efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493117003186

Form 990 Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public Inspection

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 *www.IRS.gov/form990*

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
Biola University Inc

Doing business as

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

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

D Employer identification number
95-0549600

E Telephone number
(562)903-6000

G Gross receipts $ 260,833,175

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

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

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

H(c) Group exemption number ▶

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

J Website: ▶

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

L Year of formation 1908 **M** State of legal domicile CA

Part I Summary

Activities & Governance

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

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	4,065
6	Total number of volunteers (estimate if necessary)	6	23
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	14,840
b	Net unrelated business taxable income from Form 990-T, line 34	7b	9,413

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	11,698,331	32,699,542
	9	Program service revenue (Part VIII, line 2g)	181,551,782	189,090,169
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,460,953	7,344,779
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,523	312,282
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	199,717,589	229,446,772
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	38,278,867	40,121,424
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	96,356,293	101,558,630
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	132,000	132,000
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶3,617,625		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	51,383,991	52,035,636
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	186,151,151	193,847,690
	19	Revenue less expenses Subtract line 18 from line 12	13,566,438	35,599,082
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	399,423,110	426,802,555
	21	Total liabilities (Part X, line 26)	176,115,626	174,412,394
	22	Net assets or fund balances Subtract line 21 from line 20	223,307,484	252,390,161

Part II Signature Block

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

Sign Here

Signature of officer | 2015-11-12 Date

Michael A Pierce VP Business and Financial Affairs
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

BIOLA UNIVERSITY IS A PRIVATE CHRISTIAN UNIVERSITY LOCATED IN SOUTHERN CALIFORNIA FOR OVER 105 YEARS, BIOLA HAS STOOD OUT AS AN INSTITUTION GROUNDED ON BIBLICALLY CENTERED EDUCATION, INTENTIONAL SPIRITUAL DEVELOPMENT, AND CAREER PREPARATION, WHERE ALL FACULTY, STAFF AND STUDENTS ARE PROFESSING CHRISTIANS WITH MORE THAN 145 ACADEMIC PROGRAMS THROUGH ITS SIX SCHOOLS, BIOLA OFFERS DEGREES RANGING FROM BACHELOR OF ARTS TO DOCTORAL DEGREE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 77,116,557 including grants of $ 19,907,993) (Revenue $ 93,866,530)

SCHOOL OF ARTS AND SCIENCES THE SCHOOL OF ARTS AND SCIENCES IS MORE THAN A COLLECTION OF DEPARTMENTS OUR GOAL IS TO TEACH THE CONNECTEDNESS OF ALL KNOWLEDGE, HELPING STUDENTS EXPLORE A WIDE RANGE OF DISCIPLINES AND THE CONTRIBUTIONS THAT EACH CAN MAKE TO THE WEB OF UNDERSTANDING FROM A BIBLICAL WORLDVIEW , WE SEEK TO CHALLENGE STUDENTS TO EXPLORE AND DEVELOP KNOWLEDGE, SKILLS, AND ATTRIBUTES THAT WILL ENABLE THEM TO , UNDERSTAND, EXPRESS, CARE FOR, AND CELEBRATE GOD'S DIVERSE AND COMPLEX WORLD, THAT IN IT THEY MIGHT SEEK AND HUMBLY SERVE THE KINGDOM OF GOD BEYOND THE CLASSROOM, OUR STUDENTS LEARN EXPERIENTIALLY, CONNECTING THEIR STUDIES TO THE CONTEXTS OF LIFE THAT THEY MIGHT LOVE THEIR NEIGHBORS IN THE PLACES AND POSITIONS BEYOND BIOLA WHERE GOD MAY LEAD THEM MORE THAN GRANTING A DEGREE, WE HOPE TO AWAKEN THE JOYS OF LEARNING SO THAT LIBERAL ARTS MIGHT BE A LIFELONG PASSION

4b (Code) (Expenses $ 37,868,962 including grants of $ 9,776,046) (Revenue $ 46,094,226)

TALBOT SCHOOL OF THEOLOGY THE MISSION OF TALBOT SCHOOL OF THEOLOGY IS THE DEVELOPMENT OF DISCIPLES OF JESUS CHRIST WHOSE THOUGHT PROCESSES, CHARACTER, AND LIFESTYLES REFLECT THOSE OF OUR LORD, AND WHO ARE DEDICATED TO DISCIPLE MAKING THROUGHOUT THE WORLD THE THEOLOGICAL POSITION OF TALBOT SCHOOL OF THEOLOGY IS CHRISTIAN, PROTESTANT, AND THEOLOGICALLY CONSERVATIVE THE SCHOOL IS INTERDENOMINATIONAL BY NATURE AND IS THOROUGHLY COMMITTED TO THE PROCLAMATION OF THE GREAT HISTORIC DOCTRINES OF THE CHRISTIAN CHURCH IT DEFINITELY AND POSITIVELY AFFIRMS HISTORIC ORTHODOXY IN THE FRAMEWORK OF AN EVANGELICAL AND PREMILLENNIAL THEOLOGY THAT IS DERIVED FROM A GRAMMATICAL-HISTORICAL INTERPRETATION OF THE BIBLE IT EARNESTLY ENDEAVORS TO MAKE THESE GREAT DOCTRINAL TRUTHS A VITAL REALITY IN THE SPIRITUAL LIFE OF THIS PRESENT GENERATION THE SEMINARY AIMS TO TRAIN STUDENTS WHO BELIEVE AND PROPAGATE THE GREAT DOCTRINES OF THE FAITH AS THEY ARE SUMMARIZED IN OUR STATEMENT OF DOCTRINE AND EXPLANATORY NOTES SPIRITUALLY, IT IS THE PURPOSE OF TALBOT TO DEVELOP IN THE LIVES OF ITS STUDENTS A SPIRITUAL LIFE THAT IS IN HARMONY WITH THE GREAT DOCTRINES TAUGHT, SO THAT THEY MAY GROW IN THE GRACE AS WELL AS IN THE KNOWLEDGE OF OUR LORD AND SAVIOR JESUS CHRIST SPECIFICALLY, THE GOAL IS TO EDUCATE AND GRADUATE STUDENTS CHARACTERIZED BY COMMITMENT TO SERVING CHRIST, MISSIONARY AND EVANGELISTIC ZEAL AND A SOLID KNOWLEDGE OF THE SCRIPTURES TO ACCOMPLISH THESE OBJECTIVES THE SEMINARY CONDUCTS A CHAPEL PROGRAM AND GIVES ATTENTION TO ITS STUDENTS' MINISTRY/SERVICE OPPORTUNITIES ACADEMICALLY, IT IS THE PURPOSE OF THE SEMINARY TO PROVIDE ITS STUDENTS WITH THE BEST IN THEOLOGICAL EDUCATION SO THEY MAY BE EQUIPPED TO PREACH AND TEACH THE WORD OF GOD INTELLIGENTLY AND PRESENT IT ZEALOUSLY TO THE WORLD IN KEEPING WITH THIS GOAL EVERY DEPARTMENT IS GEARED TO EMPHASIZE THE CLEAR AND ACCURATE EXPOSITION OF THE SCRIPTURES THE BIBLICAL LANGUAGES ARE UTILIZED TO EXPOSE THE INNER MEANING OF THE INSPIRED TEXT BIBLE EXPOSITION, BY SYNTHESIS OR ANALYSIS, PRESENTS A CONNECTED AND RELATED INTERPRETATION OF THE INFALLIBLE BOOK SYSTEMATIC THEOLOGY MOVES TOWARD A WELL-ORGANIZED AND STRUCTURED ARRANGEMENT OF BIBLICAL TRUTH HISTORICAL THEOLOGY ENGAGES ITSELF TO ACQUAINT THE STUDENT WITH THE PROGRESS OF THE INERRANT WORD AMONG THE HOUSEHOLD FAITH THROUGHOUT THE CHRISTIAN ERA PHILOSOPHY OF RELIGION FURNISHES THE ELEMENTS WHEREBY THE SERVANT OF CHRIST MAY GIVE A WELL-DEVELOPED REASON FOR THE FAITH THAT IS WITHIN MISSIONS, CHRISTIAN MINISTRY AND LEADERSHIP, AND CHRISTIAN EDUCATION STRIVE TO PERFECT IN THE STUDENT A SKILLFUL AND WINSOME PRESENTATION OF TRUTH, PRIVATELY AND PUBLICLY TALBOT STANDS FOR ONE FAITH, ONE INTEGRATED CURRICULUM, ONE ETERNAL WORD OF GOD AND ITS EFFECTIVE PROCLAMATION TO A MODERN GENERATION WITH ITS MULTIPLICITY OF NEEDS IT IS THE PURPOSE OF THE SEMINARY TO PREPARE FOR THE GOSPEL MINISTRY THOSE WHO BELIEVE, LIVE AND PREACH THE GREAT HISTORIC DOCTRINES OF FAITH THAT HAVE BEEN COMMITTED TO THE CHURCH TO REALIZE THESE BROAD OBJECTIVES, THE SEMINARY OFFERS NINE DEGREE PROGRAMS, EACH WITH ITS OWN DISTINCTIVE PURPOSE

4c (Code) (Expenses $ 13,268,022 including grants of $ 3,425,201) (Revenue $ 16,149,881)

