (2) no more than 3	331/3% of
		its support from gross	ınvestment ır	ncome and unrelated b	usiness taxable	income (less	section 511 tax) from	n businesses
		acquired by the organ	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Par	tIII)	
10	Г	An organization organ						
11	Г	An organization organ	•	•	· ·	•		ut the purposes of
	•	one or more publicly s	upported orga	nızatıons described in	section 509(a)	(1) or section	509(a)(2) See sectio	on 509(a)(3). Check
	_	the box in lines 11a th	_			-		· -
а	ı	Type I. A supporting of supported organization						
		organization You mus				ty of the direct	ors or trustees or the	supporting
b	Γ	Type II. A supporting				with its suppo	rted organization(s), l	y having control or
		management of the su			same persons t	hat control or r	nanage the supported	organization(s) You
	_	must complete Part I					1.6	
С	ı	Type III functionally supported organizatio						grated with, its
d	Г	Type III non-function						ianization(s) that is
	,	not functionally integr						
	_	(see instructions) Yo						
е	ı	Check this box if the c					s a Type I, Type II, T	ype III functionally
f		integrated, or Type II Enter the number of s						
g		Provide the following i						
9				- m mpp 5 -				
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ianization	(v) A mount of	(vi) A mount of
		organization	` ´	organization	listed in your	governing	monetary support	other support (see
				(described on lines	docume	nt?	(see instructions)	ınstructions)
				1-9 above or IRC section (see				
				instructions))				
				,,	Yes	No		
Tota	1							

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

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

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

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

Section D. Computation of Investment Income Percentage

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

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

18

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

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

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

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493043019696

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

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

Open to Public

	of the organization OLLEGE		Employer identifica	tion number
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,		37-0673513 Funds or Accounts	Complete if the
	organization answered Tes to Form 990,	(a) Donor advised funds	(b) Funds and	other accounts
Tot	tal number at end of year	(a) beneficially and	(2) / 21/12/21/2	
	gregate value of contributions to (during year)			
	gregate value of grants from (during year)			
•	gregate value at end of year			
	d the organization inform all donors and donor adviso	vec up westing that the access hold in de	nor advised	
fur	nds are the organization's property, subject to the or	ganızatıon's exclusive legal control?		☐ Yes ☐ No
us	d the organization inform all grantees, donors, and do ed only for charitable purposes and not for the benefi nferring impermissible private benefit?			┌ Yes ┌ No
art I	Conservation Easements. Complete if	the organization answered "Yes"	to Form 990, Part I\	/, line 7.
Рu	irpose(s) of conservation easements held by the orga	anızatıon (check all that apply)		
Γ	Preservation of land for public use (e g , recreation	or education)	n historically important	land area
Г	Protection of natural habitat	Preservation of a	certified historic struc	ture
Γ	Preservation of open space			
	omplete lines 2a through 2d if the organization held a sement on the last day of the tax year	qualified conservation contribution in	the form of a conserva	tion
			Held at the	End of the Year
То	tal number of conservation easements		2a	
То	tal acreage restricted by conservation easements		2b	
Νu	umber of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c	
	umber of conservation easements included in (c) acq storic structure listed in the National Register	uired after 8/17/06, and not on a	2d	
	umber of conservation easements modified, transferr e tax year 🛌	ed, released, extinguished, or terminat	ed by the organization	during
Nu	ımber of states where property subject to conservatı	on easement is located ►		
Do	pes the organization have a written policy regarding t forcement of the conservation easements it holds?		ndling of violations, and	│ │ Yes
Sta ⊾	aff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ments during the year	
	mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	ts during the year	
	\$) above satisfy the requirements of se	ction 170(h)(4)(B)(i)	□Yes □No
I n ba	Part XIII, describe how the organization reports con lance sheet, and include, if applicable, the text of the	e footnote to the organization's financia		
	 organization's accounting for conservation easeme Organizations Maintaining Collections Complete if the organization answered "Yes 	s of Art, Historical Treasures,	or Other Similar	Assets.
wo	the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar asset rvice, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	, or research in furthera	
If t wo	the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar asset rvice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balanc	
(i)	Revenue included in Form 990, Part VIII, line 1		► \$	
	Assets included in Form 990, Part X			
Ift	Assets included in Form 990, Part X the organization received or held works of art, histori lowing amounts required to be reported under SFAS:		for financial gain, provi	
	evenue included in Form 990, Part VIII, line 1	110 (A 30) 30) relating to these items	, ►\$	0
۸ ۵	scots included in Form 990. Part V		L ¢	0

