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Form 990

Department of the

Treasury

DLN: 93493135124037

OMB No 1545-0047

# **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 <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

ncem	ai iveveii	ue Servi	<u> </u>					
A F	or the 2	2015 ca	lendar year, or tax year begi	nning 07-01-2015 , and ending 06-30-20	)16			
	eck if app		C Name of organization Centre College			D Empl	loyer ide	entification number
	ddress ch	-				61-0	044467	1
_	ame char nitial retur		Doing business as			_		
FI			Number and street (or P.O. box	if mail is not delivered to street address) Room/s	suite	E Telep	hone nun	nber
	/terminat nended re		600 West Walnut Street	. I mains not do not do not do si oct dadi cos, mooni, e	, arec	(859	) 238-	5451
	plication			country, and ZIP or foreign postal code				
			Danville, KY 40422			<b>G</b> Gross	receipts	\$ 112,123,159
			<b>F</b> Name and address of pri Dr John A Roush	ncıpal officer		s this a grou	•	
			600 West Walnut Street		9	subordinates No	7	Yes 🗸
. Ta	ıx-exemp	at status	Danville, KY 40422			Are all subor	dınates	□Yes □ No
Lia	іх-ехепір	or status	▼ 501(c)(3)	<b>◄</b> (insert no ) 4947(a)(1) or 527		ncluded? [f "No." attac	h a list	(see instructions)
J W	ebsite:	· www	w centre edu			Group exemp		,
<b>(</b> For	m of orga	anızatıon	✓ Corporation Trust As	sociation		of formation		State of legal domicile K
Pa	rt I		mary	cion or most significant activities				
		•	2	sion or most significant activities nunity dedicated to study in the liberal ar	ts as a me	ans to devel	op the II	ntellectual, personal,
au au	and	d moral	potential of its students					
<u>`</u>								
Ě								
Governance	<b>2</b> CI	heck th	is box ▶ ┌ if the organizatio	n discontinued its operations or disposed	l of more tl	han 25% of i	ts net a	ssets
ಶ	3 NI	umher	of voting members of the gov	erning body (Part VI, line 1a)			з	37
Activities &			_	ers of the governing body (Part VI, line 1b			4	37
			· -	in calendar year 2015 (Part V, line 2a)			5	1,463
ACI	<b>6</b> To	otal nur	mber of volunteers (estimate	ıf necessary)			6	40
	<b>7a</b> To	otal unr	elated business revenue fror	m Part VIII, column (C), line 12			7a	92,459
	<b>b</b> Net	t unrela	ated business taxable income	e from Form 990-T, line 34			7b	(
						Prior Year		Current Year
<u>a</u> i	8						,441	10,981,674
ĕ	9	Proore			,289	66,301,724		
£	10	_	·		•		7 0 0 0	
Ravenue	10	Inves	tment income (Part VIII, col	umn (A), lines 3, 4, and 7d)		13,767	<del>  </del> -	13,679,213
	10 11 12	Invest Other	tment income (Part VIII, col revenue (Part VIII, column			13,767 293	3,499	13,679,213 245,420
	11 12	Invest Other Total 12)	tment income (Part VIII, col revenue (Part VIII, column i revenue—add lines 8 through	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ne	13,767 293 86,617	7,238	13,679,213 245,420 91,208,031
	11 12 13	Investi Other Total 12) Grants	tment income (Part VIII, col revenue (Part VIII, column i revenue—add lines 8 through s and similar amounts paid (F	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), li	ne	13,767 293	7,238 2,835	13,679,213 245,420
	11 12 13 14	Investi Other Total 12) Grants Benefi	tment income (Part VIII, col revenue (Part VIII, column i revenue—add lines 8 through s and similar amounts paid (Pa ts paid to or for members (Pa	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), li Part IX, column (A), lines 1-3)	ne	13,767 293 86,617	7,238	13,679,213 245,420 91,208,031
<u>«</u>	11 12 13	Investi Other Total 12) Grants Benefi	tment income (Part VIII, col revenue (Part VIII, column in revenue—add lines 8 through a and similar amounts paid (Fi ts paid to or for members (Pa es, other compensation, emp	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), li	ne	13,767 293 86,617	7,238 2,835 0	13,679,213 245,420 91,208,031
<u>«</u>	11 12 13 14	Investo Other Total (12) Grants Benefit Salarite 5-10)	tment income (Part VIII, col revenue (Part VIII, column in revenue—add lines 8 through a and similar amounts paid (Pa ts paid to or for members (Pa es, other compensation, emp	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), li Part IX, column (A), lines 1-3)	ne	13,767 293 86,617 25,742	7,238 2,835 0	13,679,213 245,420 91,208,031 27,388,783
	11 12 13 14 15	Other Total (12) Grants Benefit Salarius 5-10) Profes	tment income (Part VIII, col revenue (Part VIII, column in revenue—add lines 8 through s and similar amounts paid (F ts paid to or for members (Pales, other compensation, emp ) ssional fundraising fees (Part indraising expenses (Part IX, colum	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), line 11X, column (A), lines 1-3)	ne	13,767 293 86,617 25,742	7,238 2,835 0	13,679,213 245,420 91,208,031 27,388,783 ( 29,738,724
<u>«</u>	11 12 13 14 15 16a b	Other Total (12) Grants Benefit Salarit 5-10) Profes Total fu	tment income (Part VIII, column in revenue (Part VIII, column in revenue—add lines 8 through its paid to or for members (Partis, other compensation, employed) is signal fundraising fees (Part IX, column expenses (Part IX, column (	umn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  111 (must equal Part VIII, column (A), lines 11X, column (A), lines 1-3)	ne	13,767 293 86,617 25,742 28,025	7,238 2,835 0 6,004 0	13,679,213 245,420 91,208,031 27,388,783 0 29,738,724
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Louisville, KY 402411122