ROSEMEAD SCHOOL OF PSYCHOLOGY ROSEMEAD'S EDUCATIONAL DISTINCTIVE ARE ITS STRONG PROFESSIONAL TRAINING ORIENTATION AND ITS GOAL OF RELATING THE DATA AND CONCEPTS OF PSYCHOLOGY TO THOSE OF CHRISTIAN THEOLOGY SINCE BOTH PSYCHOLOGY AND THEOLOGY ADDRESS THE HUMAN CONDITION, ROSEMEAD 'S FACULTY BELIEVES THERE IS A GREAT DEAL TO BE GAINED BY AN INTERDISCIPLINARY STUDY OF THE NATURE OF PERS0NS CONSEQUENTLY, ALL STUDENTS TAKE A SERIES OF THEOLOGY COURSES AND INTEGRATION SEMINARS DESIGNED TO STUDY THE RELATIONSHIP OF PSYCHOLOGICAL AND THEOLOGICAL CONCEPTIONS OF HUMAN FUNCTIONING THIS SERIES OF COURSES LENGTHENS ROSEMEAD'S DOCTORAL PROGRAM BY APPROXIMATELY ONE YEAR BEYOND M0ST FOUR YEAR CLINICAL PROGRAMS WHILE RECOGNIZING THAT THE DISCIPLINES OF PSYCHOLOGY AND THEOLOGY HAVE SOME VERY DIFFERENT DATA AND METHODOLOGIES, THEIR OVERLAPPING CONTENT, GOALS, AND PRINCIPLES PROVIDE A RICH RESOURCE FOR INTERDISCIPLINARY STUDY ISSUES GROWING OUT OF THESE OVERLAPPING CONCERNS COVER A RANGE OF TOPICS RELATING TO RESEARCH, THEORY AND CLINICAL PRACTICE BY ENCOURAGING THIS STUDY, ROSEMEAD IS ATTEMPTING TO TRAIN PSYCHOLOGISTS WITH A BROAD VIEW OF HUMAN NATURE THAT INCLUDES A SENSITIVITY TO THE RELIGIOUS DIMENSION OF LIFE THROUGH ITS INTERACTION WITH MEMBERS OF THE CHRISTIAN COMMUNITY, ROSEMEAD IS ALSO COMMITTED TO DEMONSTRATING TO THE CHURCH THE POTENTIALLY SIGNIFICANT CONTRIBUTIONS AN UNDERSTANDING OF THE DATA AND METHODS OF PSYCHOLOGY CAN MAKE THE CHURCH'S ROLE OF MINISTERING TO THE WHOLE PERSON STUDENTS DESIGNING TO FOCUS ON THEIR PROFESSIONAL PRACTICE ON CHILDREN, COUPLES OR FAMILIES MAY TAKE AN EMPHASIS IN FAMILY-CHILD PSYCHOLOGY THIS EMPHASIS REQUIRES COMPLETION OF ELECTIVE COURSES IN ADDITION TO THE REGULAR DOCTORAL REQUIREMENTS STUDENTS EMPHASIZING IN FAMILY-CHILD PSYCHOLOGY ALSO WRITE THEIR DISSERTATIONS OR DOCTORAL RESEARCH PAPERS IN A FAMILY CHILD AREA, SPEND THEIR YEAR-LONG OUTPATIENT PRACTICUM IN A SETTING WHERE AT LEAST ONE-HALF OF THEIR WORK IS WITH CHILDREN, COUPLES OR FAMILIES, AND COMPLETE AN INTERNSHIP IN A SETTING WHERE AT LEAST ONE THIRD OF THEIR WORK IS WITH A FAMILY-CHILD POPULATION THEY MAY ALSO ELECT OTHER FAMILY RELATED COURSES SUCH AS DEVELOPMENT OF RELIGIOUS UNDERSTANDING IN CHILDREN AND ADOLESCENTS, AND HUMAN SEXUALITY AT THE HEART OF AN EFFECTIVE TRAINING PROGRAM IN PROFESSIONAL PSYCHOLOGY IS THE OPPORTUNITY TO DEVELOP THE PERSONAL INSIGHTS AND SKILLS NECESSARY FOR EMPATHIC AND EFFECTIVE INTERACTION WITH A WIDE RANGE OF SETTINGS IN ORDER TO MEET THIS NEED, ROSEMEAD HAS DEVELOPED A SEQUENCE OF EXPERIENCES DESIGNED TO PROMOTE PERSONAL GROWTH AND COMPETENCE IN INTERPERSONAL RELATIONSHIP AS WELL AS SPECIFIC CLINICAL SKILLS BEGINNING IN THEIR FIRST YEAR OF STUDY, STUDENTS PARTICIPATE IN A VARIETY OF ACTIVITIES DESIGNED TO PROMOTE PROFESSIONAL AWARENESS AND PERSONAL GROWTH THE FIRST YEAR ACTIVITIES INCLUDE ACTIVE TRAINING IN EMPATHY SKILLS IN AN ON-CAMPUS PER-PRACTICUM EXPERIENCE THE PER-PRACTICUM COURSE CONSISTS OF EXERCISES TO ASSESS AND FACILITATE INTERPERSONAL SKILLS AND AN THE INITIAL OPPORTUNITY FOR THE STUDENT TO WORK WITH A VOLUNTEER COLLEGE CLIENT IN A HELPING ROLE DURING THE SECOND YEAR, ALL STUDENTS PARTICIPATE IN INTERPERSONAL TRAINING THERAPY AS PARTICIPANTS, STUDENTS PERSONALLY EXPERIENCE SOME OF THE GROWTH-PRODUCING ASPECTS OF INTERPERSONAL RELATIONSHIPS IN ADDITION, STUDENTS BEGIN THEIR FORMAL PRACTICUM AND PSYCHOTHERAPY LAB COURSES IN THE SECOND YEAR STUDENTS ARE PLACED IN SUCH PROFESSIONAL FACILITIES AS OUTPATIENT CLINICS, HOSPITALS, COLLEGE COUNSELING CENTERS, PUBLIC SCHOOLS AND COMMUNITY HEALTH ORGANIZATIONS ON THE BASIS OF THEIR INDIVIDUAL READINESS, NEEDS AND INTEREST THESE PRACTICUM EXPERIENCES ARE SUPERVISED BOTH BY ROSEMEAD'S FACULTY AND QUALIFIED PROFESSIONALS WORKING IN THE PRACTICUM AGENCIES IN THE PSYCHOTHERAPY LAB COURSES, STUDENTS RECEIVE BOTH INSTRUCTION AND SUPERVISED EXPERIENCE, OFFERING CLINICAL SERVICES FROM THE THEORETICAL ORIENTATION OF THE COURSE STUDENTS ELECT LAB COURSES FROM OFFERINGS SUCH AS INTRODUCTION TO CHILD & ADOLESCENT THERAPY, MARRIAGE AND FAMILY THERAPY , GROUP THERAPY, COGNITIVE BEHAVIORAL THERAPY WITH CHILDREN, GESTALT THERAPY, AND BIOFEEDBACK DURING THE THIRD YEAR MOST DOCTORAL STUDENTS TAKE TWO OR THREE PSYCHOTHERAPY LAB COURSES, WORK IN AN ADULT OUTPATIENT PRACTICUM SETTING, AND BEGIN INDIVIDUAL TRAINING THERAPY THIS THERAPY IS DESIGNED TO GIVE THE STUDENT FIRST-HAND EXPERIENCE IN THE ROLE OF A CLIENT AND IS CONSIDERED AN OPPORTUNITY FOR BOTH PERSONAL GROWTH AND FOR LEARNING THERAPEUTIC PRINCIPLES AND TECHNIQUES A MINIMUM OF 50 HOURS OF INDIVIDUAL TRAINING IS REQUIRED SUCH ISSUES AS TIMING, CHOICE OF THERAPIST AND SPECIFIC GOALS ARE DETERMINED BY STUDENTS IN CONJUNCTION WITH THEIR ADVISORS AND THE CLINICAL TRAINING COMMITTEE WHEN DOCTORAL STUDENTS REACH THEIR FOURTH YEAR, MOST OF THEIR TIME IS SPENT IN ELECTIVES FROM THE THERAPY, INTEGRATION, AND GENERAL PSYCHOLOGY COURSES, ADVANCED PRACTICUM ASSIGNMENTS, AND INDEPENDENT STUDY OR RESEARCH THIS STEP-BY-STEP PROGRESSION IN PROFESSIONAL TRAINING EXPERIENCES GIVES THE STUDENT PERSONAL EXPERIENCE WITH A WIDE RANGE OF PERSONALITIES IN A VARIETY OF SETTINGS AND PROVIDES THE NECESSARY PREPARATION FOR A FULL-TIME INTERNSHIP DURING THE YEAR OF STUDY

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 27,162,734 including grants of $ 7,012,184) (Revenue $ 33,062,572)

4e **Total program service expenses** ▶ 155,416,275

Part IV Checklist of Required Schedules

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

Part IV **Checklist of Required Schedules** *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	**1a**	365			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	4,065			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			**3b**	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	Yes	
b	If "Yes," enter the name of the foreign country ▶GM See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			**14b**		

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . **1a** 24 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** 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .	**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .	**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	**5**		No
6	Did the organization have members or stockholders? . . .	**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .	**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .	**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . .	**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .	**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .	**9**		No

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

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

Section C. Disclosure

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

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

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

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

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

▶Michael A Pierce CPA (Inactive)

13800 Biola Avenue
La Mirada, CA 906390001 (562) 903-4777

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

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

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

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

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

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

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

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

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

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

1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	2,876,498	0	599,714

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶138

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BON APPETIT MANAGEMENT COMPANY 14730 BEACH BLVD STE 107 LA MIRADA, CA 90638	FOOD MANAGEMENT	6,834,614
Harthorne Power Systems 16945 Camino San Bernardo San Diego, CA 92127	GENERAL CONTRACTOR	658,428
Constellation NewEnergy 9960 Corporate Campus Dr Louisville, KY 40223	GENERAL CONTRACTOR	596,815
JUAN FIGUEROA ELECTRIC INC 12533 LAMBERT ROAD WHITTIER, CA 906062711	GENERAL CONTRACTOR	197,346
Air Control Systems Inc 1940 S Grove Ave Ontario, CA 91761	GENERAL CONTRACTOR	183,653