ar	t III Organizations Maintaining Co	llections of Art, H	listorical Tr	eası	ires, or Oth	er Similaı	r Asse	ts (co	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records,	check any of	the fol	lowing that are	a significan	t use of	ıts	
а	✓ Public exhibition	d	Loan	orexo	hange prograr	ns			
ь	✓ Scholarly research	e	e Γ Other	r					
С	✓ Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain h	now they furthe	er the	organızatıon's	exempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t					ımılar	Г	Yes	√ No
Pai	Part IV, line 9, or reported an an	ements. Complete	ıf the organ	ızatıo		"Yes" to Fo	rm 990),	<u> </u>
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermedıa	ary for contribu	itions	or other asset	s not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the foll	lowing table				Amou		
c	Beginning balance				10	<u>-</u>			
d	Additions during the year				10				
e	Distributions during the year				16	-			
f	Ending balance				11				
2a	Did the organization include an amount on Fo	orm 990 Part V line 2	1 for escrow o	rcuet		_		Yes	┌ No
							'	103	
b	If "Yes," explain the arrangement in Part XII rt V Endowment Funds. Complete						10	<u> </u>	'
Ρđ	Endowment Funds. Complete		(b)Prior year		wo years back (Four ye	ears back
La	Beginning of year balance	124,428,259	98,752,347		84,362,700	84,085			7,435,543
b	Contributions	6,302,779	11,130,470		7,112,866	2,153	,598		4,393,325
c	Net investment earnings, gains, and losses	1,469,988	18,787,764		11,350,743	681	.,058	1	.5,004,316
d	Grants or scholarships	4,421,000	4,155,000	_	3,998,073	2,486			2,756,938
e	Other expenditures for facilities and programs	-2,000	87,322		75,889	70	,474		-8,860
f	Administrative expenses	0	0		0		0		C
g	End of year balance	127,782,026	124,428,259		98,752,347	84,362	,700	8	4,085,106
2	Provide the estimated percentage of the curi	ent year end balance ((line 1g, colum	ın (a))	held as				
а	Board designated or quasi-endowment 🕨	19 %							
b	Permanent endowment ▶ 64 %								
С		7 %							
-	The percentages in lines 2a, 2b, and 2c show	uld equal 100%							
3a	Are there endowment funds not in the posses	ssion of the organizatio	on that are held	danda	admınıstered f	or the			
	organization by							Yes	No
	(i) unrelated organizations			•			3a(i)		No
	(ii) related organizations						3a(ii)	<u> </u>	No
ь 1	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	•		• '			3b		
	t VI Land, Buildings, and Equipme			n ans	wered 'Yes' i	to Form 990) Part	TV III	ne
	11a. See Form 990, Part X, line		organization	1 4115	wered res	.0 1 01111 330	, i ai c	± v ,	10
	Description of property		(a) Cost or basis (invest		(b)Cost or other basis (other)	r (c) Accumu deprecia		(d) Boo	ok value
La	Land			0	2,204,0!	52	$\overline{}$,	2,204,052
	Buildings			0	80,291,97		91,248		, , , , , , , , , , , , , , , , , , ,
	Leasehold improvements			0	. ,	0	0		0
	Equipment			0	20,812,02	27 16,6	73,950	-	4,138,077
	Other			0		-	85,118		5,844,424

