


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at [www IRS gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization
COE COLLEGE

Doing business as

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

BUSINESS OFFICE 1220 1ST AVE NE

City or town, state or province, country, and ZIP or foreign postal code
CEDAR RAPIDS, IA 52402

F Name and address of principal officer
DAVID MCINALLY
1220 FIRST AVE NE
CEDAR RAPIDS, IA 52402

H(a) Is this a group return for subordinates?

No

☐ Yes ☒

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number
42-0686467

E Telephone number
(319) 399-8643

G Gross receipts \$ 107,954,680

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW COE EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1881

M State of legal domicile IA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
COE COLLEGE IS A PRIVATE, FOUR-YEAR CO-EDUCATIONAL LIBERAL ARTS COLLEGE

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	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	34
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	1,585
6	Total number of volunteers (estimate if necessary)	6	624
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	5,556
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue

	Prior Year	Current Year	
8	Contributions and grants (Part VIII, line 1h)	7,295,737	8,434,379
9	Program service revenue (Part VIII, line 2g)	57,516,896	60,402,714
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,074,536	1,807,842
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-11,606	-4,923
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	66,875,563	70,640,012

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	28,695,315	30,827,246
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)	21,550,515	22,681,276
16a	Professional fundraising fees (Part IX, column (A), line 11e)	14,800	9,565
b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,380,233		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	16,476,505	17,388,703
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	66,737,135	70,906,790
19	Revenue less expenses Subtract line 18 from line 12	138,428	-266,778

Net Assets or Fund Balances

	Beginning of Current Year	End of Year	
20	Total assets (Part X, line 16)	173,128,894	174,490,781
21	Total liabilities (Part X, line 26)	40,209,114	45,014,945
22	Net assets or fund balances Subtract line 21 from line 20	132,919,780	129,475,836

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

2017-02-09

Date

MICHAEL L WHITE EXEC VP - ASST SECY/TREAS

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
CARLEY UMSTEAD

Preparer's signature
CARLEY UMSTEAD

Date

Check ☐ if self-employed

PTIN
P00982177

Firm's name ▶ RSM US LLP

Firm's EIN ▶ 42-0714325

Firm's address ▶ 201 FIRST ST SE SUITE 800

Phone no (319) 298-5333

CEDAR RAPIDS, IA 52401

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

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

SEE SCHEDULE O

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 \$ 53,666,545 including grants of \$ 30,827,246) (Revenue \$ 51,037,674)

EDUCATIONAL - COE COLLEGE IS A SELECTIVE, PRIVATE AND NATIONALLY RECOGNIZED FOUR-YEAR COEDUCATIONAL LIBERAL ARTS INSTITUTION, PROVIDING SUPERIOR EDUCATIONAL EXPERIENCES FOR STUDENTS SINCE 1851. TO EACH OF ITS MORE THAN 1,400 STUDENTS, THE INSTITUTION OFFERS THE ADVANTAGES OF A SMALL COLLEGE THAT IS DEDICATED TO ACADEMIC EXCELLENCE. STUDENT-FACULTY RATIOS ARE LOW AT 11 TO 1, THE AVERAGE CLASS SIZE IS 16, AND 95% OF FULL-TIME FACULTY MEMBERS HAVE EARNED THE HIGHEST DEGREE IN THEIR RESPECTIVE FIELDS. STUDENTS CAN THUS RECEIVE A LEVEL OF PERSONALIZED ATTENTION THAT HAS ALMOST DISAPPEARED ELSEWHERE IN MODERN ACADEMIA. THE CAMPUS PRESENTS AN INVITING ENVIRONMENT TO STUDENTS BOTH INSIDE AND OUTSIDE THE CLASSROOM, OFFERING A VARIETY OF OPPORTUNITIES FOR GROWTH AND PERSONAL ENRICHMENT IN THE MANY INTELLECTUAL, ATHLETIC AND SERVICE PURSUITS AVAILABLE. COE IS RECOGNIZED AS ONE OF THE FINEST LIBERAL ARTS COLLEGES IN THE COUNTRY BY A VARIETY OF WIDELY RESPECTED COLLEGE RANKING PUBLICATIONS THAT WEIGH ACADEMIC QUALITY AND STUDENT SELECTIVITY. COE COLLEGE ENJOYS BOTH AN EXCELLENT REGIONAL REPUTATION AND NATIONAL RECOGNITION FOR THE STRENGTH OF ITS PROGRAMS. THROUGH CAREFUL PLANNING, SELECTIVE USE OF RESOURCES, AND THE EFFORTS OF A DEDICATED FACULTY AND STAFF, COE HAS NOT ONLY MAINTAINED BUT STRENGTHENED ITS POSITION AMONG LIBERAL ARTS COLLEGES IN THE MIDWEST.

4b

(Code) (Expenses \$ 3,573,768 including grants of \$) (Revenue \$ 9,365,040)

AUXILIARY ENTERPRISES - THIS INCLUDES THE COLLEGE'S RESIDENCE HALLS, COLLEGE RENTAL HOUSING, FOOD SERVICES, THE STUDENT UNION AND SUMMER CONFERENCES. WITH MORE THAN 1,200 STUDENTS IN CAMPUS HOUSING, RESIDENTIAL LIFE IS CENTRAL TO THE COE EXPERIENCE FOR STUDENTS. IN ADDITION, THE COLLEGE DERIVES SOME REVENUE FROM HOSTING SUMMER CONFERENCES IN ITS FACILITIES.

4c

(Code) (Expenses \$ 7,586,270 including grants of \$) (Revenue \$)

PROGRAM SERVICES - THIS INCLUDES EXPENDITURES FOR THE OPERATION AND MAINTENANCE OF COLLEGE FACILITIES. WITH 37 BUILDINGS ON MORE THAN 60 ACRES, MAINTENANCE OF COLLEGE FACILITIES IS AN IMPORTANT CONSIDERATION FOR THE COLLEGE. SIGNIFICANT CAMPUS IMPROVEMENTS OVER THE PAST TWO DECADES HAVE BEEN COMPLETED SO THAT STUDENTS AND FACULTY MAY ENJOY AN ENVIRONMENT CONDUCTIVE TO LEARNING, WITH THE FACILITIES TO SUPPORT THE MISSION OF THE COLLEGE.