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶45

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c	98,406				
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e	859,063				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	31,742,073				
	g Noncash contributions included in lines 1a-1f $	13,456,832				
	h **Total.** Add lines 1a-1f . . . . ▶		32,699,542			
Program Service Revenue		Business Code				
	2a Tuition and Fees	611600	157,562,547	157,562,547		
	b AuxiliaryService Sales	611710	26,136,481	26,136,481		
	c Public and Student fees	611600	3,814,969	3,814,969		
	d Other Program Service	611710	1,576,172	1,576,172		
	e					
	f All other program service revenue		0	0	0	0
	g **Total.** Add lines 2a–2f . . . . ▶		189,090,169			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . ▶		3,185,732			3,185,732
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties . . . . ▶		27,491			27,491
	6a Gross rents — (i) Real: 472,812	(ii) Personal: 3,242				
	b Less rental expenses — (i) Real: 290,424	(ii) Personal:				
	c Rental income or (loss) — (i) Real: 182,388	(ii) Personal: 3,242				
	d Net rental income or (loss) . . . . ▶		185,630			185,630
	7a Gross amount from sales of assets other than inventory — (i) Securities: 35,145,955	(ii) Other: 52,387				
	b Less cost or other basis and sales expenses — (i) Securities: 30,986,159	(ii) Other: 53,136				
	c Gain or (loss) — (i) Securities: 4,159,796	(ii) Other: -749				
	d Net gain or (loss) . . . . ▶		4,159,047			4,159,047
	8a Gross income from fundraising events (not including $ 98,406 of contributions reported on line 1c) See Part IV, line 18 . . a	57,965				
	b Less direct expenses . . . b	56,684				
	c Net income or (loss) from fundraising events . . ▶		1,281			1,281
	9a Gross income from gaming activities See Part IV, line 19 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from gaming activities . . ▶					
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
	11a Advertising Income	541800	14,840		14,840	
	b Other Revenue	900099	83,040	83,040		
	c					
	d All other revenue		0	0	0	0
	e **Total.** Add lines 11a–11d . . . . ▶		97,880			
	12 **Total revenue.** See Instructions . . . . . ▶		229,446,772	189,173,209	14,840	7,559,181

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	39,750,168	39,750,168		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	371,256	371,256		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,233,524	1,715,516	518,008	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	76,223,794	57,094,899	17,240,057	1,888,838
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,925,169	3,014,828	910,341	
9 Other employee benefits	13,818,169	10,613,405	3,204,764	
10 Payroll taxes	5,357,974	4,115,332	1,242,642	
11 Fees for services (non-employees)				
a Management				
b Legal	85,160	65,409	19,751	
c Accounting	109,627	84,202	25,425	
d Lobbying				
e Professional fundraising services See Part IV, line 17	132,000			132,000
f Investment management fees	447,348	343,597	103,751	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	14,205,855	10,910,407	3,294,446	1,002
12 Advertising and promotion	1,530,546	1,141,032	344,539	44,975
13 Office expenses	3,881,013	2,844,555	858,926	177,532
14 Information technology	1,990,116	1,519,919	458,946	11,251
15 Royalties				
16 Occupancy	3,476,362	2,668,764	805,845	1,753
17 Travel	3,043,662	2,257,656	681,709	104,297
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	487,878	369,114	111,456	7,308
20 Interest	6,261,427	4,809,252	1,452,175	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,807,774	7,533,116	2,274,658	
23 Insurance	826,905	628,552	189,794	8,559
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Licenses and Fees	2,914,126	1,766,370	533,363	614,393
b Honorariums	972,813	589,661	178,051	205,101
c Departmentals Meals	1,015,342	615,440	185,835	214,067
d Equipment Maintance	348,659	211,336	63,814	73,509
e All other expenses	631,023	382,489	115,494	133,040
25 **Total functional expenses.** Add lines 1 through 24e	193,847,690	155,416,275	34,813,790	3,617,625
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		27,891,141	1	56,509,932
	2	Savings and temporary cash investments		37,113,552	2	14,957,883
	3	Pledges and grants receivable, net		4,361,460	3	3,690,715
	4	Accounts receivable, net		1,568,290	4	2,650,608
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		1,072,491	5	1,007,930
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		5,023,788	7	5,397,108
	8	Inventories for sale or use		334,966	8	345,411
	9	Prepaid expenses and deferred charges		1,257,509	9	1,309,630
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 305,483,247			
	b	Less accumulated depreciation	10b 121,138,306	158,898,510	10c	184,344,941
	11	Investments—publicly traded securities		129,029,900	11	128,365,021
	12	Investments—other securities See Part IV, line 11		8,426,465	12	8,720,999
	13	Investments—program-related See Part IV, line 11		10,705,051	13	14,222,067
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		13,739,987	15	5,280,310
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		399,423,110	16	426,802,555
Liabilities	17	Accounts payable and accrued expenses		13,639,834	17	17,650,329
	18	Grants payable			18	
	19	Deferred revenue		10,310,752	19	11,197,038
	20	Tax-exempt bond liabilities		132,336,615	20	133,987,492
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	
	23	Secured mortgages and notes payable to unrelated third parties		7,292,508	23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		12,535,917	25	11,577,535
	26	**Total liabilities.** Add lines 17 through 25		176,115,626	26	174,412,394
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		176,940,197	27	187,134,809
	28	Temporarily restricted net assets		26,370,055	28	43,696,262
	29	Permanently restricted net assets		19,997,232	29	21,559,090
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		223,307,484	33	252,390,161
	34	Total liabilities and net assets/fund balances		399,423,110	34	426,802,555

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	229,446,772
2	Total expenses (must equal Part IX, column (A), line 25)	2	193,847,690
3	Revenue less expenses Subtract line 2 from line 1	3	35,599,082
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	223,307,484
5	Net unrealized gains (losses) on investments	5	-6,646,125
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	129,720
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	252,390,161

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID: 14000329
Software Version: 2014v1.0
EIN: 95-0549600
Name: Biola University Inc

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

(Code) (Expenses $ 27,162,734 including grants of $ 7,012,184) (Revenue $ 33,062,572)