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

49,587,280

(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
	nplete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) book value	Cost or end-of-year market value
		,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		
Part IX Other Assets. Complete if the organization a	answered 'Yes' to Form 990	, Part IV, line 11d See Form 990, Part X, line 15
(a) Descript	tion	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUST		12,258,510
(2) STUDENT LOANS RECEIVABLE		3,671,011
(3) DEPOSITS HELD IN TRUST		32,319
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.,)	15,961,840
Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25.	izadon answered Tes T	o rotti 550, Fait IV, lille 11e Of 111. See
1 (a) Description of liability	(b) Book value	
- ' ' ' ' '	(=, ===:::, a.a.	
Federal income taxes	0	
LINE OF CREDIT FOR CAPITAL PURPOSES	7,619,942	
STUDENT DEPOSITS	494,097	
DEPOSITS HELD IN CUSTODY FOR OTHERS	78,711	
ANNUITIES PAYABLE	1,305,408	
POSTRETIREMENT BENEFIT OBLIGATION	2,045,437	
FEDERAL EQUITY IN LOAN PROGRAMS	2,078,486	
INTEREST RATE SWAPS LIABILITY	5,393,562	
CAPITAL LEASE OBLIGATIONS	991,933	
	331,333	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	20,007,576	

<sup>20,007,576

2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D, Part XI, Line 4b

Schedule D, Part XII, Line 4b

Part		evenue per Audited Financial State vered 'Yes' to Form 990, Part IV, line 1		nts With Revenue բ	er R	eturn Complete ıf
1		r support per audited financial statements			1	52,095,076
2	Amounts included on line 1 but	t not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) of	on investments	2a	-8,681,943		
b	Donated services and use of fa	acılıtıes	2b	0		
c	Recoveries of prior year grants		2c	0		
d	Other (Describe in Part XIII)		2d	0		
e	Add lines 2a through 2d .		·		2e	-8,681,943
3	Subtract line 2e from line 1 .				3	60,777,019
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b .	4a	0		
b	Other (Describe in Part XIII)		4b	31,339,124		
c	Add lines 4a and 4b				4c	31,339,124
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)		5	92,116,143
Part 2		xpenses per Audited Financial Sta			per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line			1	Т
1		audited financial statements	•		1	48,174,666
2		t not on Form 990, Part IX, line 25		ı		
а		icilities	2a	0	4	
Ь	· •		2b	0	4	
С			2c		4	
d			2d	0	4	
е	Add lines 2a through 2d				2e	0
3					3	48,174,666
4		O, Part IX, line 25, but not on line 1:		ı		
а		uded on Form 990, Part VIII, line 7b	—		4	
b			4b	31,339,124	4	
С					4c	31,339,124
5		nd 4c. (This must equal Form 990, Part I, lin	e 18)		5	79,513,790
	XIII Supplemental Inf					
	\prime , line 4 , Part X, line 2 , Part XI ,	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
Schedule D, Part III, Line 1 The College has collections of valuable artwork, papers, and other memorabilia that were donated to the College These items are on display and are used by educators, researchers, historians, and others However, all proceeds from any sales of collections, or items in a collection, must be used to acquire other items for collections (From Note 1 Knox College Financial Statements and Independent Auditor's Report For the Year Ended June 30, 2015)				s, historians, and tion, must be used to nents and Independent		
Schedule D, Part III, Line 4		The College has collections of valuable artwork, papers, and other memorabilia that were donated to the College These items are on display and are used by educators, researchers, historians, and others (From Note 1 Knox College Financial Statements and Independent Auditor's Report For the Year Ended June 30, 2015)				
Schedu	lle D, Part V , Line 4	The College's endowment consists of seve scholarships, professorships, library, lectu activities Included in these funds are both by the Board of Trustees to function as en Statements and Independent Auditor's Re	ureship h dono dowme	os, research, prizes, and r-restricted endowment i ents (From Note 20 of Ki	donor funds a nox Co	specified educational and funds designated llege Financial
Schedu	lle D, Part X, Line 2	The College is a not-for-profit entity as de (IRC) and is exempt from federal income t IRC. The College follows authoritative guid (FASB) that clarifies the accounting for un statements and prescribes a recognition texamination. Measurement of the tax unce	axes o dance certan hresho	n related income pursua issued by the Financial A nty in income taxes reco ild of more-likely-than-n	nt to S Accour gnized ot to b	ection 501(a) of the nting Standards Board in an entity's financial e sustained upon