4d























Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 64,826,583

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)? <i>If "Yes," complete Schedule A</i> 	1 Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10 Yes	
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? <i>If "Yes," complete Schedule D, Part VI</i> 	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? <i>If "Yes," complete Schedule D, Part VII</i> 	11b Yes	
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? <i>If "Yes," complete Schedule D, Part VIII</i> 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	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)? <i>If "Yes," complete Schedule D, Part X</i> 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> 	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? <i>If "Yes," complete Schedule F, Parts II and IV</i> 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	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)*

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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

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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 35		
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 34		
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	Yes	
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	Yes	
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	Yes	
b Other officers or key employees of the organization	15b	Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a Did the organization invest in, contribute assets to, or participate in a joint venture 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	MA , MD , MI , MN , NH , NY
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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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 L WHITE EXEC VP - ASST SEC COE COLLEGE-1220 1ST AVE NE CEDAR RAPIDS, IA 52402 (319) 399-8643

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

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

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[illegible]

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 ► 13

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO INC 9801 WASHINGTON BLVD GAITHERSBURG, MD 20878	FOOD SERVICE	2,723,210
OLMSTEAD CONSTRUCTION INC 651 58TH AVE CT SW CEDAR RAPIDS, IA 52404	CONSTRUCTION	1,196,779
CULVER'S LAWN & LANDSCAPNG 1682 DUBUQUE RD MARION, IA 52302	LAWN SERVICE	248,093
SECURITAS SECURITY SERVICES 160 SOUTHGATE IOWA CITY, IA 52240	SECURITY SERVICE	209,832
ROYALL & COMPANY 1920 E PARHAM RD RICHMOND, VA 23228	MARKETING	201,981

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 ▶ 28	
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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	27,406			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	794,677			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,612,296			
	g	Noncash contributions included in lines 1a-1f \$		1,060,269			
	h	Total. Add lines 1a-1f		8,434,379			
Program Service Revenue	2a	STUDENT TUITION/FEES	Business Code 611600	50,550,715	50,550,715		
	b	AUXILIARY ENTERPRISES	611600	9,365,040	9,365,040		
	c	MISC FEES & CHARGE	611710	486,959	486,959		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		60,402,714			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,667,119		1,667,119
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real (ii) Personal				
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss)		140,723		140,723
8a		Gross income from fundraising events (not including \$ 27,406 of contributions reported on line 1c) See Part IV, line 18 . . .					
		a		12,834			
		b	Less direct expenses	b	23,313		
c		Net income or (loss) from fundraising events . .		-10,479		-10,479	
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		PARTNERSHIP INCOME (LOSS)	900099	5,556		5,556	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		5,556				
12	Total revenue. See Instructions		70,640,012	60,402,714	5,556	1,797,363	

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	30,827,246	30,827,246		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	962,343		746,601	215,742
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	15,000		15,000	
7	Other salaries and wages	17,237,263	15,396,338	1,284,096	556,829
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	960,114	898,223	47,777	14,114
9	Other employee benefits	2,264,584	1,491,274	627,744	145,566
10	Payroll taxes	1,241,972	1,191,052	31,786	19,134
11	Fees for services (non-employees)				
a	Management				
b	Legal	30,036		30,036	
c	Accounting	99,390		99,390	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	9,565			9,565
f	Investment management fees	68,645		68,645	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,656,504	2,478,471	178,033	
12	Advertising and promotion	330,915	210,509	113,179	7,227
13	Office expenses	902,017	586,322	179,508	136,187
14	Information technology	441,725	269,488	156,237	16,000
15	Royalties				
16	Occupancy	2,972,254	2,964,632	7,622	
17	Travel	739,151	579,521	68,977	90,653
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	823,302	823,302		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,059,667	3,059,667		
23	Insurance	393,137	211,606	181,531	
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	INSTRUCTIONAL EXPENSE	2,296,784	2,166,775		130,009
b	RECRUITING	600,231	600,231		
c	EQUIP, RENTAL & MAINT	338,900	330,132	8,768	
d	SMALL EQUIPMENT	266,446	231,521	32,501	2,424
e	All other expenses	1,369,599	510,273	822,543	36,783
25	Total functional expenses. Add lines 1 through 24e	70,906,790	64,826,583	4,699,974	1,380,233
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 <input type="checkbox"/> 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)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		4,958,054	2	6,570,309
	3	Pledges and grants receivable, net		1,218,076	3	2,480,755
	4	Accounts receivable, net		1,052,475	4	588,058
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	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			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		559,283	9	904,638
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a102,974,749			
	b	Less—accumulated depreciation	10b39,752,207	60,257,976	10c	63,222,542
	11	Investments—publicly traded securities		61,888,144	11	57,583,295
	12	Investments—other securities. See Part IV, line 11		9,393,091	12	9,673,976
	13	Investments—program-related. See Part IV, line 11		7,344,206	13	7,573,103
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		26,457,589	15	25,894,105
16	Total assets. Add lines 1 through 15 (must equal line 34)		173,128,894	16	174,490,781	
Liabilities	17	Accounts payable and accrued expenses		3,973,465	17	5,417,421
	18	Grants payable			18	
	19	Deferred revenue		259,575	19	162,005
	20	Tax-exempt bond liabilities		20,005,881	20	21,068,115
	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			22	
	23	Secured mortgages and notes payable to unrelated third parties		2,291,969	23	675,000
	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		13,678,224	25	17,692,404
	26	Total liabilities. Add lines 17 through 25		40,209,114	26	45,014,945
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		32,199,728	27	24,621,654
	28	Temporarily restricted net assets		8,876,369	28	10,896,776
	29	Permanently restricted net assets		91,843,683	29	93,957,406
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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		132,919,780	33	129,475,836
	34	Total liabilities and net assets/fund balances		173,128,894	34	174,490,781

Part XI **Reconciliation 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	70,640,012
2	Total expenses (must equal Part IX, column (A), line 25)	2	70,906,790
3	Revenue less expenses Subtract line 2 from line 1	3	-266,778
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	132,919,780
5	Net unrealized gains (losses) on investments	5	-1,401,081
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,776,085
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	129,475,836

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	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	Yes	

Additional Data

Software ID:
Software Version:
EIN: 42-0686467
Name: COE COLLEGE

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)						(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			
DAVID MCINALLY TRUSTEE - PRESIDENT	40 00	X		X				304,983	0	45,752
WALE ADEOSUN TRUSTEE	1 00	X						0	0	0
R DARRYL BANKS TRUSTEE	1 00	X						0	0	0
KIM BENJAMIN TRUSTEE	1 00	X						0	0	0
PETER BIRKEY TRUSTEE	1 00	X						0	0	0
J DAVID CARSON TRUSTEE - CHAIRMAN	1 00	X		X				0	0	0
STEVEN CAVES TRUSTEE	1 00	X						0	0	0
ROBERT CHIUSANO TRUSTEE	1 00	X						0	0	0
NIKKI CLAUSSEN TRUSTEE	1 00	X						0	0	0
TOM ELLIS TRUSTEE - SECRETARY	1 00	X		X				0	0	0