OTHER PROGRAM SERVICES COOK SCHOOL OF INTERCULTURAL STUDIES EXPENSES GRANTS REVENUE 9,118,972 2,354,104 11,099,643 SCHOOL OF EDUCATION EXPENSES GRANTS REVENUE 7,994,837 2,063,904 9,731,342 CROWELL SCHOOL OF BUSINESS EXPENSES GRANTS REVENUE 6,779,133 1,750,064 8,251,583 INTERTERM EXPENSES GRANTS REVENUE 1,564,505 403,884 1,904,320 SUMMER SCHOOL EXPENSES GRANTS REVENUE 1,705,288 4440,228 2,075,682 COOK SCHOOL OF INTERCULTURAL STUDIES THE PRIMARY OBJECTIVE OF THE COOK SCHOOL OF INTERCULTURAL STUDIES ARISES FROM THE MANDATE GIVEN BY THE LORD JESUS CHRIST TO MAKE DISCIPLES OF EVERY NATION BASED ON AN UNDERSTANDING OF BOTH HUMAN BEINGS AND CULTURE THE CSICS STRIVES TO ENABLE STUDENTS TO DEMONSTRATE A KNOWLEDGE AND AN UNDERSTANDING OF HUMAN BEINGS WITHIN THEIR CULTURAL SETTING WE FURTHER STRIVE TO ENABLE STUDENTS TO DEMONSTRATE A KNOWLEDGE AND UNDERSTANDING OF THE THEOLOGICAL, HISTORICAL, SOCIOLOGICAL ANTHROPOLOGICAL AND LINGUISTIC ISSUES ASSOCIATED WITH THE CROSS CULTURAL COMMUNICATION OF THE GOSPEL THROUGH A BROAD RANGE OF PROFESSIONS AND VOCATIONS IT IS THE DESIRE OF THE FACULTY THAT EACH STUDENT IN THE PROGRAM WILL FIND IN THEIR PARTICULAR CAREER CHOICE THE MEANS TO EFFECTIVE CROSS CULTURAL PERSONAL MINISTRY AND EVANGELISM IN THE UNDERGRADUATE DEPARTMENTS STUDENTS ARE EXPOSED TO THE FOUNDATIONAL CONCEPTS WITHIN ANTHROPOLOGY, CROSS-CULTURAL ENGAGEMENT, CULTURAL DIVERSITY, CROSS-CULTURAL COMMUNICATION, AND THEOLOGIZING WITHIN CULTURAL CONTEXTS STUDENTS WORK CLOSELY WITH THEIR ADVISORS TO BUILD A PROGRAM ACCORDING TO THEIR CAREER OBJECTIVES THEY ARE ENCOURAGED TO CHOOSE SPECIFIC CONCENTRATIONS THAT PROVIDE THE SKILLS FOR THEIR CHOSEN CAREERS, OR IN COMBINATION WITH OTHER DISCIPLINES IN THE UNIVERSITY TO COMBINE THEIR CROSS-CULTURAL SKILLS WITH PREPARATION IN BICULTURAL EDUCATION, CROSS-CULTURAL MEDIA COMMUNICATION, SOCIAL WORK, CROSS CULTURAL COUNSELING, INTERNATIONAL RELATIONS OR INTERNATIONAL BUSINESS ADMINISTRATION IN THE GRADUATE DEPARTMENTS STUDENTS ENGAGE IN A DEEPER LEVEL OF CRITICAL ANALYSIS OF THEORIES AND PRACTICES ASSOCIATED WITH GLOBAL ISSUES, THE INTERNATIONALIZATION OF THE CHRISTIAN FAITH, THE STUDY OF CULTURES AND CULTURE CHANGE, AND THE FORMATION OF PEDAGOGICAL CONCEPTS AND PRACTICES APPROPRIATE TO CROSS-CULTURAL EDUCATIONAL THEORY AND PRACTICE A UNIQUE FEATURE OF THE GRADUATE STUDIES DEGREES IS THE USE OF BLENDED DELIVERY SYSTEMS THAT ALLOW STUDENTS WHO ARE CURRENTLY IN WORKING CAREERS TO PURSUE THEIR DEGREES WHILE STILL REMAINING IN THEIR CAREERS SCHOOL OF EDUCATION THE SCHOOL OF EDUCATION SERVES A DIVERSE STUDENT BODY, CONSISTING OF MORE THAN 300 UNDERGRADUATE STUDENTS (230 LIBERAL STUDIES MAJORS AND APPROXIMATELY 201 SINGLE SUBJECT MAJORS) AND 145 GRADUATE STUDENTS OUR FULL-TIME FACULTY IS MADE UP OF OUTSTANDING PROFESSIONALS WITH DECADES OF COMBINED EXPERIENCE IN CLASSROOM AND ADMINISTRATIVE SETTINGS AT THE UNDERGRADUATE LEVEL, THE SCHOOL OF EDUCATION IS HOME TO THE LIBERAL STUDIES MAJOR, WHICH CONSISTENTLY RANKS AMONG THE FIVE MOST POPULAR UNDERGRADUATE MAJORS AT BIOLA AT THE GRADUATE LEVEL, THE SCHOOL OF EDUCATION OFFERS THE FLEXIBLE MASTER OF ARTS IN TEACHING (M A T) AND MASTER OF ARTS IN EDUCATION (M A ED) PROGRAMS, WHICH CAN BE TAKEN IN PERSON, ONLINE, OR IN COMBINATION AND CAN BE TAILORED TO MEET THE INDIVIDUAL INTERESTS OF NEW AND EXPERIENCED TEACHERS ALIKE OUR STATE-ACCREDITED TEACHERS PREPARATION PROGRAM OFFERS TEACHING CREDENTIALS AT BOTH THE GRADUATE AND UNDERGRADUATE LEVELS IN MULTIPLE AND SINGLE SUBJECTS WE ALSO OFFER FIVE LEVELS OF EARLY CHILDHOOD PERMITS AT THE UNDERGRADUATE AND GRADUATE LEVEL, ACCREDITED BY CCTC, AND ONE FOUR-COURSE INSTITUTION-SPONSORED ONLINE SPECIAL EDUCATION CERTIFICATE CROWELL SCHOOL OF BUSINESS THE CROWELL SCHOOL OF BUSINESS PREPARES STUDENTS ACADEMICALLY WITH A FOUNDATIONAL BUSINESS EDUCATION WHILE NURTURING THEIR CHRISTIAN COMMITMENT THROUGH SOLID BIBLICAL INTEGRATION IN COURSES AND CONTACT WITH FACULTY AND STAFF OUR GOAL IS TO PREPARE GRADUATES TO BE LEADERS IN THEIR PROFESSION, IMPACTING THE CULTURE FOR CHRIST THE MASTER'S OF BUSINESS ADMINISTRATION PROGRAM AT BIOLA UNIVERSITY IS DESIGNED FOR BUSINESS PEOPLE WHO ALREADY HAVE EXPERIENCE IN MANAGEMENT BUT WANT TO INCREASE THEIR UNDERSTANDING OF THE ENTREPRENEURIAL SPIRIT WITHIN THE CORPORATE CULTURE IT PREPARES FOLLOWERS OF JESUS CHRIST TO BE SUCCESSFUL LEADERS IN THE MARKETPLACE THE PROGRAM INCORPORATES FOUNDATIONAL COURSES IN THEOLOGY ALONGSIDE THE CONSTANT APPLICATION OF BIBLICAL PRINCIPLES FOR DECISION FOR THE PART-TIME, FULLY EMPLOYED STUDENT, WITH CLASSES HELD IN THE EVENING WE ARE PART OF THE BIOLA UNIVERSITY FAMILY OF SIX SCHOOLS FOR 100 YEARS OUR MISSION HAS BEEN BIBLICALLY CENTERED EDUCATION, SCHOLARSHIP AND SERVICE, EQUIPPING MEN AND WOMEN IN MIND AND CHARACTER TO IMPACT THE WORLD FOR THE LORD JESUS CHRIST INTERTERM SESSION TO FACILITATE THE COMPLETION OF GRADUATION AND ALSO TO ALLOW EXPOSURE TO CREATIVE LEARNING AND TO ENRICH STUDENTS' ACADEMIC PROGRAMS, THE UNIVERSITY PROVIDES AN INTERTERM PROGRAM IN JANUARY A BALANCED PROGRAM OF GENERAL EDUCATION, BIBLE, ELECTIVES AND GRADUATE COURSES IS OFFERED STUDENTS MAY ENRICH THEIR COURSE OF STUDY AND REDUCE THE OVERALL TIME SPENT IN SCHOOL OR DECREASE THEIR REGULAR COURSE LOAD BY CAREFUL SELECTION OF INTERTERM COURSES COURSES MAY BE INNOVATIVE OR THE CONTENT MAY BE IN RESPONSE TO SPECIALIZED NEEDS OR CURRENT TOPICS OPPORTUNITIES TO PARTICIPATE IN TRAVEL AND OTHER NON-TRADITIONAL COURSES ARE ALSO OFFERED SUMMER SESSION A CONTINUING SUMMER SESSION PROGRAM PROVIDES STUDENTS WITH THE OPPORTUNITY FOR A GREATER DEGREE OF FLEXIBILITY IN PLANNING THEIR TOTAL PROGRAM STUDENTS MAY ENRICH THEIR COURSE OF STUDY AND REDUCE THE OVERALL TIME SPENT IN SCHOOL OR DECREASE THEIR REGULAR COURSE LOAD BY CAREFUL SELECTION OF SUMMER SESSION COURSES COURSES OF STUDY MAY BE APPLIED TO BOTH THE DEGREE AND THE TEACHING CREDENTIAL PROGRAMS INSTRUCTION IS OFFERED IN STANDARD COURSES BY THE BIOLA FACULTY AND CAPABLE VISITING PROFESSORS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) BARRY COREY President	40 00	X		X				429,534	0	91,085
(1) PROMOD HAGUE TRUSTEE	2 00	X						0	0	0
(2) STANLEY JANTZ TRUSTEE	2 00	X						0	0	0
(3) HANNAH LEE TRUSTEE	2 00	X						0	0	0
(4) JOHN SIEFKER TRUSTEE	2 00	X						0	0	0
(5) ALLAN KAVALICH TRUSTEE	2 00	X						0	0	0
(6) RAY JOHNSON TRUSTEE	2 00	X						0	0	0
(7) KENNITH THOMPSON TRUSTEE	2 00	X						0	0	0
(8) WAYNE LOWELL Trustee	2 00	X						0	0	0
(9) DAVID MITCHELL TRUSTEE	2 00	X						0	0	0
(10) DWIGHT HANGER TRUSTEE	2 00	X						0	0	0
(11) CAROL HAWKINS TRUSTEE	2 00	X						0	0	0
(12) MICHAEL MAPLES TRUSTEE	2 00	X						0	0	0
(13) AL MIJARES TRUSTEE	2 00	X						17,757	0	0
(14) BRYAN LORITTS TRUSTEE	2 00	X						0	0	0
(15) BRADLEY COLE TRUSTEE	2 00	X						0	0	0
(16) JERRY RUEB TRUSTEE	2 00	X						0	0	0
(17) Philip Paul TRUSTEE	2 00	X						0	0	0
(18) Rebecca Andrews Trustee	2 00	X						0	0	0
(19) David Gyertson Trustee	2 00	X						0	0	0
(20) Kelly Monroe Kullberg Trustee	2 00	X						0	0	0
(21) David Kinnaman Trustee	2 00	X						0	0	0
(22) Adam Edgerly Trustee	2 00	X						0	0	0
(23) Dean VandeKamp Trustee	2 00	X						0	0	0
(24) DAVID KOONTZ ASSISTANT SECRETARY	40 00			X				150,885	0	25,082

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(26) GREGORY VAUGHAN VP ENROLLMENT MANAGEMENT	40 00			X				176,479	0	33,500
(1) DAVID NYSTROM PROVOST AND SENIOR VP	40 00			X				228,982	0	36,860
(2) ADAM MORRIS VP ADVANCEMENT	40 00			X				195,199	0	106,517
(3) MICHAEL PIERCE VP, BUS AND FINANCIAL AFFAIRS	40 00			X				231,845	0	67,943
(4) SANDRA WEAVER ASSISTANT SECRETARY	40 00			X				145,627	0	19,784
(5) GREG BALSANO VP OF UNIVERSITY SERVICES	40 00			X				194,265	0	30,790
(6) Lee J Wilhite VP UMC 12-1-2014	40 00			X				14,515	0	0
(7) Irene Neller VP UCM August 31, 2014				X				0	0	0
(8) Peter C Hill PROFESSOR	40 00					X		237,808	0	16,929
(9) Christoper Grace Professor	40 00					X		195,092	0	72,626
(10) SCOTT RAE PROFESSOR	40 00					X		166,805	0	36,066
(11) JERRY MACKEY CORPORATE LEGAL	30 00					X		164,381	0	35,720
(12) Richard E Bee Senior Director of Alumni and Parents	40 00					X		177,324	0	26,812
(13) Irene Neller VP UCM August 31, 2013	40 00						X	150,000	0	0