**Use Only** 

. ✓Yes No

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

Form	990 (2015)			Page <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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? If "Yes," complete Schedule L, Pait 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?	26		No

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Note. All Form 990 filers are required to complete Schedule O . . . . . . .

instructions for applicable filing thresholds, conditions, and exceptions)

27

28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Yes

Yes

Form 990 (2015)

Nο

Nο

Nο

Nο

Νo

Nο

Νo

Νo

Nο

If "Yes," complete Schedule L, Part II .

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Pai	rt V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		V			_
		enteck in senedule o contains a response of note to any line in this	· uic	<u> </u>		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1,748			
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
	Did th	L ie organization comply with backup withholding rules for reportable payments to	vend	fors and reportable			
٠		ig (gambling) winnings to prize winners?		· · · · · ·	<b>1</b> c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	2a	1,463			
<b>.</b>	•	s return			2b	Yes	
U		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	the y	year <sup>7</sup>	3a	Yes	
b	If "Ye	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	on in S	Schedule O	3b	Yes	
4a		y time during the calendar year, did the organization have an interest in, or a si					
		a financial account in a foreign country (such as a bank account, securities acc int)?	count,	or other financial	4a	Yes	
b		,				103	
_		s," enter the name of the foreign country ►FR, UK istructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and	Emancial Accounts			
	(FBAF	, ,	· ana	maneral Accounts			
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	g the	tax year?	5a		Νo
b	Did ar	ny taxable party notify the organization that it was or is a party to a prohibited t	ax sh	elter transaction?	5b		Νo
С	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?					
		•			5с		
6a		the organization have annual gross receipts that are normally greater than \$10 ization solicit any contributions that were not tax deductible as charitable cont			6a		No
b		s," did the organization include with every solicitation an express statement th not tax deductible?	at su	ch contributions or gifts	<b>6</b> b		
7	Organ	izations that may receive deductible contributions under section 170(c).					
а		le organization receive a payment in excess of \$75 made partly as a contributines provided to the payor?		d partly for goods and	7a		No
b	If"Ye	s," did the organization notify the donor of the value of the goods or services $\operatorname{pi}$	rovide	ed?	7b		
С		le organization sell, exchange, or otherwise dispose of tangible personal proper irm 8282?	ty for	which it was required to	<b>7</b> c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year	7d				
е	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	<b>7</b> f		No
g	If the requir	organization received a contribution of qualified intellectual property, did the ored?	rganız • •	ation file Form 8899 as	<b>7</b> g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	, dıd	the organization file a	7h		
8	Did a	oring organizations maintaining donor advised funds.  donor advised fund maintained by the sponsoring organization have excess bus  the year?	sines:	s holdings at any time	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966			9a		
		ie sponsoring organization make a distribution to a donor, donor advisor, or rela		erson?	9b		
10		on 501(c)(7) organizations. Enter		-	•		
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a				
b	Gross facilit	receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
11		on <b>501(c)(12) organizations.</b> Enter					
а	Gross	Income from members or shareholders	11a				
b		income from other sources (Do not net amounts due or paid to other sources					
	agains	st amounts due or received from them)..........[	11b				
12a	Section	on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	ın lıe	u of Form 1041?	<b>12</b> a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	year <b>Sectio</b>	on 501(c)(29) qualified nonprofit health insurance issuers.					
а		organization licensed to issue qualified health plans in more than one state? <b>N</b> onal information the organization must report on Schedule O	ote. S	See the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states	13b				
_		ch the organization is licensed to issue qualified health plans					
		the amount of reserves on hand	<b>13c</b>	7	14a		No
		s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	•		14a		NO
		,					