Student Aid, Scholarships, and Prizes \$31,339,124

Student Aid, Scholarships, and Prizes \$31,339,124

met This guidance also addresses derecognition, classification, interest and penalties, disclosure, and transition. The College conducts business solely in the U.S. and, as a result, files information returns for U.S. and Illinois. In the normal course of business, the College is subject to examination by taxing authorities. The College's information returns for years subsequent to fiscal 2011 are open, by statute, for review by authorities. However, at present, there are no ongoing income tax audits or unresolved disputes with the various tax authorities that the College currently files or has filed with

Jenedale 2 (1 01111 330) 2013		i age s				
Part XIII Supplemental Information	on (continued)					
Return Reference	Explanation					
-						

Schedule D (Form 990) 2014

Additional Data

Software ID: 14000267

Software Version: v1.00

(b) Book Value

EIN: 37-0673513

Name: KNOX COLLEGE

Form 990, Schedule D, Part X, - Other Liabilities 1 (a) Description of Liability (

LINE OF CREDIT FOR CAPITAL PURPOSES	7,619,942
STUDENT DEPOSITS	494,097
DEPOSITS HELD IN CUSTODY FOR OTHERS	78,711
ANNUITIES PAYABLE	1,305,408
POSTRETIREMENT BENEFIT OBLIGATION	2,045,437
FEDERAL EQUITY IN LOAN PROGRAMS	2,078,486
INTEREST RATE SWAPS LIABILITY	5,393,562
CAPITAL LEASE OBLIGATIONS	991,933

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As Filed Data -

DLN: 93493043019696

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

3

4b

4c

Yes

Yes

Yes

Yes

Yes

Νo

Name of the organization **Employer identification number** KNOX COLLEGE 37-0673513 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way

Does the organization maintain the following?

please explain If you need more space use Part II

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory

that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d 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

Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain If you need more space, use Part II

6a Does the organization receive any financial aid or assistance from a governmental agency?

h Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II

7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat No 50085D Schedule E (Form 990 or 990-EZ) (2014)

5a 5b

Νo **5c** Νo

5d Νo

5e Νo 5f Νo

No_ 5g

5h Νo

6a

Νo

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	Knox College's nondiscrimination policy is clearly stated in the College catalog, website, admissions materials, applications, and other publications
Schedule E, Part I, Line 6	For the fiscal year, Knox College received awards from the following federal programs. Federal Work Study, Federal Direct Loan Program, Federal Supplemental Educational Opportunity Grant Program, Federal Pell Grant, Federal Perkins Loan Program, Student Support Services Program, McNair Post-Baccalaureate Achievement, Chapter 33 Post 911 Gl Bill, National Science Foundation, and National Endowment for the Arts

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

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Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

OMB No 1545-0047

DLN: 93493043019696

Department of the Treasury

SCHEDULE F

(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. Internal Revenue Service Name of the organization **Employer identification number KNOX COLLEGE** 37-0673513 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 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 √ Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (f) Total expenditures (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a region (by type) (e.g., program service, describe employees, for and investments agents, and region fundraising, program specific type of in region ındependent services, investments, grants service(s) in region contractors in to recipients located in the region region) (1) South America 222,169 1 Program Services In cooperation with the University of Palermo in Buenos Aires, Knox offers a term of accredited academic study specially designed to emphasize the social sciences and language Program offerings vary. but recent courses have included Introduction to Anthropology, Popular Culture in Latin A merica, A rgentine Society, Social Thought, and Culture, Latin American Art, History of 20th Century Latin America, Politics and Government in Latin America, Evolution of Argentine Society, Latin American Literature, Advanced Spanish Language, and Social Cinema of Argentina Courses are taught in Spanish by University of Palermo professors All students take a language course (which includes two educational trips outside Buenos Aires, and several within the city) and pursue a combination of electives, mostly chosen from those offered by the program (2) Europe (including Iceland and 410,200 2 Program Services Knox, in cooperation Greenland) with the University of Barcelona, offers academic study in language, the humanities and the social sciences Students pursue a combination of courses, all taught in Spanish by professors from the University of Barcelona Some of the courses are fitted to the particular needs of program students, other courses are from the regular University curriculum offered to Spanish students All students live in the homes of Spanish families in Barcelona The program has a two-week trip throughout southern Spain during Winter Break as well as other shorter educational field trips 1 Program Services 10,736 (3) Europe (including Iceland and The Knox program is the principal American Greenland) brogram at the University in Besancon Besancon is a city of 120,000 people, with 20,000 students at the University Participants take courses for foreign students in language and culture, plus several courses chosen from the regular University curriculum to meet ındıvıdual needs All courses are taught in French by the University of Besancon professors