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*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

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

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

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

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

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

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

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

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

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ____

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

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support** Add lines 7 through 10						

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2013 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	
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% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV **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

			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**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	**3a**		
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.*	**3c**		
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)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990).*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	**9a**		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	**9b**		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	**9c**		
10a	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**		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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**		

Part IV **Supporting Organizations** (continued)

Section 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**		

Section 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**		

Section 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**		

Section 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 instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
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	Parent of Supported Organizations **Answer (a) and (b) below.**			
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 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 Type III 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**		
a	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			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2	Enter 85% of line 1	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4	Enter greater of line 2 or line 3	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
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 required--see 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 Applied 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. . . . . . . ______			
e From 2014. . . . . . . ______			

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

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493117003186

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

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

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

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

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

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $ ______________

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1 ▶ $ ______________

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

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

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

a ☐ Public exhibition
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other
c ☐ Preservation for future generations

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

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

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

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

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

			Amount
c	Beginning balance	1c	718,070
d	Additions during the year	1d	2,099,386
e	Distributions during the year	1e	701,049
f	Ending balance	1f	2,116,407

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☑ No

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	105,432,228	87,824,443	74,454,177	69,925,592	55,957,775
b	Contributions	8,859,807	8,650,281	8,293,758	7,131,678	8,914,823
c	Net investment earnings, gains, and losses	47,053	11,507,112	7,409,398	-492,943	7,336,522
d	Grants or scholarships	2,752,363	2,314,567	2,130,553	1,872,138	2,004,312
e	Other expenditures for facilities and programs	311,127	235,041	202,337	238,012	279,216
f	Administrative expenses					
g	End of year balance	111,275,598	105,432,228	87,824,443	74,454,177	69,925,592

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

a Board designated or quasi-endowment ▶ 73 8 %

b Permanent endowment ▶ 17 6 %

c Temporarily restricted endowment ▶ 8 6 %

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

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

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,728,904		6,728,904
b Buildings		234,945,175	69,631,518	165,313,657
c Leasehold improvements				
d Equipment		53,502,907	42,663,117	10,839,790
e Other		10,306,261	8,843,671	1,462,590
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				184,344,941

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
PERKINS NSL	3,095,387
ASSET RETIREMENT OBLIGATION	1,538,030
LIABILITIES FOR ANNUITIES PAYABLE	5,806,459
AMOUNTS HELD ON BEHALF OF OTHERS	1,137,659
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	11,577,535

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

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

1	Total revenue, gains, and other support per audited financial statements			1	181,908,492
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-6,646,125		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	9,219		
e	Add lines **2a** through **2d**			2e	-6,636,906
3	Subtract line **2e** from line **1**			3	188,545,398
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	909,670		
b	Other (Describe in Part XIII)	4b	39,991,704		
c	Add lines **4a** and **4b**			4c	40,901,374
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	229,446,772

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

1	Total expenses and losses per audited financial statements			1	152,825,815
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	9,219		
e	Add lines **2a** through **2d**			2e	9,219
3	Subtract line **2e** from line **1**			3	152,816,596
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	909,670		
b	Other (Describe in Part XIII)	4b	40,121,424		
c	Add lines **4a** and **4b**			4c	41,031,094
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	193,847,690

Part XIII **Supplemental Information**

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

Return Reference	Explanation
Schedule D, Part IV, Line 1b Agent, trustee, custodian, or other intermediary arrangement	BIOLA (OR ITS DESIGNATED INDIVIDUAL) IS NAMED AS ADMINISTRATOR OR SUCCESSOR TRUSTEE ON TESTAMENTARY GIFTS (ESTATES OR REVOCABLE LIVING TRUSTS) WHEN THE AGREEMENT MATURES UPON THE DEATH OF THE GRANTOR, BIOLA ASSUMES ITS FIDUCIARY ROLE TO MARSHAL ASSETS, PAY EXPENSES AND DISTRIBUTE BENEFICIARY PAYMENTS THE ADMINISTRATION OF EACH ARRANGEMENT MAY LAST SEVERAL YEARS UNTIL ALL DISTRIBUTIONS ARE MADE AND THE ACCOUNTS ARE CLOSED
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE ENDOWMENT EARNINGS ARE USED TO UNDERWRITE THE PROGRAMS AND ADMINISTRATION OF THE UNIVERSITY, WITH SPECIFIC APPROPRIATIONS MADE TO STUDENT AID, ACADEMIC PROGRAMS AND FACILITY MAINTENANCE
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	THE UNIVERSITY FOLLOWS ASC 740, ACCOUNTING FOR INCOME TAXES, WHICH ESTABLISHES FOR ALL ENTITIES, INCLUDING PASS-THROUGH ENTITIES, A MINIMUM THRESHOLD FOR FINANCIAL STATEMENT RECOGNITION OF THE BENEFIT OF POSITIONS TAKEN IN FILING TAX RETURNS (INCLUDING WHETHER AN ENTITY IS TAXABLE IN A PARTICULAR JURISDICTION) AND REQUIRES CERTAIN EXPANDED TAX DISCLOSURES THE OPEN FEDERAL TAX YEARS FOR THE UNIVERSITY ARE GENERALLY TAX YEARS ENDED JUNE 30, 2011 THROUGH 2015 AND THE OPEN CALIFORNIA STATE TAX YEARS ARE GENERALLY TAX YEARS ENDED JUNE 30, 2012 THROUGH 2015 MANAGEMENT BELIEVES THAT NO UNCERTAIN TAX POSITIONS EXIST FOR THE UNIVERSITY AT JUNE 30, 2014 AND 2015 AND MANAGEMENT DOES NOT ANTICIPATE A CHANGE IN UNCERTAIN TAX BENEFITS IN THE 12 MONTHS FOLLOWING JUNE 30, 2015
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	Fund Raising Expense - 56684 Arrington Square Corporation Adjustment - -47465
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Student Aid - 40121424 Change in Split Interest Agreements - -129720
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	Fundraising Expense - 56684 Arrington Square Corporation - -47465
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Student Aid - 40121424

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493117003186

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I

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

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

Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	BIOLA PUBLICIZES ITS RACIALLY NONDISCRIMINATION POLICY THROUGH ADVERTISEMENTS, BROADCASTS, AND MAILERS IT IS ALSO INCLUDED ON THE UNIVERSITY'S WEBSITE, IN ITS CATALOG AND STUDENT HANDBOOK
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	BIOLA UNIVERSITY SERVES AS A CONDUIT TO RECEIVE AND DISBURSE STUDENT AID FUNDS FROM GOVERNMENTAL AGENCIES SUCH AS THE DEPARTMENT OF EDUCATION AND DEPARTMENT OF HEALTH AND HUMAN SERVICES UNDER THE FOLLOWING PROGRAMS FEDERAL ACADEMIC COMPETITIVENESS GRANT PROGRAM, FEDERAL PELL AWARD GRANT PROGRAM, FEDERAL PERKINS LOAN PROGRAM, FEDERAL NATIONAL SMART GRANT PROGRAM, FEDERAL NURSING STUDENT LOAN PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493117003186

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Information about Schedule F (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	7			1,667,129
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	7			1,667,129

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Central America and the Caribbean	Humanitarian	10,760	Cash			
(2)									
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . ▶ 0

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

	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)	SCHOLARSHIPS/STUDENT AID	Europe (Including Iceland and Greenland)	40	151,167	Student Account		None	None
(2)	SCHOLARSHIPS/STUDENT AID	Russia and Neighboring States	36	119,723	Student Account		None	None
(3)	SCHOLARSHIPS/STUDENT AID	East Asia and the Pacific	47	89,606	Student Account		None	None
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☑ Yes ☐ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☑ Yes ☐ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☑ Yes ☐ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* ☐ Yes ☑ No

Part V **Supplemental Information**

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	THE PROCEDURES FOR MONITORING THE USE OF SCHOLARSHIP GRANT FUNDS OUTSIDE THE UNITED STATES ARE CONSISTENT WITH THE PROCEDURES USED FOR MONITORING ALL STUDENT SCHOLARSHIPS MADE BY T HE UNIVERSITY

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Grant Makers	Financial Aid or Assistance from Governmental Agency The procedures for monitoring the use of scholarships grant funds outside the United States are consistent with the procedures used for monitoring all student scholarships made by the University

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part III(c) Number of Recipients	THE NUMBER OF RECIPIENTS REPORTED IN PART III IS THE ACTUAL NUMBER OF SCHOLARSHIP RECIPIENTS

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE PROCEDURES FOR MONITORING THE USE OF SCHOLARSHIP GRANT FUNDS OUTSIDE THE UNITED STATES ARE CONSISTENT WITH THE PROCEDURES USED FOR MONITORING ALL STUDENT SCHOLARSHIPS MADE BY T HE UNIVERSITY

Additional Data

Software ID: 14000329
Software Version: 2014v1.0
EIN: 95-0549600
Name: Biola University Inc

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	3	Program Services	STUDY ABROAD	1,000,855
East Asia and the Pacific	0	1	Program Services	STUDY ABROAD	309,938
Russia and Neighboring States	0	0	Program Services	STUDY ABROAD	140,624