Part	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b			
C	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	,	0b belo	w, 
Sec	tion A. Governing Body and Management		Yes	No
	Enter the number of voting members of the governing body at the end of the tax vear	,		
b	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			
	Enter the number of voting members included in line 1a, above, who are ndependent  1b 37	,		
	Old 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
	Old 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
	Old the organization make any significant changes to its governing documents since the prior Form 990 was iled?	4		No
<b>5</b> D	Old the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
<b>6</b> D	Old the organization have members or stockholders?	6		No
	Old 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
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders or persons other than the governing body?	, <b>7</b> b		No
	Old the organization contemporaneously document the meetings held or written actions undertaken during the vear by the following			
a T	The governing body?	8a	Yes	
b E	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	s 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

Yes No **10a** Did the organization have local chapters, branches, or affiliates? . . 10a Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 13 Yes 14 Did the organization have a written document retention and destruction policy? . . . . . . . . . . 14 Yes 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 15b Nο 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 **16**a Νo **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	$\overline{}$	Diagl	
Section	L.	DISCI	osure

	N I	
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	

- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

  ☐ Own website. ☐ Another's website. ☐ Upon request. ☐ Other (explain in Schedule O)
- 9 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

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

interest policy, and financial statements available to the public during the tax year
 State the name, address, and telephone number of the person who possesses the organization's books and records
 ►Scott O wens 600 West Walnut Street Danville, KY 40422 (859) 238-5457

Part VII

# Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 更合 dotted line) Trustee See Additional Data Table

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total	ts to Part VII, S	ection A						1,584,017	0	228,558
d Total (add lines 1b and 1c) .  Total number of individuals (ii \$100,000 of reportable comp	ncluding but not	lımıted t	o the	se I	ıste		e) wl			223,330

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

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from the organization Report compensation for the calendar ye	<del></del>	<u> </u>
<b>(A)</b> Name and business address	( <b>B</b> ) Description of services	<b>(C)</b> Compensation
SODEXO INC AFFILIATES	FOOD SERVICE	3,783,482
PO BOX 70060 CHICAGO, IL 60673		
MCCOY CONSTRUCTION CO INC	CONTRACTOR	890,501
101 THOROUGHBRED DR DANVILLE, KY 40422		
ABEL CONSTRUCTION COMPANY	CONTRACTOR	503,266
3401 Bashford Avenue Ct Louisville, KY 40218		
THE DANVILLE LAW GROUP	LEGAL SERVICES	416,516
114 SOUTH FOURTH ST DANVILLE, KY 404231517		
EBSCO	LIBRARY SUBSCRIPTION SERVICES	265,684
PO BOX 830625 BIRMINGHAM, AL 35283		
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	