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)						(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			
SAM FREITAG TRUSTEE	1 00	X						0	0	0
CHRIS GALLOWAY TRUSTEE	1 00	X						0	0	0
DAVID GEHRING TRUSTEE	1 00	X						0	0	0
KEN GOLDER TRUSTEE - VICE CHAIR	1 00	X		X				0	0	0
TONY GOLOBIC TRUSTEE	1 00	X						0	0	0
DENNIS GREENSPON TRUSTEE	1 00	X						0	0	0
KEITH HALL TRUSTEE (PART-YEAR)	1 00	X						0	0	0
GENE HENDERSON TRUSTEE	1 00	X						0	0	0
KENT HERINK TRUSTEE	1 00	X						0	0	0
SHIRLEY HUGHES TRUSTEE	1 00	X						0	0	0

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)						(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			
WILLIAM JOHNSON TRUSTEE (PART-YEAR)	1 00	X						0	0	0
STEVE KENNEDY TRUSTEE	1 00	X						0	0	0
STEVEN KLINE TRUSTEE	1 00	X						0	0	0
MARY JEANNE KROB TRUSTEE	1 00	X						0	0	0
JULIE MCLEAN TRUSTEE	1 00	X						0	0	0
DAVID MEHAFFY TRUSTEE	1 00	X						0	0	0
CURT MENELEE TRUSTEE	1 00	X						0	0	0
PAUL MEYER TRUSTEE - TREASURER	1 00	X		X				0	0	0
LIZA OVROM TRUSTEE	1 00	X						0	0	0
CHUCK PETERS TRUSTEE	1 00	X						0	0	0

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)						(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			
SIGI REYNOLDS TRUSTEE	1 00	X						0	0	0
BRETT RULE TRUSTEE	1 00	X						0	0	0
LARRY SHRYOCK TRUSTEE	1 00	X						0	0	0
CRAIG STRUVE TRUSTEE	1 00	X						0	0	0
LORI STURDEVANT TRUSTEE - 2ND VICE CHAIR	1 00	X		X				0	0	0
CARSON VEACH TRUSTEE	1 00	X						0	0	0
ED WALSH TRUSTEE	1 00	X						0	0	0
DAVID HAYES VP ADVANCEMENT - ASST SECY	40 00			X				152,349	0	27,071
KIM PRIBYL ASST TO PRESIDENT - ASST SECY	40 00			X				40,496	0	7,047
MICHAEL WHITE EXEC VP - ASST SECY & ASST TREAS	40 00			X				184,421	0	31,507

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)						(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			
MARIE BAEHR TIMKO VP ACADEMIC AFFAIRS/DEAN	40 00			X				153,973	0	75,187
ERIK ALBINSON VP STUDENT AFFAIRS	40 00			X				112,271	0	15,667
MARIO AFFATIGATO PROFESSOR OF PHYSICS	40 00					X		136,744	0	14,786
WENDY DUNN PROF/DIR OF INST PLANNING	40 00					X		127,485	0	30,203
STEVEN FELLER PROFESSOR OF PHYSICS	40 00					X		151,160	0	26,616
JULIE STAKER ASSOCIATE VP & DEAN OF ADM	40 00					X		114,616	0	8,586
MICKEY WU PROFESSOR OF BUSINESS ADMIN & ECONOMICS	40 00					X		105,275	0	14,952

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
COE COLLEGE

Employer identification number
42-0686467

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 (Form 990 or 990-EZ))

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 (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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	12,712,765	9,710,962	5,018,363	7,295,737	8,434,379	43,172,206
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	12,712,765	9,710,962	5,018,363	7,295,737	8,434,379	43,172,206
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)						3,120,027
6 Public support. Subtract line 5 from line 4						40,052,179

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	12,712,765	9,710,962	5,018,363	7,295,737	8,434,379	43,172,206
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,622,903	3,989,089	3,380,613	2,605,763	1,667,119	15,265,487
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						58,437,693
12 Gross receipts from related activities, etc (see instructions)					12	274,498,044
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	68.540 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	63.310 %
16a 33 1/3% support test—2015. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support test—2014. 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 <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2015. 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 <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2014. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. 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.		
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).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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.		
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.		
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.		
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.		
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.		
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).		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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 .		
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).		
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).		
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 .		
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 .		
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 .		
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.		
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.)		
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?		
b A family member of a person described in (a) above?		
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.		

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
<div>1</div> <div>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? <i>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.</i></div>		
<div>2</div> <div>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? <i>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.</i></div>		

Section C. Type II Supporting Organizations

	Yes	No
<div>1</div> <div>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)? <i>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).</i></div>		

Section D. All Type III Supporting Organizations

	Yes	No
<div>1</div> <div>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?</div>		
<div>2</div> <div>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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i></div>		
<div>3</div> <div>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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i></div>		

Section E. Type III Functionally-Integrated Supporting Organizations

<div>1</div> <div>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)</div> <div><div>a</div><div><input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.</div><div><div>b</div><div><input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.</div><div><div>c</div><div><input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</div></div></div></div>		
<div>2</div> <div>Activities Test. Answer (a) and (b) below.</div>		
<div>a</div> <div>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? <i>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.</i></div>		
<div>b</div> <div>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? <i>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.</i></div>		
<div>3</div> <div>Parent of Supported Organizations. Answer (a) and (b) below.</div>		
<div>a</div> <div>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? <i>Provide details in Part VI.</i></div>		
<div>b</div> <div>Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i></div>		

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 0.35	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) <input type="checkbox"/>		

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

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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

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

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on 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

2015

Open to Public Inspection

Name of the organization
COE COLLEGE

Employer identification number
42-0686467

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" on 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)
☐ Protection of natural habitat
☐ Preservation of open space

☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

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, handling of violations, and enforcing conservation easements during the year
►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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 on Form 990, Part VIII, line 1

► \$ 0

(ii)

Assets included in Form 990, Part X

► \$ 8,901,483

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 on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$ 3,940,000

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2015

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

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☒ Other EDUCATIONAL

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" on 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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

Amount

1c

1d

1e

1f

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	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	87,248,399	91,877,143	87,313,799	83,356,396	76,534,551
b Contributions	2,472,911	1,303,726	2,065,554	1,699,631	4,908,284
c Net investment earnings, gains, and losses	80,765	-113,336	8,219,113	7,224,931	2,734,108
d Grants or scholarships	1,446,748	1,448,446	2,739,756	1,416,797	1,333,107
e Other expenditures for facilities and programs	5,147,488	4,370,688	2,981,567	3,550,362	-512,560
f Administrative expenses					
g End of year balance	83,207,839	87,248,399	91,877,143	87,313,799	83,356,396