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Program Services	STUDY ABROAD	74,756
South Asia	0	0	Program Services	STUDY ABROAD	61,177
Central America and the Caribbean	0	0	Program Services	STUDY ABROAD	39,058

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	3	Program Services	Student Recruitment	40,721

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

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

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

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

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

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

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1	FULCRUM PHILANTHROPY 15707 COIT ROAD STE C PMB 166 DALLAS, TX 75248	FUNDRAISING		No	0	132,000	-132,000
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . ▶					0	132,000	-132,000

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

CA, OR, WA

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

		(a) Event #1 Golf Touranment (event type)	(b) Event #2 BYT Fundraising (event type)	(c) Other events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	99,439	34,570	22,362	156,371
	2 Less Contributions	71,509	26,380	517	98,406
	3 Gross income (line 1 minus line 2)	27,930	8,190	21,845	57,965
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	16,324			16,324
	6 Rent/facility costs	18,543		4,612	23,155
	7 Food and beverages	2,229	3,143	1,876	7,248
	8 Entertainment		622	425	1,047
	9 Other direct expenses	6,723	1,803	384	8,910
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(56,684)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				1,281

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

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

9 Enter the state(s) in which the organization conducts gaming activities ____________

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

b If "No," explain ____________

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

b If "Yes," explain ____________

11 Does the organization conduct gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activities conducted in

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

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

Name ▶

Address ▶

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

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

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation
Schedule G, Part I, Line 2b Highest Paid Fundraisers	Fulcrum Philanthropy primarily helps individuals with Estate Planning This company connects individuals with Universities, like Biola, to assist them incorporate donations to the University in their estate plans Fulcrum Philanthropy typically does not generate current gifts, rather the university benefits long term as trusts and wills mature

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to 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.

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

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

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

Part III **Grants and Other Assistance to 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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) INSTITUTIONAL SCHOLARSHIPS	5683	39,750,168	0	N/A	N/A

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Description Of Procedure For Monitoring Use Of Grant Funds	BIOLA UNIVERSITY AWARDS BOTH MERIT AND NEED-BASED SCHOLARSHIPS TO STUDENTS AT THE GRADUATE AND UNDERGRADUATE LEVELS MERIT AWARDS ARE BASED ON ELIGIBILITY CRITERIA SUCH AS ACADEMIC, ATHLETIC, AND MUSIC ABILITIES THESE TYPICALLY HAVE ACADEMIC OR PARTICIPATION REQUIREMENTS FOR RENEWAL CONTINUED ELIGIBILITY BASED ON STATED REQUIREMENTS IS MONITORED BY THE FINANCIAL AID OFFICE OR BY THE OFFICE THAT MAKES THE AWARDS NEED-BASED AWARDS ARE TYPICALLY AWARDED BASED ON SPECIFIC FORMULAS THAT ARE BASED ON AN INSTITUTIONAL OR FEDERAL COST AMOUNT COMBINED WITH THE FEDERAL EFC DETERMINED BY THE FAFSA CONTINUED ELIGIBILITY IS NORMALLY CONTINGENT ON ONGOING NEED IN SUBSEQUENT YEARS MOST OF THE GRANTS AND SCHOLARSHIPS AWARDED BY BIOLA ARE FUNDED FROM GENERAL FUNDS, HOWEVER, A PORTION ARE FUNDED FROM RESTRICTED FUNDS THAT HAVE BEEN PROVIDED BY DONORS, AND ARE AWARDED BASED ON THE ELIGIBILITY CRITERIA ESTABLISHED BY THE DONORS SOME OF THESE FUNDS ARE AWARDED BY VARIOUS CAMPUS DEPARTMENTS, AND SOME THROUGH AN APPLICATION PROCESS ADMINISTERED BY THE FINANCIAL AID OFFICE THE FINANCIAL AID OFFICE WORKS CLOSELY WITH ACCOUNTING AND FINANCE OFFICES TO MONITOR AVAILABILITY OF FUNDS FROM BOTH THE GENERAL FUND AND RESTRICTED FUND ACCOUNTS
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	BIOLA UNIVERSITY AWARDS BOTH MERIT AND NEED-BASED SCHOLARSHIPS TO STUDENTS AT THE GRADUATE AND UNDERGRADUATE LEVELS MERIT AWARDS ARE BASED ON ELIGIBILITY CRITERIA SUCH AS ACADEMIC, ATHLETIC, AND MUSIC ABILITIES THESE TYPICALLY HAVE ACADEMIC OR PARTICIPATION REQUIREMENTS FOR RENEWAL CONTINUED ELIGIBILITY BASED ON STATED REQUIREMENTS IS MONITORED BY THE FINANCIAL AID OFFICE OR BY THE OFFICE THAT MAKES THE AWARDS NEED-BASED AWARDS ARE TYPICALLY AWARDED BASED ON SPECIFIC FORMULAS THAT ARE BASED ON AN INSTITUTIONAL OR FEDERAL COST AMOUNT COMBINED WITH THE FEDERAL EFC DETERMINED BY THE FAFSA CONTINUED ELIGIBILITY IS NORMALLY CONTINGENT ON ONGOING NEED IN SUBSEQUENT YEARS MOST OF THE GRANTS AND SCHOLARSHIPS AWARDED BY BIOLA ARE FUNDED FROM GENERAL FUNDS, HOWEVER, A PORTION ARE FUNDED FROM RESTRICTED FUNDS THAT HAVE BEEN PROVIDED BY DONORS, AND ARE AWARDED BASED ON THE ELIGIBILITY CRITERIA ESTABLISHED BY THE DONORS SOME OF THESE FUNDS ARE AWARDED BY VARIOUS CAMPUS DEPARTMENTS, AND SOME THROUGH AN APPLICATION PROCESS ADMINISTERED BY THE FINANCIAL AID OFFICE THE FINANCIAL AID OFFICE WORKS CLOSELY WITH ACCOUNTING AND FINANCE OFFICES TO MONITOR AVAILABILITY OF FUNDS FROM BOTH THE GENERAL FUND AND RESTRICTED FUND ACCOUNTS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493117003186

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I Questions Regarding Compensation

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

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

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

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

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

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 1a Travel for companions	SPOUSES OF LISTED PERSONS OCCASIONALLY TRAVEL ON BUSINESS TRIPS WHERE THERE IS A UNIVERSITY INTEREST IN THEIR PARTICIPATION IN UNIVERSITY ACTIVITIES WHERE A BONA FIDE PURPOSE IS ABSENT, THE TRAVEL COSTS ARE REPORTED AS TAXABLE COMPENSATION
Schedule J, Part I, Line 1a Tax indemnification and gross-up payments	ON OCCASION THE PRESIDENT IS REIMBURSED FOR HOUSE-CLEANING SERVICES IN CONJUNCTION WITH UNIVERSITY EVENTS HELD IN HIS PERSONAL RESIDENT WHEN THE PRESIDENT AND HIS WIFE ARE ON UNIVERSITY BUSINESS THIS REIMBURSEMENT IS TREATED AS TAXABLE COMPENSATION TO THE PRESIDENT AND APPEARS ON THE PRESIDENT'S W-2 THE AMOUNTS PAID ARE GROSSED UP TO PROVIDE FOR TAXES INCURRED ON THESE PAYMENTS
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	N/A
Schedule J, Part I, Line 1a Personal services	ON OCCASION THE PRESIDENT IS REIMBURSED FOR HOUSE-CLEANING SERVICES IN CONJUNCTION WITH UNIVERSITY EVENTS HELD IN HIS PERSONAL RESIDENT AND FOR CHILDCARE WHEN THE PRESIDENT AND HIS WIFE ARE ON UNIVERSITY BUSINESS THIS REIMBURSEMENT IS TREATED AS TAXABLE COMPENSATION TO THE PRESIDENT AND APPEARS ON THE PRESIDENT'S W-2 THE AMOUNTS PAID ARE GROSSED UP TO PROVIDE FOR TAXES INCURRED ON THESE PAYMENTS

Additional Data

Software ID: 14000329
Software Version: 2014v1.0
EIN: 95-0549600
Name: Biola University Inc

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
BARRY COREY President	(i)	428,292	0	1,242	24,800	66,285	520,619	0
	(ii)	0	0	0	0	0	0	0
DAVID KOONTZ ASSISTANT SECRETARY	(i)	150,364	0	521	11,654	13,428	175,967	0
	(ii)	0	0	0	0	0	0	0
GREGORY VAUGHAN VP ENROLLMENT MANAGEMENT	(i)	175,794	0	685	14,240	19,260	209,979	0
	(ii)	0	0	0	0	0	0	0
DAVID NYSTROM PROVOST AND SENIOR VP	(i)	228,081	0	901	17,600	19,260	265,842	0
	(ii)	0	0	0	0	0	0	0
ADAM MORRIS VP ADVANCEMENT	(i)	194,920	0	279	16,056	90,461	301,716	0
	(ii)	0	0	0	0	0	0	0
MICHAEL PIERCE VP, BUS AND FINANCIAL AFFAIRS	(i)	231,344	0	501	18,088	49,855	299,788	0
	(ii)	0	0	0	0	0	0	0
SANDRA WEAVER ASSISTANT SECRETARY	(i)	144,827	0	800	11,600	8,184	165,411	0
	(ii)	0	0	0	0	0	0	0
GREG BALSANO VP OF UNIVERSITY SERVICES	(i)	192,016	0	2,249	15,424	15,366	225,055	0
	(ii)	0	0	0	0	0	0	0
Peter C Hill PROFESSOR	(i)	237,214	0	594	9,579	7,350	254,737	0
	(ii)	0	0	0	0	0	0	0
Christoper Grace Professor	(i)	194,745	0	347	13,616	59,010	267,718	0
	(ii)	0	0	0	0	0	0	0
SCOTT RAE PROFESSOR	(i)	166,074	0	731	10,937	25,129	202,871	0
	(ii)	0	0	0	0	0	0	0
JERRY MACKEY CORPORATE LEGAL	(i)	163,399	0	982	13,466	22,254	200,101	0
	(ii)	0	0	0	0	0	0	0
Richard E Bee Senior Director of Alumni and Parents	(i)	176,777	0	547	12,028	14,784	204,136	0
	(ii)	0	0	0	0	0	0	0
Irene Neller VP UCM August 31, 2013	(i)	150,000	0	0	0	0	150,000	0
	(ii)	0	0	0	0	0	0	0