(4)

(5)

3a Sub-total

to Part I

b Total from continuation sheets

students

Students with majors other than French may continue study in their lmaıor fields All students stay with French families for the O ctober orientation period, then live during the year or term in University dormitories with French and foreign

643,105

Schedule F (Form 990) 2014

Pa	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
(1)									
(2)									
(3)									
(4)									
2				ed above that are ro or counsel has pro						
3	Enter total num	nber of other or	ganizations or ent	ities						

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

(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) SCHOLARSHIPS	East Asia and the Pacific	65		CREDIT TO STUDENT ACCOUNT	0		
(2) SCHOLARSHIPS	Europe (including Iceland and Greenland)	12	·	CREDIT TO STUDENT ACCOUNT	0		
(3) SCHOLARSHIPS	North America (including Canada and Mexico, but not the United States)	10	·	CREDIT TO STUDENT ACCOUNT	0		
(4) SCHOLARSHIP	South America	10	·	CREDIT TO STUDENT ACCOUNT	0		
(5) SCHOLARSHIPS	South Asia	35	·	CREDIT TO STUDENT ACCOUNT	0		
(6) SCHOLARSHIPS	Sub-Saharan Africa	24	524,632	CREDIT TO STUDENT ACCOUNT	0		
(7)	1						
(8)	-						
(9)	-						
(10)	-						
(11)							
(12)	-						
(13)	+						
(14)	+						
(15)	+				i		
(16)	+				i		
(17)	+				i		
(18)	+	+		+			+

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	<u>r</u>	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	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u>r</u>	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	▽	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2014

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	To remain at Knox, all degree-seeking students are expected to make satisfactory academic progress. Satisfactory progress is defined both in terms of the accumulation of credits to ward the degree, and as the maintenance of a gradepoint average consistent with graduation requirements. The Financial Aid Office follows the decisions of the Academic Standing Committee in determining whether a student is meeting the College's satisfactory academic progress standards.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493043019696 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 KNOX COLLEGE 37-0673513 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other)

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

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

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

(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) INDIVIDUAL GIFT AID (GRANTS AND/OR SCHOLARSHIPS TO STUDENTS)	1236	28,143,670	0		

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						
, .	To remain at Knox, all degree-seeking students are expected to make satisfactory academic progress. Satisfactory progress is defined both in terms of the accumulation of credits toward the degree, and as the maintenance of a gradepoint average consistent with graduation requirements. The Financial Aid Office follows the decisions of the Academic Standing Committee in determining whether a student is meeting the College's satisfactory academic progress standards.						