2

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

a

Board designated or quasi-endowment ▶ 0 %

b

Permanent endowment ▶ 100 000 %

c

Temporarily restricted endowment ▶ 0 %

The percentages on 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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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)	Accumulated (c)depreciation	(d)Book value
1a Land		12,257,139		12,257,139
b Buildings		67,789,900	27,123,735	40,666,165
c Leasehold improvements		2,262,503	1,961,143	301,360
d Equipment		12,929,694	10,667,329	2,262,365
e Other		7,735,513		7,735,513
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				63,222,542

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on 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		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	1,130,931	F
(B) COLLATERIZED DEBT OBLIGATIONS	2,309,838	F
(C) PRIVATE EQUITY FUND	675,461	F
(D) REAL ESTATE INVESTMENT TRUST	5,557,746	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)	9,673,976	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on 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' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE	588,606
(2) ARTWORK	12,841,483
(3) CASH VALUE OF LIFE INSURANCE	936,628
(4) REAL EST, LAND & MNRL RIGHTS	1,675,002
(5) TRUST AGREEMENTS	9,852,386
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	25,894,105

Part X

Other Liabilities. Complete if the organization answered 'Yes' on 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	
DUE TO US GOVT-PERKINS LOAN	5,473,798
ANNUITY PAYABLE	1,335,130
DEPOSITS HELD ON BEHALF OTHERS	327,419
LIABILITY TO LIFE INCOME BENEFICIARIES	1,307,234
ACCRUED PENSION COST	1,847,064
ACCRUED LOSS ON INTEREST RATE SWAPS	1,417,388
OTHER LIABILITY	54,342
STATE OF IOWA ENERGY LOAN	3,176,857
LINE OF CREDIT	2,753,172
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	17,692,404

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' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	38,343,040
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-1,401,081
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-1,401,081
3	Subtract line 2e from line 1	3	39,744,121
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	68,645
b	Other (Describe in Part XIII)	4b	30,827,246
c	Add lines 4a and 4b	4c	30,895,891
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	5	70,640,012

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	40,010,899
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	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	40,010,899
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	68,645
b	Other (Describe in Part XIII)	4b	30,827,246
c	Add lines 4a and 4b	4c	30,895,891
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	70,906,790

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
PART III, LINE 4	THE COMMITTEE ON THE PERMANENT COLLECTION OF ART SHALL DETERMINE IF THE PROPOSED GIFT OF ARTWORK IS SUITABLE FOR ACCEPTANCE BY CONSIDERING WHETHER THE FOLLOWING CONDITIONS HAVE BEEN MET THE ARTWORK FURTHERS THE MISSION OF COE COLLEGE THE ARTWORK IS COMPATIBLE WITH OR COMPLEMENTARY TO THE CURRENT ART COLLECTION THE DONOR HAS VALID OWNERSHIP OF THE ARTWORK, AND IS FREE TO CONVEY THE WORK THERE ARE NO UNTENABLE RESTRICTIONS, RESERVATIONS OR LIMITATIONS PLACED ON THE ARTWORK OR ITS DISPLAY THE COSTS FOR RESTORATION, MAINTENANCE AND INSURANCE ARE REASONABLE AND APPROPRIATE THE COMMITTEE ON THE PERMANENT COLLECTION OF ART PROVIDES THE PRESIDENT WITH A RECOMMENDATION FOR ACCEPTANCE OR REFUSAL

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART X, LINE 2	THE COLLEGE IS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE COLLEGE MAY BE SUBJECT TO FEDERAL AND STATE INCOME TAXES ON ANY NET INCOME FROM UNRELATED BUSINESS ACTIVITIES. THE COLLEGE FILES A FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX) ANNUALLY AND UNRELATED BUSINESS INCOME (UBI) IS REPORTED ON FORM 990-T, AS APPROPRIATE. MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX POSITIONS, WHICH INCLUDE SUCH MATTERS AS THE TAX EXEMPT STATUS AND VARIOUS POSITIONS RELATIVE TO POTENTIAL SOURCES OF UBI. AS OF JUNE 30, 2016 AND 2015, THERE WERE NO UNCERTAIN TAX BENEFITS IDENTIFIED AND RECORDED AS A LIABILITY. FORMS 990 AND 990-T FILED BY THE COLLEGE ARE NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR THE FISCAL YEARS ENDED JUNE 30, 2012 AND PRIOR.
PART XI, LINE 4B - OTHER ADJUSTMENTS	COLLEGE AWARDED FINANCIAL AID 30,827,246
PART XII, LINE 4B - OTHER ADJUSTMENTS	COLLEGE AWARDED FINANCIAL AID 30,827,246
SCHEDULE D, PART V, LINE 1A, COLUMN (E)	DURING THE TAX YEAR THE COLLEGE DETERMINED THAT SEVERAL PIECES OF ARTWORK FROM A GIFT IN 1976 WERE IMPROPERLY CLASSIFIED AS ARTWORK HELD FOR INVESTMENT AND UNRESTRICTED NET ASSETS AND SHOULD HAVE BEEN RECORDED AS PART OF THE ARTWORK COLLECTION AND PERMANENTLY RESTRICTED NET ASSETS. IN ACCORDANCE WITH GAAP, THIS MISSTATEMENT REQUIRES THE VALUE OF THE ARTWORK TO BE ADJUSTED FROM CURRENT FAIR VALUE TO FAIR VALUE AT THE TIME OF THE GIFT WITH CONSIDERATION OF CHANGES IN ACCOUNTING STANDARDS IN SUBSEQUENT YEARS. BEGINNING ENDOWMENT BALANCE ON LINE 1A, COLUMN (E) WAS ADJUSTED TO REFLECT THE EFFECT OF THE MISSTATEMENT.

Additional Data

Software ID:
Software Version:
EIN: 42-0686467
Name: COE COLLEGE

Form 990, Schedule D, Part X, - Other Liabilities

1	(a) Description of Liability	(b) Book Value
	DUE TO US GOVT-PERKINS LOAN	5,473,798
	ANNUITY PAYABLE	1,335,130
	DEPOSITS HELD ON BEHALF OTHERS	327,419
	LIABILITY TO LIFE INCOME BENEFICIARIES	1,307,234
	ACCRUED PENSION COST	1,847,064
	ACCRUED LOSS ON INTEREST RATE SWAPS	1,417,388
	OTHER LIABILITY	54,342
	STATE OF IOWA ENERGY LOAN	3,176,857
	LINE OF CREDIT	2,753,172

SCHEDULE E
(Form 990 or
990-EZ)

Department of the
Treasury
Internal Revenue
Service

Schools

►Complete if the organization answered "Yes" on 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

2015

Open to Public
Inspection

Name of the organization COE COLLEGE	Employer identification number 42-0686467
---	--

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?	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?	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	Yes	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	Yes	
5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		No
6a Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II		No
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	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	THE RACIALLY NONDISCRIMINATORY POLICY IS PROVIDED THROUGH NEWSPAPER AND BROADCAST MEDIA SOLICITATION. IN ADDITION, IT IS PROVIDED IN ALL ADMISSION PUBLICATIONS, COLLEGE WEBSITE AND THE COLLEGE HANDBOOK.
SCHEDULE E, PART I, LINE 6	COE COLLEGE RECEIVES FEDERAL AND STATE FINANCIAL AID AND GRANTS.