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	CA MUNICIPAL FINANCE AUTHORITY	20-1563466	13048TCU5	03-13-2008	94,006,015	REFUND OF 2002 BOND & RESERVE FUND		X		X		X
B	CA Municipal Finance Authority	20-1563466	13048TPZO	04-25-2013	40,189,220	Construction of building and parking structure		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	0	0		
2	Amount of bonds legally defeased	0	0		
3	Total proceeds of issue	94,006,015	40,189,220		
4	Gross proceeds in reserve funds	9,944,596	0		
5	Capitalized interest from proceeds	0	3,693,060		
6	Proceeds in refunding escrows	0	0		
7	Issuance costs from proceeds	1,806,049	488,400		
8	Credit enhancement from proceeds	0	0		
9	Working capital expenditures from proceeds	3,094,380	0		
10	Capital expenditures from proceeds	0	28,985,996		
11	Other spent proceeds	79,711,736	0		
12	Other unspent proceeds	0	7,021,764		
13	Year of substantial completion	2008			

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

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X			X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 06 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 01 %		0 02 %					
6	Total of lines 4 and 5	0 07 %		0 02 %					
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X					

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
Schedule K, Part IV, Line 2c No Rebate	Arbitrage calculation for 2008 bond issues performed April 22, 2013

Return Reference	Explanation
Schedule K, Part II, Line 4 Column A	Gross proceeds in reserve fund includes earnings, therefore, it is larger than the amount originally funded

Return Reference	Explanation
Schedule K, Part V Different Procedures to Undertake Corrective Action	Issuer name CA MUNICIPAL FINANCE AUTHORITY Part II, Line 4A "Gross proceeds in reserve fund" includes earnings, therefore, it is larger than the amount originally funded

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493117003186

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

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

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) BARRY H COREY	PRESIDENT	HOUSING ASSISTANCE		X	1,097,656	839,843		No	Yes		Yes	
(2) MICHAEL A PIERCE	SECRETARY-TRESUER	HOUSING ASSISTANCE		X	50,000	38,686		No	Yes		Yes	
(3) DAVID NYSTROM	PROVOST	HOUSING ASSISTANCE		X	105,816	85,838		No	Yes		Yes	
(4) DAVID D KOONTZ	ASSISTANT SECRETARY	HOUSING ASSISTANCE		X	50,000	43,563		No	Yes		Yes	
Total ▶ $						1,007,930						

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		150,306	Tuition Remission	

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) ADAM MORRIS	OFFICER (V P)	150,775	SALES OF ASSETS		No

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

Return Reference	Explanation
Schedule L, Part IV ASSET PURCHASES	THE UNIVERSITY PURCHASED HOUSING FURNITURE FROM A BUSINESS IN WHICH ADAM MORRIS HAS A FINANCIAL INTEREST THE UNIVERSITY BELIEVES THE PRODUCTS ARE THE BEST AVAILABLE VALUE

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number
95-0549600

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X	[redacted]	6,343	Market value
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	853,227	13,405,125	Market value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Equipment)	X	1,465	3,597	Market value
26 Other ▶ (Gifts Certificates)	X	415	26,654	Market value
27 Other ▶ (Miscellaneous)	X	1,580	15,113	Market value
28 Other ▶ (____________)				

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

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

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

Return Reference	Explanation
Schedule M, Part I Column B	The numbers of contributions was determined based on the number of contributed items
Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions	Biola contracts with Cars2Charities to receive and sell vehicle donations
Schedule M, Part I Explanations of reporting method for number of contributions	Other The number of items received Other Number of items received Other The numbers of items received Securities - Publicly traded The number of items received

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493117003186

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2014

Open to Public Inspection

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

Return Reference	Explanation	
	Form 990, Part III, Line 4d Description of other program services	(Expenses $ 27,162,734 including grants of $ 7,012,184)(Revenue $ 33,062,572) OTHER PROGRA M SERVICES COOK SCHOOL OF INTERCULTURAL STUDIES EXPENSES GRANTS REVENUE 9,118,972 2,354,1 04 11,099,643 SCHOOL OF EDUCATION EXPENSES GRANTS REVENUE 7,994,837 2,063,904 9,731,342 CR OWELL SCHOOL OF BUSINESS EXPENSES GRANTS REVENUE 6,779,133 1,750,064 8,251,583 INTERTERM E XPENSES GRANTS REVENUE 1,564,505 403,884 1,904,320 SUMMER SCHOOL EXPENSES GRANTS REVENUE 1 ,705,288 4440,228 2,075,682 COOK SCHOOL OF INTERCULTURAL STUDIES THE PRIMARY OBJECTIVE OF THE COOK SCHOOL OF INTERCULTURAL STUDIES ARISES FROM THE MANDATE GIVEN BY THE LORD JESUS C HRIST TO MAKE DISCIPLES OF EVERY NATION BASED ON AN UNDERSTANDING OF BOTH HUMAN BEINGS AND CULTURE. THE CSICS STRIVES TO ENABLE STUDENTS TO DEMONSTRATE A KNOWLEDGE AND AN UNDERSTAN DING OF HUMAN BEINGS WITHIN THEIR CULTURAL SETTING WE FURTHER STRIVE TO ENABLE STUDENTS T O DEMONSTRATE A KNOWLEDGE AND UNDERSTANDING OF THE THEOLOGICAL, HISTORICAL, SOCIOLOGICAL A NTHROPOLOGICAL AND LINGUISTIC ISSUES ASSOCIATED WITH THE CROSS CULTURAL COMMUNICATION OF T HE GOSPEL THROUGH A BROAD RANGE OF PROFESSIONS AND VOCATIONS IT IS THE DESIRE OF THE FACU LTY THAT EACH STUDENT IN THE PROGRAM WILL FIND IN THEIR PARTICULAR CAREER CHOICE THE MEANS TO EFFECTIVE CROSS CULTURAL PERSONAL MINISTRY AND EVANGELISM IN THE UNDERGRADUATE DEPART MENTS STUDENTS ARE EXPOSED TO THE FOUNDATIONAL CONCEPTS WITHIN ANTHROPOLOGY, CROSS-CULTURA L ENGAGEMENT, CULTURAL DIVERSITY, CROSS-CULTURAL COMMUNICATION, AND THEOLOGIZING WITHIN CU LTURAL CONTEXTS STUDENTS WORK CLOSELY WITH THEIR ADVISORS TO BUILD A PROGRAM ACCORDING TO THEIR CAREER OBJECTIVES THEY ARE ENCOURAGED TO CHOOSE SPECIFIC CONCENTRATIONS THAT PROVI DE THE SKILLS FOR THEIR CHOSEN CAREERS, OR IN COMBINATION WITH OTHER DISCIPLINES IN THE UN IVERSITY TO COMBINE THEIR CROSS-CULTURAL SKILLS WITH PREPARATION IN BICULTURAL EDUCATION, CROSS-CULTURAL MEDIA COMMUNICATION, SOCIAL WORK, CROSS CULTURAL COUNSELING, INTERNATIONAL RELATIONS OR INTERNATIONAL BUSINESS ADMINISTRATION IN THE GRADUATE DEPARTMENTS STUDENTS E NGAGE IN A DEEPER LEVEL OF CRITICAL ANALYSIS OF THEORIES AND PRACTICES ASSOCIATED WITH GLO BAL ISSUES, THE INTERNATIONALIZATION OF THE CHRISTIAN FAITH, THE STUDY OF CULTURES AND CUL TURE CHANGE, AND THE FORMATION OF PEDAGOGICAL CONCEPTS AND PRACTICES APPROPRIATE TO CROSS- CULTURAL EDUCATIONAL THEORY AND PRACTICE. A UNIQUE FEATURE OF THE GRADUATE STUDIES DEGREES IS THE USE OF BLENDED DELIVERY SYSTEMS THAT ALLOW STUDENTS WHO ARE CURRENTLY IN WORKING C AREERS TO PURSUE THEIR DEGREES WHILE STILL REMAINING IN THEIR CAREERS SCHOOL OF EDUCATION THE SCHOOL OF EDUCATION SERVES A DIVERSE STUDENT BODY, CONSISTING OF MORE THAN 300 UNDERG RADUATE STUDENTS (230 LIBERAL STUDIES MAJORS AND APPROXIMATELY 201 SINGLE SUBJECT MAJORS) AND 145 GRADUATE STUDENTS OUR FULL-TIME FACULTY IS MADE UP OF OUTSTANDING PROFESSIONALS W ITH DECADES OF COMBINED EXPERIENCE IN CLASSROOM AND ADMINISTRATIVE SETTINGS AT THE UNDERG RADUATE LEVEL, THE SCHOOL OF EDUCATION IS HOME TO THE LIBERAL STUDIES MAJOR, WHICH CONSIST ENTLY RANKS AMONG THE FIVE MOST POPULAR UNDERGRADUATE MAJORS AT BIOLA AT THE GRADUATE LEV EL, THE SCHOOL OF EDUCATION OFFERS THE FLEXIBLE MASTER OF ARTS IN TEACHING (M A T) AND M ASTER OF ARTS IN EDUCATION (M A ED) PROGRAMS, WHICH CAN BE TAKEN IN PERSON, ONLINE, OR IN COMBINATION AND CAN BE TAILORED TO MEET THE INDIVIDUAL INTERESTS OF NEW AND EXPERIENCED T EACHERS ALIKE. OUR STATE-ACCREDITED TEACHERS PREPARATION PROGRAM OFFERS TEACHING CREDENTIA LS AT BOTH THE GRADUATE AND UNDERGRADUATE LEVELS IN MULTIPLE AND SINGLE SUBJECTS WE ALSO OFFER FIVE LEVELS OF EARLY CHILDHOOD PERMITS AT THE UNDERGRADUATE AND GRADUATE LEVEL, ACCR EDITED BY CCTC, AND ONE FOUR-COURSE INSTITUTION-SPONSORED ONLINE SPECIAL EDUCATION CERTIFI CATE. CROWELL SCHOOL OF BUSINESS THE CROWELL SCHOOL OF BUSINESS PREPARES STUDENTS ACADEMIC ALLY WITH A FOUNDATIONAL BUSINESS EDUCATION WHILE NURTURING THEIR CHRISTIAN COMMITMENT THR OUGH SOLID BIBLICAL INTEGRATION IN COURSES AND CONTACT WITH FACULTY AND STAFF OUR GOAL IS TO PREPARE GRADUATES TO BE LEADERS IN THEIR PROFESSION, IMPACTING THE CULTURE FOR CHRIST THE MASTER'S OF BUSINESS ADMINISTRATION PROGRAM AT BIOLA UNIVERSITY IS DESIGNED FOR BUSIN ESS PEOPLE WHO ALREADY HAVE EXPERIENCE IN MANAGEMENT BUT WANT TO INCREASE THEIR UNDERSTAND ING OF THE ENTREPRENEURIAL SPIRIT WITHIN THE CORPORATE CULTURE. IT PREPARES FOLLOWERS OF J ESUS CHRIST TO BE SUCCESSFUL LEADERS IN THE MARKETPLACE. THE PROGRAM INCORPORATES FOUNDATI ONAL COURSES IN THEOLOGY ALONGSIDE THE CONSTANT APPLICATION OF BIBLICAL PRINCIPLES FOR DEC ISION FOR THE PART-TIME, FULLY EMPLOYED STUDENT, WITH CLASSES HELD IN THE EVENING WE ARE PART OF THE BIOLA UNIVERSITY FAMILY OF SIX SCHOOLS FOR 100 YEARS OUR MISSION HAS BEEN BIB LICALLY CENTERED EDUCATION, SCHOLARSHIP AND SERVICE, EQUIPPING MEN AND WOMEN IN MIND AND C HARACTER TO IMPACT THE WORLD FOR THE LORD JESUS CHRIST INTERTERM SESSION TO FACILITATE TH E COMPLETION OF GRADUATION AND ALSO TO ALLOW EXPOS