Schedule I (Form 990) 2014

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DLN: 93493043019696

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 KNOX COLLEGE

Employer identification number

37-0673513

Pa	rt I	Questions Regarding Compensation	า				
						Yes	No
La				ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	Γ	First-class or charter travel	굣	Housing allowance or residence for personal use			
	<u>~</u>	Travel for companions	Г	Payments for business use of personal residence			
	\vdash	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Γ	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		ny of the boxes in line 1a are checked, did the or abursement or provision of all of the expenses de			1b	Yes	
2		the organization require substantiation prior to rectors, trustees, officers, including the CEO/Exec			2	Yes	
3	orga	cate which, if any, of the following the filing orgar inization's CEO/Executive Director Check all th d by a related organization to establish compens	at appl				
	Γ	Compensation committee		Written employment contract			
	Γ	Independent compensation consultant	ত	Compensation survey or study			
	Γ	Form 990 of other organizations	<u> -</u>	Approval by the board or compensation committee			
4		ng the year, did any person listed in Form 990, F related organization	Part VII	I , Section A , line $1 a$ with respect to the filing organization			
а	Rec	eive a severance payment or change-of-control	paymen	nt?	4a		Νo
b	Part	cicipate in, or receive payment from, a supplemer	ntal non	iqualified retirement plan?	4b		No
С		cicipate in, or receive payment from, an equity-ba			4c		No
		es" to any of lines 4a-c, list the persons and pro					
	Only	/ 501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.			
5		persons listed in Form 990, Part VII, Section A , pensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The	organization?			5a		Νo
b	Any	related organization?			5b		No
	If"Y	es," to line 5a or 5b, describe in Part III					
5		persons listed in Form 990, Part VII, Section A, pensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any			
а	The	organization?			6a		No
b	Any	related organization?			6b		Νo
	If"Y	es," to line 6a or 6b, describe in Part III					
7		persons listed in Form 990, Part VII, Section A , ments not described in lines 5 and 6? If "Yes," d			7		No
3	subj	e any amounts reported in Form 990, Part VII, p lect to the initial contract exception described in art III		accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe			NI -
9	If"Y		rebutt	able presumption procedure described in Regulations	8		No

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 Amott Teresa L, President	(i) (ii)	267,496 0	0	0	13,930 0	12,000	293,426 0	0
2 Axtell Thomas B, Treasurer/Vice President	(i) (ii)	190,728 0	0	0	16,510 0	0	207,238	0
3 Behling Laura, Vice President/Dean	(i) (ii)	174,786 0	0	0	10,498	0	185,284 0	0
4 Holmes Beverly, Vice President	(i) (ii)	151,749 0	0	0	10,851 0	0	162,600 0	0

Schedule J (Form 990) 2014

Part IIII 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

rise complete this part for any day	alcorda milorinación
Return Reference	Explanation
Schedule J, Part I, Line 1a	Occasionally the President's husband will accompany the President on College fund raising events. The College provides funding for his travel costs. These travel costs are not considered compensation as he is participating in fundraising for the College. Reimbursements for travel cost must follow the College's purchasing and accounts payable policies. These policies include requirements for documentation and receipts. The President is provided housing by the College. The President's house is considered a part of the College's campus and is used for College events and entertaining. The President's housing is considered nontaxable as it is provided for the convenience of the College.
Schedule J, Part I, Line 3	Compensation is reviewed annually. This review includes cost of living statistics, compensation paid for similar positions at other similar colleges, and compensation paid locally for like positions. A standard achievement increase is determined and is approved by the Board of Trustees during the June meeting in conjunction with the approval of the following year's budget. The Board of Trustees reviews the President's salary and approves any changes All staff increases are reviewed by the President. Vice Presidents, and heads of departments.

Schedule J (Form 990) 2014

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DLN: 93493043019696

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 Employer identification number

Name of the organization KNOX COLLEGE						oyer identificat	ion nu	mber	
KNO	COLLEGE				37-0	673513			
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	45	2,549,417	Hıgh	Low Value Date	e of Gı	ft	
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	Taxıdermy								
22	Historical artifacts				_				
23	Scientific specimens								
24	Archeological artifacts				_				
	O ther ► ()								
26	O ther ▶()				+				
27	O ther ▶()				+				
28	O ther ▶ ()								
29	Number of Forms 8283 received for which the organization comple				29				0
	5							Yes	No
30a	During the year, did the organiza								
	it must hold for at least three ye					be used			
	for exempt purposes for the enti				•		30a		No
Ь	If "Yes," describe the arrangem	ent in Part i	II						
31	Does the organization have a gif	ft acceptan	ce policy that requires the r	eview of any non-standard	conti	ıbutıons?	31	Yes	<u> </u>
32a	Does the organization hire or us contributions?		_				32a		No
b	If "Yes," describe in Part II								
33	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)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493043019696