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

2015

Open to Public Inspection

Name of the organization
COE COLLEGE

Employer identification number
42-0686467

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) Activites 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) EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	PROGRAM SERVICE	STUDY ABROAD	82,406
(2) EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	PROGRAM SERVICE	STUDY ABROAD	168,408
(3) SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	PROGRAM SERVICE	STUDY ABROAD	34,888
(4) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		2,344,000
(5)					
3a Sub-total	0	0			2,629,702
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			2,629,702

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)									
(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 ▶ _____

3 Enter total number of other organizations or entities ▶ _____

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)							
(2)							
(3)							
(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

Additional Data

Software ID:

Software Version:

EIN: 42-0686467

Name: COE COLLEGE

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).

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
COE COLLEGE

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" on 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

2015

Open to Public Inspection

Employer identification number
42-0686467

Part I Fundraising Activities

Complete if the organization answered "Yes" on 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

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 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?		(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
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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.

Part II Fundraising Events.

Complete if the organization answered "Yes" on 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	(b)Event #2	(c)Other events	(d)
		GOLF EVENT (event type)	ALUMNI AUCTION (event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1	Gross receipts	31,054	9,186	40,240
	2	Less Contributions	18,220	9,186	27,406
	3	Gross income (line 1 minus line 2)	12,834		12,834
Direct Expenses	4	Cash prizes	560		560
	5	Noncash prizes			
	6	Rent/facility costs	18,744		18,744
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	4,009		4,009
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			23,313
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			-10,479

Part III Gaming.

Complete if the organization answered "Yes" on 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			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 activity 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 complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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2015

Open to Public Inspection

42-0686467

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

[illegible]

Schedule I (Form 990) 2015

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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) ENDOWED PRIZES	62	34,351		N/A	N/A
(2) GIFT PRIZES	10	3,400		N/A	N/A
(3) GIFT SCHOLARSHIPS	90	177,084		N/A	N/A
(4) ENDOWED SCHOLARSHIPS	344	1,446,746		N/A	N/A
(5) GENERAL SCHOLARSHIPS	1361	27,542,672		N/A	N/A
(6) OTHER GRANTS	305	1,622,993		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
PART I, LINE 2	COE COLLEGE RECEIVES VARIOUS FEDERAL GRANTS FROM NSF, DEPT OF EDUCATION AND OTHER AGENCIES OR BRANCHES OF THE US GOVERNMENT SEPARATE ACCOUNTS ARE USED FOR EACH GRANT TO MONITOR RECEIPTS AND DISBURSEMENTS THE COLLEGE FOLLOWS APPROPRIATE ACCOUNTING AND INTERNAL CONTROL PROCEDURES ALL REQUIRED FINANCIAL REPORTING TO THE GRANT PROVIDER ARE COMPLETED TIMELY AND AUDITS BY AN INDEPENDENT CPA FIRM ARE DONE WHEN REQUIRED THE COLLEGE ANNUALLY FILES AN A-133 DISTRIBUTIONS TO STUDENTS ARE MADE ACCORDING TO GRANT REQUIREMENTS

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" on 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

2015

Open to Public Inspection

Name of the organization
COE COLLEGE

Employer identification number
42-0686467

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
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. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a	No
		4b	Yes
		4c	No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," on line 5a or 5b, describe in Part III.	5a	No
		5b	No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," on line 6a or 6b, describe in Part III.	6a	No
		6b	No
7	For persons listed on 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 on Form 990, Part VII, paid or accrued 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" on 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 on 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 on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 DAVID MCINALLY TRUSTEE - PRESIDENT	(i)	287,188 -----	0 -----	17,795 -----	18,550 -----	27,207 -----	350,740 -----	0 -----
	(ii)	0	0	0	0	0	0	0
2 DAVID HAYES VP ADVANCEMENT - ASST SECY	(i)	139,553 -----	0 -----	12,796 -----	10,277 -----	16,794 -----	179,420 -----	0 -----
	(ii)	0	0	0	0	0	0	0
3 MICHAEL WHITE EXEC VP - ASST SECY & ASST TREAS	(i)	180,455 -----	0 -----	3,966 -----	13,145 -----	18,362 -----	215,928 -----	0 -----
	(ii)	0	0	0	0	0	0	0
4 MARIE BAEHR TIMKO VP ACADEMIC AFFAIRS/DEAN	(i)	153,102 -----	0 -----	871 -----	11,202 -----	63,985 -----	229,160 -----	0 -----
	(ii)	0	0	0	0	0	0	0
5 MARIO AFFATIGATO PROFESSOR OF PHYSICS	(i)	97,004 -----	0 -----	39,740 -----	6,875 -----	7,911 -----	151,530 -----	0 -----
	(ii)	0	0	0	0	0	0	0
6 WENDY DUNN PROF/DIR OF INST PLANNING	(i)	122,228 -----	0 -----	5,257 -----	9,266 -----	20,937 -----	157,688 -----	0 -----
	(ii)	0	0	0	0	0	0	0
7 STEVEN FELLER PROFESSOR OF PHYSICS	(i)	117,439 -----	0 -----	33,721 -----	8,721 -----	17,895 -----	177,776 -----	0 -----
	(ii)	0	0	0	0	0	0	0