Return Reference	Explanation	
	Form 990, Part III, Line 4d Description of other program services	URE TO CREATIVE LEARNING AND TO ENRICH STUDENTS' ACADEMIC PROGRAMS, THE UNIVERSITY PROVIDE S AN INTERTERM PROGRAM IN JANUARY A BALANCED PROGRAM OF GENERAL EDUCATION, BIBLE, ELECTIV ES AND GRADUATE COURSES IS OFFERED STUDENTS MAY ENRICH THEIR COURSE OF STUDY AND REDUCE T HE OVERALL TIME SPENT IN SCHOOL OR DECREASE THEIR REGULAR COURSE LOAD BY CAREFUL SELECTION OF INTERTERM COURSES COURSES MAY BE INNOVATIVE OR THE CONTENT MAY BE IN RESPONSE TO SPEC IALIZED NEEDS OR CURRENT TOPICS OPPORTUNITIES TO PARTICIPATE IN TRAVEL AND OTHER NON-TRAD ITIONAL COURSES ARE ALSO OFFERED SUMMER SESSION A CONTINUING SUMMER SESSION PROGRAM PROVI DES STUDENTS WITH THE OPPORTUNITY FOR A GREATER DEGREE OF FLEXIBILITY IN PLANNING THEIR TO TAL PROGRAM STUDENTS MAY ENRICH THEIR COURSE OF STUDY AND REDUCE THE OVERALL TIME SPENT I N SCHOOL OR DECREASE THEIR REGULAR COURSE LOAD BY CAREFUL SELECTION OF SUMMER SESSION COUR SES COURSES OF STUDY MAY BE APPLIED TO BOTH THE DEGREE AND THE TEACHING CREDENTIAL PROGRA MS INSTRUCTION IS OFFERED IN STANDARD COURSES BY THE BIOLA FACULTY AND CAPABLE VISITING P ROFESSORS

Return Reference	Explanation
Form 990, Part VI, Line 15 DETERMINING COMPENSATION	THE COMMITTEE ON THE PRESIDENT TO THE BOARD OF TRUSTEES SERVES AS THE UNIVERSITY'S COMPENSATION COMMITTEE, COMPRISED SOLELY OF INDEPENDENT DIRECTORS, NONE OF WHICH HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS THE COMMITTEE DEVELOPS, CONSISTENT WITH THE ORGANIZATION'S PHILOSOPHY AND PRINCIPLES, THE ANNUAL PERFORMANCE GOALS AND THE CRITERIA TO BE USED IN DETERMINING MERIT INCREASES CRITERIA FOR THE PRESIDENT (CEO) AND THE VICE PRESIDENTS THE FULL BOARD REVIEWS AND VALIDATES THESE COMPENSATION ARRANGEMENTS

Return Reference	Explanation
Form 990, Part VI, Line 13 Whistleblower policy	Biola's Board of Trustee approved a Whistleblower Policy on September 11, 2015 and the hotline went live on February 11, 2016

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	THE ORGANIZATION'S SENIOR DIRECTOR OF FINANCIAL MANAGEMENT AND REPORTING WORKS CLOSELY WITH THE OUTSIDE ACCOUNTING FIRM IT ENGAGES TO REVIEW THE RETURN THE FINAL DRAFT OF FORM 990 IS REVIEWED BY THE CHIEF FINANCIAL OFFICER BIOLA POSTS FORM 990, EXCLUDING SCHEDULE B, PRIOR TO FILING, ON A SECURE WEB SITE AND INFORM THE BOARD OF TRUSTEES THAT IT IS AVAILABLE FOR THEIR REVIEW

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	THE DIRECTOR OF HUMAN RESOURCES, IN CONJUNCTION WITH THE CHIEF FINANCIAL OFFICER, IS CHARGED WITH MONITORING PROPOSED OR ONGOING TRANSACTIONS FOR CONFLICTS OF INTEREST AND ADDRESSING ANY POTENTIAL OR ACTUAL CONFLICTS PURSUANT TO THE CONFLICT OF INTEREST POLICY, AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE, AIMED AT DETERMINING ANY FAMILY AND BUSINESS RELATIONSHIPS AND TRANSACTIONS OR OTHER TRANSACTIONS THAT MAY POSE A POTENTIAL CONFLICT, IS DISTRIBUTED TO ALL COVERED PERSONS (I E BOARD MEMBERS, OFFICERS AND EXECUTIVE LEADERSHIP OR KEY EMPLOYEES, IF ANY)

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	WHILE FEDERAL TAX LAWS DO NOT MANDATE THAT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS BE MADE AVAILABLE FOR PUBLIC INSPECTION, THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND CONFLICTS OF INTEREST POLICY AVAILABLE ON THE UNIVERSITY'S WEBSITE AT WWW BIOLA EDU THE GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a New Board of Trustees	Philip Paul and Dean VandeKamp were elected to the Board of Trustees in July 2014 Adam Edgerly, David Kinnaman, and Kelly Monroe-Kullberg were elected as trustee on November 24, 2014

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Split Interest Agreements - 129720,

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
Biola University Inc

Employer identification number

95-0549600

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

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

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

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

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
(1) ARRINGTON SQUARE CORPORATION 13800 BIOLA AVENUE LA MIRADA, CA 906390001 95-2000502	LEASING PROP	CA	NA	C Corporation	100	100	100 %	Yes	
(2) CHARITABLE REMAINDER UNITRUSTS (17)	PERSONAL ESTATE	CA	NA	Trust					No
(3) LIVING TRUST (4)	LIVING TRUST	CA	NA	Trust					No
(4) CHARITABLE REMAINDER ANNUITY TRUST (2)	PERSONAL ESTATE	CA	NA	Trust					No
(5) MEDICAL TRUST (1)	PERSONAL ESTATE	CA	NA	Trust					No

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

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

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) Arrington Square Corporation	A	132,703	
(2) Arrington Square Corporation	K	218,929	
(3) Arrington Square Corporation	S	5,588,466	Book Value

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

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

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

Part VII Supplemental Information

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

Return Reference	Explanation
Schedule R, Part IV ASQ	Biola own a for Profit Corporation (Arrington Square Corporation) was dissolved and the assets were transferred to Biola University, Inc
Schedule R, Part V ASC	Arrington Square Corporartion disolved in 2015 and its assets were transferred to Biola Universiy, Inc