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization KNOX COLLEGE	Employer identification number
	37-0673513

Return Reference	Explanation
Form 990, Part V, Line 4a	The College offers two off campus programsone in France at the University in Besancon and the other in Spain at the University of Barcelona Each program has bank accounts which are not considered part of the College's bank accounts as the College has no control over these accounts. Only the program directors have signature authority for their program's accounts. The College also has two bank accounts with Wells Fargo in London one for the Besancon Program and one for the Barcelona Program.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	The 990 was reviewed by the Chair of the Audit Subcommittee and the Chair of the Committee on Finance The 990 is made available to all College Trustees for review

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	Officer's Conflict of Interest Any conflict of interest on the part of an officer of the College designated in this article, or members of such officer's immediate family, shall be disclosed by the officer in writing to the Board of Trustees at least annually and made a matter of record. When any such interest becomes relevant to any subject requiring administration or Board of Trustees' action, the officer having a conflict shall call it to the attention of the President and, if the matter is being considered by the Board of Trustees or one of its committees, to the attention of the Board or such committee. The officer shall not participate in the discussion of the subject or make any recommendations regarding the subject in which the officer or a member of the officer's immediate family has a conflict of interest, and shall not use personal influence to affect the decision with respect to such subject. An officer of the College who is excluded from participating in discussions or making recommendations regarding the subject because of such conflict or interest shall, however, briefly state the nature of the conflict and shall be encouraged to answer pertinent questions of the Trustees when the officer's knowledge of the subject will assist the Board of Trustees, any of its committees or the administration. The minutes of any meeting attended by the interested officer at which the subject is discussed shall reflect that a disclosure was made and that the interested officer abstained from the discussion except to the extent provided above. (From Bylaws of Knox College)

Return Reference	Explanation
Form 990, Part VI, Section B, Line 13	Each year, during fall term, a memo is sent via e-mail to all employees reminding them of Knox College's "common sense approach to reporting fraud" Included in this message are instructions on how to report suspected fraud. This memo includes the following instructions: "If you suspect fraud, please immediately notify someone in a position of authority, for example, your supervisor, a department head, a dean or vice president, the president or trustee who chairs the Audit Subcommittee."

Return Reference	Explanation
Form 990, Part VI, Section B, Line 14	The College does not have a written document retention and destruction policy, however, record retention and destruction policies are developed, as needed, by each department to address their specific type(s) of records. Departments follow industry standards that are appropriate for their specific type(s) of records. In conjunction with record destruction for confidential records, the College contracted with a vendor to provide locked bins for departmental use and the secure destruction of these records.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	Compensation is reviewed annually. This review includes cost of living statistics, compensation paid for similar positions at other similar colleges, and compensation paid locally for like positions. A standard achievement increase is determined and is approved by the Board of Trustees during the June meeting in conjunction with the approval of the following year's budget. The Board of Trustees reviews the President's salary and approves any changes. All staff increases are reviewed by the President, Vice Presidents, and heads of departments.

Return Reference	Explanation
Form 990, Part VI, Section C, Line 17	The College is not required to file a copy of Form 990 with the State of Illinois or any other state

Return Reference	Explanation
	The Bylaws of the College are available on the College's website (www knox edu) Each fall, conflict of interest forms are distributed to trustees, officers, and department heads. Financial statements are available upon request to the Treasurer's Office. All trustees are provided copies of the financial statements each year.

Return Reference	Explanation
Form 990, Part XI, Line 9	CHANGE IN FAIR VALUE INTEREST RATE SWAPS (\$587,259), POSTRETIREMENT BENEFITS \$1,469,774, ADJUSTMENTS OF AMOUNTS DUE UNDER SPLIT INTEREST AGREEMENTS \$110,037, CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST \$258,948