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
PART I, LINE 1A	EMPLOYMENT AGREEMENT STATES COE COLLEGE REQUIRES THAT ITS PRESIDENT LIVE IN A PRESIDENT'S HOUSE OR MANSE OWNED BY THE COLLEGE BECAUSE OF ITS REQUIREMENT THAT THE PRESIDENT CONDUCT SIGNIFICANT BUSINESS ACTIVITIES AND REGULARLY HOST COLLEGE RELATED EVENTS AND ENTERTAINMENT ON COLLEGE PROPERTY. THE PRESIDENT IS REQUIRED TO MAINTAIN AN OFFICE AT THE MANSE IN ORDER FOR HIM TO BE AVAILABLE TO ATTEND TO THE RESPONSIBILITIES OF HIS OFFICE AND THE BUSINESS OF THE COLLEGE AT ALL TIMES, AS IT IS NOT PRACTICAL FOR HIM TO DISCHARGE HIS DUTIES AS PRESIDENT SOLELY FROM HIS OFFICE ON THE CAMPUS, BECAUSE HIS RESPONSIBILITIES OFTEN REQUIRE THAT HE WORK OUTSIDE NORMAL BUSINESS HOURS AND THAT HE NEEDS TO BE ABLE TO ADDRESS ANY COLLEGE RELATED EMERGENCIES THAT MAY ARISE OUTSIDE OF NORMAL BUSINESS HOURS. IN ADDITION, THE SPACE AND OTHER REQUIREMENTS ASSOCIATED WITH THE CONDUCT OF LARGE STUDENT AND ALUMNI EVENTS AND OTHER FUNCTIONS FOR FRIENDS OF THE COLLEGE REQUIRE A RESIDENCE OF THE SIZE AND LOCATION OF THE MANSE. THE RESIDENCE LOCATED AT 370 34TH STREET SE, CEDAR RAPIDS, IOWA, WHICH IS OWNED BY THE COLLEGE, IS DESIGNATED THE OFFICIAL COLLEGE MANOR. COUNTRY CLUB DUES ARE INCLUDED IN TAXABLE INCOME ON W-2S.
PART I, LINE 4B	THE ORGANIZATION MAINTAINS NON-QUALIFIED DEFERRED COMPENSATION PLANS UNDER SECTION 457(F) OF THE INTERNAL REVENUE CODE. CONTRIBUTIONS DURING THE YEAR WERE \$7,000 TO THE PLAN FOR DAVID MCINALLY, PRESIDENT. THERE WERE NO DISTRIBUTIONS FROM THIS PLAN DURING THE YEAR. CONTRIBUTIONS DURING THE YEAR WERE \$22,500 TO THE PLAN FOR MICHAEL WHITE, EXECUTIVE VICE PRESIDENT. A PORTION OF THIS CONTRIBUTION IS FOR THE BENEFIT OF THE COLLEGE.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
COE COLLEGE

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

2015

Open to Public Inspection

Employer identification number

42-0686467

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A IOWA FINANCE AUTHORITY	52-1699886		06-28-2016	41,833,715	SEE PART VI		X		X		X

Part II		Proceeds									
		A		B		C		D			
1	Amount of bonds retired										
2	Amount of bonds legally defeased										
3	Total proceeds of issue	21,227,715									
4	Gross proceeds in reserve funds										
5	Capitalized interest from proceeds										
6	Proceeds in refunding escrows										
7	Issuance costs from proceeds	100,000									
8	Credit enhancement from proceeds										
9	Working capital expenditures from proceeds										
10	Capital expenditures from proceeds										
11	Other spent proceeds	21,127,715									
12	Other unspent proceeds										
13	Year of substantial completion										
		Yes	No	Yes	No	Yes	No	Yes	No		
14	Were the bonds issued as part of a current refunding issue?	X									
15	Were the bonds issued as part of an advance refunding issue?		X								
16	Has the final allocation of proceeds been made?		X								
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X									

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		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							
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						
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 ▶	0 960 %							
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 %							
6 Total of lines 4 and 5	0 960 %							
7 Does the bond issue meet the private security or payment test?		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						
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							

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						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?	X							
c No rebate due?		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							
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	SEE PART VI							
c Term of hedge								
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		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						
7	Has the organization established written procedures to monitor the requirements of section 148? . . .	X							

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

Return Reference	Explanation
PART I, COLUMN (F)	REFUND PRIOR ISSUES (06/08/07), (07/22/09), (08/05/11), (05/30/12), (04/17/16), CONSTRUCTION/RENOVATION

Return Reference	Explanation
PART II, LINE 3	THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART I, COLUMN (E) AS THIS DEBT WAS ISSUED ON A DRAW-DOWN BASIS AND THE TOTAL PRINCIPAL AVAILABLE HAS NOT YET BEEN DRAWN

Return Reference	Explanation
PART IV, LINES 4B AND 4C	U S BANK, N A 9 3 YEARS U S BANK, N A 9 9 YEARS

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) JANICE MCINALLY	SPOUSE OF DAVID MCINALLY, TRUSTEE/PRESIDENT	15,000	JANICE MCINALLY RECEIVED COMPENSATION FROM THE COLLEGE AS AN EMPLOYEE		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

►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

Department of the Treasury
Internal Revenue Service

Name of the organization
COE COLLEGE

Employer identification number
42-0686467

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	X	2	13,250	APPRAISAL
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	49	1,040,838	STOCK EXCHANGE
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 ► (<u> </u>)	X	34	6,181	ACTUAL
AUCTION ITEMS)				
26 Other ► (<u> </u>)				
27 Other ► (<u> </u>)				
28 Other ► (<u> </u>)				

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

0

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

Yes

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

No

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
PART I, COLUMN (B)	COE COLLEGE IS REPORTING THE NUMBER OF CONTRIBUTIONS

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

2015

Open to Public Inspection

Name of the organization COE COLLEGE	Employer identification number 42-0686467
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Return Reference	Explanation
FORM 990, PAGE 2, PART III ORGANIZATION MISSION	IT IS THE MISSION OF COE COLLEGE TO PROVIDE STUDENTS AN EDUCATION OF SUPERIOR QUALITY THAT AIMS AT PREPARING THEM FOR LIFE FOLLOWING GRADUATION. OUR REASON TO EXIST AS AN INSTITUTION IS TO READY STUDENTS INTELLECTUALLY, PROFESSIONALLY, AND SOCIALLY TO LEAD PRODUCTIVE AND SATISFYING LIVES IN THE GLOBAL SOCIETY OF THE 21ST CENTURY. AS SUCH, OUR SUCCESS AS A COLLEGE IS MEASURED ACCORDING TO THE SUCCESS OF OUR GRADUATES. WE BELIEVE THAT A LIBERAL ARTS EDUCATION IS THE BEST PREPARATION FOR LIFE. WE BELIEVE THAT SUCH AN EDUCATION ALLOWS STUDENTS TO DISCOVER WHAT THEIR REAL TALENTS AND INTERESTS ARE, AND THAT IT DEVELOPS IN THEM THE SKILLS, ABILITIES, AND HABITS OF MIND THAT WILL MAKE POSSIBLE A SUCCESSFUL CAREER IN ANY FIELD OF ENDEAVOR, INCLUDING ONES THAT DO NOT YET EXIST. INDEED, WE BELIEVE THAT WHAT DEFINES A LIBERAL ARTS EDUCATION IS ITS FOCUS ON CULTIVATING IN STUDENTS CERTAIN FUNDAMENTAL ABILITIES: THE ABILITY TO THINK LOGICALLY AND ANALYTICALLY, THE ABILITY TO COMMUNICATE CLEARLY, BOTH IN WRITING AND SPEAKING, THE ABILITY TO USE EFFECTIVELY COMPUTER TECHNOLOGY, THE ABILITY TO WORK PRODUCTIVELY AS A MEMBER OF A GROUP SEEKING TO ACHIEVE A COMMON OBJECTIVE, THE ABILITY TO MAKE INFORMED JUDGMENTS, WHETHER IN THE REALM OF ETHICAL BEHAVIOR OR IN THAT OF AESTHETIC APPRECIATION, THE ABILITY TO FOSTER AND SUSTAIN AN ATTITUDE OF INTELLECTUAL CURIOSITY AND CREATIVITY, AND THE ABILITY TO RECOGNIZE AND HONOR TRUE EXCELLENCE WHEN FOUND IN ANY FORM OR CONTEXT. FURTHERMORE, WE BELIEVE THAT IT IS IMPORTANT FOR A LIBERAL ARTS EDUCATION TO CULTIVATE IN STUDENTS A DESIRE TO UNDERSTAND, A CAPACITY FOR TOLERANCE, AND AN ABILITY TO APPRECIATE THE ETHNIC AND CULTURAL DIVERSITY THAT MAKE UP HUMAN KIND. IT IS THE MISSION OF THE COLLEGE TO DEVELOP IN STUDENTS THESE ABILITIES AND ATTITUDES, AND IN SO DOING TO PROVIDE THEM AN EDUCATION THAT DIRECTS THEM TOWARD A MEANINGFUL AND SUCCESSFUL LIFE. COE'S ACADEMIC PROGRAM REFLECTS A COMMITMENT TO DEVELOPING THESE ABILITIES BY ITS INSISTENCE THAT STUDENTS ACQUIRE CERTAIN EDUCATIONAL EXPERIENCES. WE REQUIRE THAT STUDENTS COMPLETE BOTH OUR GENERAL EDUCATION REQUIREMENTS, WHICH ENSURE BREADTH OF LEARNING, AND OUR REQUIREMENTS FOR A MAJOR, WHICH GUARANTEE DEPTH OF KNOWLEDGE IN A PARTICULAR FIELD. IN ADDITION, AS PART OF EACH STUDENT'S EDUCATION, A SERIES OF INTENSIVE WRITING EXPERIENCES, SPREAD ACROSS THE FOUR YEARS OF STUDY, IS REQUIRED. BEYOND THESE REQUIREMENTS, STUDENTS ARE ENCOURAGED TO BEGIN PLANNING FOR THEIR LIVES AFTER COLLEGE EARLY ON IN THEIR UNDERGRADUATE CAREERS, AND, THROUGH CAREFUL ADVISING, THEY ARE GIVEN GUIDANCE AND DIRECTION IN THIS ENDEAVOR. INDEED, THE DEFINING FEATURE OF A COE EDUCATION IS THE REQUIREMENT THAT EVERY STUDENT PLAN AND PARTICIPATE IN ONE OF THE FOLLOWING: A SIGNIFICANT EXPERIENTIAL PROJECT, SUCH AS AN INTERNSHIP; A MAJOR SCHOLARLY UNDERTAKING, OR STUDY ABROAD. THESE EXPERIENCES WILL OFTEN, THOUGH NOT INVARIABLY, OCCUR DURING THE JUNIOR YEAR. THE HALLMARK OF A COE EDUCATION IS OUR ATTENTION TO EACH STUDENT AS AN INDIVIDUAL. IT IS ALSO IMPORTANT THAT THE COLLEGE ENVIRONMENT AT COE REFLECTS OUR COMMITMENT TO A DIVERSE STUDENT BODY AND OVERALL COLLEGE COMMUNITY. WE BELIEVE THAT THROUGH LISTENING CAREFULLY TO EACH STUDENT AS HIS OR HER INTERESTS AND UNIQUE TALENTS ARE FORMED, AND THROUGH TAILORING AN ACADEMIC PROGRAM TO SUIT EACH STUDENT'S FUTURE, WE HELP THAT STUDENT DEVELOP ABILITIES THAT PROVIDE THE BEST PREPARATION FOR LIFE.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE OF THE BOARD AS BEEN GIVEN AUTHORIZATION BY THE BOARD OF TRUSTEES TO ACT ON SUCH MATTERS AS SETTING COMPREHENSIVE FEES, AUTHORIZING PURCHASES AND ACQUISITIONS OF PROPERTY AND REVIEWING APPROPRIATE INSURANCE COVERAGE ALL ITEMS THAT THE EXECUTIVE COMMITTEE HAS AUTHORIZED ARE SUBSEQUENTLY APPROVED BY CONSENT AGENDA OF THE FULL BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE COLLEGE'S BUDGET AND AUDIT SUBCOMMITTEE OF THE BOARD OF TRUSTEES CONDUCTS A THOROUGH REVIEW OF FORM 990'S FILED BY THE COLLEGE PRIOR TO BEING FILED WITH THE IRS. THE SUBCOMMITTEE RECEIVES THE RETURNS FROM THE PAID PREPARER, RSM US, LLP. THE SUBCOMMITTEE AND A REPRESENTATIVE FROM RSM REVIEW THE RETURNS TOGETHER. ALL MEMBERS OF THE BOARD OF TRUSTEES ARE ADVISED OF THE REVIEW OF THE FORM 990S BY THE BUDGET AND AUDIT SUBCOMMITTEE. EACH MEMBER OF THE BOARD OF TRUSTEES RECEIVES AN EMAIL (1) PROVIDING THE TRUSTEE WITH ACCESS TO A COMPLETE COPY OF THE RETURNS THROUGH A WEBSITE ACCESSIBLE TO THE TRUSTEES AND (2) INFORMING EACH TRUSTEE THAT THE RETURNS ARE AVAILABLE FOR FURTHER REVIEW BY ANY BOARD MEMBER BY THE SPECIFIED DATE, AFTER WHICH THE RETURNS WILL BE FILED.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE COLLEGE REQUIRES ALL TRUSTEES, OFFICERS, KEY EMPLOYEES AND SUBSTANTIAL CONTRIBUTORS TO ANNUALLY COMPLETE THE CONFLICT OF INTEREST QUESTIONNAIRE CONCERNING TRANSACTIONS WITH COE COLLEGE THE EXECUTIVE VICE PRESIDENT FOR THE COLLEGE RECEIVES COMPLETED QUESTIONNAIRES AND REVIEWS AND SUBMITS COMMENTS AND FINDINGS TO THE PRESIDENT OF THE COLLEGE AND THE CHAIRMAN OF THE BOARD OF TRUSTEES THE CHAIRMAN OF THE BOARD THEN REVIEWS AND INFORMS THE FULL BOARD OF ANY ISSUES OR ACTIONS REQUIRED INCLUDING MONITORING WITH AN OVERSIGHT COMMITTEE IF NECESSARY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>COMPENSATION FOR THE PRESIDENT IS REVIEWED BY A BOARD OF TRUSTEES AD HOC COMMITTEE THE COMMITTEE CONSIDERS THE PRESIDENT ON HIS MERITS, LENGTH OF SERVICE AND JOB RESPONSIBILITIES THE PRESIDENT'S COMPENSATION IS THEN COMPARED TO SIMILAR POSITIONS AT OTHER COLLEGES USING SURVEYS AND BENCHMARKS FROM THE ACM (ASSOCIATED COLLEGES OF THE MIDWEST), IPCUA (IOWA PRIVATE COLLEGES AND UNIVERSITIES ASSOCIATION) AND OTHER IDENTIFIED COMPARISON GROUPS THE COMMITTEE THEN REPORTS TO THE BOARD OF TRUSTEES THEIR DUE DILIGENCE THAT WAS PERFORMED AND DOCUMENTS THE REVIEW THE DOCUMENTATION REGARDING THE COMPENSATION REVIEW IS RETURNED TO THE COLLEGE'S LEGAL COUNSEL FOR SAFEKEEPING THE BOARD OF TRUSTEES ROUTINELY EVALUATES THE COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES FOR EQUITY AND MAY MAKE ADJUSTMENTS BASED ON JOB RESPONSIBILITIES THESE DECISIONS ARE MADE WITH DIRECT INVOLVEMENT OF SENIOR LEADERSHIP, INCLUDING THE PRESIDENT, AND INVOLVE REVIEW OF COMPARATIVE COMPENSATION DATA AND ARE FULLY DOCUMENTED WITH ANNUAL REVIEWS</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENT ARE NOT MADE AVAILABLE TO THE PUBLIC. THE COLLEGE DOES FILE VARIOUS REQUIRED REPORTS SUCH AS THE A-133 AND AUDITED FINANCIAL STATEMENTS WITH VARIOUS GOVERNMENTAL AGENCIES AND AUTHORITIES WHICH MAY THEN BECOME PUBLIC RECORD. THE IRS FORM 990 FILED BY COE COLLEGE IS AVAILABLE TO THE PUBLIC UPON REQUEST.

Return Reference	Explanation
FORM 990, PART VII SALARY EXPLANATION	KIM PRIBYL'S COMPENSATION LISTED IS FOR POSITION AS EMPLOYEE OF COE COLLEGE NOT FOR POSITION AS ASSISTANT SECRETARY OF BOARD SHE IS A 40 HOUR PER WEEK EMPLOYEE OF THE COLLEGE MARIE BAHR TIMKO'S OTHER COMPENSATION AMOUNT IN COLUMN (F) INCLUDES \$46,105 OF TUITION WAIVER FOR DEPENDENT

Return Reference	Explanation
FORM 990, PART X, COLUMN (A)	DURING THE TAX YEAR THE COLLEGE DETERMINED THAT SEVERAL PIECES OF ARTWORK FROM A GIFT IN 1976 WERE IMPROPERLY CLASSIFIED AS ARTWORK HELD FOR INVESTMENT AND UNRESTRICTED NET ASSETS AND SHOULD HAVE BEEN RECORDED AS PART OF THE ARTWORK COLLECTION AND PERMANENTLY RESTRICTED NET ASSETS IN ACCORDANCE WITH GAAP, THIS MISSTATEMENT REQUIRES THE VALUE OF THE ARTWORK TO BE ADJUSTED FROM CURRENT FAIR VALUE TO FAIR VALUE AT THE TIME OF THE GIFT WITH CONSIDERATION OF CHANGES IN ACCOUNTING STANDARDS IN SUBSEQUENT YEARS THE BEGINNING OF YEAR BALANCE SHEET HAS BEEN RESTATED TO REFLECT THESE CHANGES

Return Reference	Explanation
FORM 990, PART XI, LINE 9	ADJUSTMENT FOR FACULTY RETIREMENT PLAN 85,706 CHANGE IN FMV - INTEREST RATE SWAP -627,707 CHANGE IN ANNUITY & LIFE AGREEMENTS -245,317 PREPAYMENT PENALTY ON DEBT RESTRUCTURING -988,767

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THIS PROCESS HAS NOT CHANGED SINCE PRIOR TAX YEARS

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► 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.

Name of the organization COE COLLEGE	Employer identification number 42-0686467
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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) Pnmary 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) Pnmary 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
(1)K RAYMOND CLARK CHARITABLE TRUST 1220 FIRST AVE NE CEDAR RAPIDS, IA 52402 39-6787527	SUPPORTING TRUST	IA	501(C)(3)	11A	COE COLLEGE	Yes	
(2)K RAYMOND CLARK ATHLETIC FACILITIES TRUST 1220 FIRST AVE NE CEDAR RAPIDS, IA 52402 39-6787027	SUPPORTING TRUST	IA	501(C)(3)	11A	COE COLLEGE	Yes	
(3)K RAYMOND CLARK ALUMNI CENTER TRUST 1220 FIRST AVE NE CEDAR RAPIDS, IA 52402 39-6787028	SUPPORTING TRUST	IA	501(C)(3)	11A	COE COLLEGE	Yes	
(4)K RAYMOND CLARK RACQUET CENTER TRUST 1220 FIRST AVE NE CEDAR RAPIDS, IA 52402 39-6787026	SUPPORTING TRUST	IA	501(C)(3)	11A	COE COLLEGE	Yes	

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) Disproportionate 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	

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	No

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

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 organization 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
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
.
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p		No
1q	Yes	
1r		No
1s		No

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)K RAYMOND CLARK ALUMNI CENTER TRUST	C	70,801	ACTUAL
(2)K RAYMOND CLARK ALUMNI CENTER TRUST	Q	41,321	ACTUAL
(3)K RAYMOND CLARK ATHLETIC FACILITIES	C	139,621	ACTUAL
(4)K RAYMOND CLARK RACQUET CENTER TRUST	C	91,430	ACTUAL
(5)K RAYMOND CLARK RACQUET CENTER TRUST	Q	267,340	ACTUAL

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.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation
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