Yes

No

Form 99		15)						Page <b>9</b>
Part V	Ш	Statement o						
		Check If Schedu	ule O contains a respor	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1a	Federated cam	paigns 1a	0				
Grants smounts	ь	Membership du	es <b>1b</b>	0				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising eve	ents <b>1c</b>	0				
	d	Related organiz	ations <b>1d</b>	0				
s, G iii.ii	е	Government grants	s (contributions) <b>1e</b>	184,008				
tion ir S	f	All other contribution	ons, gifts, grants, and <b>1f</b>	10,797,666				
iba After	q		ons included in lines	1,772,536				
on tr		1a-1f \$	- 1 - 1 f		10,981,674			
<u>ة ت</u>	h	iotal. Add lines	s 1a-1f		10,961,074			
된	2a	Comprehensive Fe	۵	Business Code 611710	65 150 171	65 150 171		
FV-3	b	Auxiliary Services	<u> </u>	611710	65,150,171 1,151,553	65,150,171 1,151,553		
ıń CΣ	c	- Taxillary Services		011710	1,131,333	1,131,333		
F V	d							
S E	e							
Program Service Revenue	f	All other progra	am service revenue		0	0	0	0
ĕ	g	Total. Add lines	s 2a-2f		66,301,724			
	3		ome (including dividen		4,010,222		92,459	3,917,763
	4		ar amounts)	-	0	0	0	0
	5	Royalties		🔸	0	0	0	0
	_	_	(ı) Real	(II) Personal				
	6a	Gross rents	0					
	b	Less rental expenses	0					
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)	•				
	7a	Gross amount	(ı) Securities	(II) O ther				
	74	from sales of assets other than inventory	30,584,119	0				
	ь	Less cost or other basis and	20,915,128					
	c	sales expenses Gain or (loss)	9,668,991	0				
	d	• • •	s)		9,668,991			9,668,991
enne	8a	Gross income f events (not inc	luding					
Other Revenue		See Part IV, lin	reported on line 1c) le 18 a					
O			penses <b>b</b> [loss) from fundraising	events .				
			rom gaming activities					
	ь	Less directex	penses b					
			loss) from gaming acti	vities				
	10a	Gross sales of	inventory, less	•				
		returns and allo	owances .					
	ь	Less cost of go	a oods sold b					
		_	loss) from sales of inve	entory <b>&gt;</b>				
		Miscellaneous	s Revenue	Business Code				
	11a	Miscellaneous		900099	167,213	167,213		
	Ь	Fitness Center		900099	78,207			78,207
	C	All other rave			0	0	0	0
	d e	All other revenue Total. Add lines		•	0	0	0	0
	12		See Instructions .		245,420			
		- Joean Tevellue.	Sec instructions :	•	91,208,031	66,468,937	92,459	13,664,961

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 . . . . . . (B) (D) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . Grants and other assistance to domestic individuals See Part IV, line 22 25,709,645 25,709,645 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 1,679,138 1,679,138 and 16 . . . . . . . . . . . . Benefits paid to or for members . . . . 0 0 Compensation of current officers, directors, trustees, and 1,199,342 225,949 733,950 239,443 key employees . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 60,882 60,882 Other salaries and wages 21,508,562 16,727,239 3,953,350 827,973 Pension plan accruals and contributions (include section 401(k) 1,778,901 1,315,732 364.080 99.089 and 403(b) employer contributions) . . . . Other employee benefits . . 3.673.015 2,128,371 1,544,644 0 10 Payroll taxes 1,518,022 1,112,757 320,883 84,382 . . . . Fees for services (non-employees) Management . 0 0 104,400 104,400 Legal . . 122,936 122,936 Accounting c . . Ω n n 0 d Lobbying . Professional fundraising services See Part IV, line 17 Ω 0 Investment management fees . . . . 1.430.472 1.430.472 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . 3,470,258 3,470,258 12 Advertising and promotion . 281,137 50,715 230,422 0 13 Office expenses . . 1,011,688 654,530 286,502 70,656 14 151.574 74.347 44,223 Information technology . 33,004 15 Royalties . . 16 Occupancy . 2,994,432 1.196.404 1,698,028 100,000 17 2,251,476 2,059,808 104,400 87,268 18 Payments of travel or entertainment expenses for any federal, n n n 0 state, or local public officials . . . . . 19 37.420 1.032 36,388 Conferences, conventions, and meetings . 20 Interest . . . . 3,228,813 3.228.813 21 Payments to affiliates . . . 0 0 0 0 22 4,406,808 215,277 Depreciation, depletion, and amortization . 4,622,085 483,903 23 483,903 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 ) Library Operations 1,270,943 1,270,943 Foreign Studies Programs 2,208,532 2,208,532 Norton Arts Center Programs 1,175,755 1,175,755 Planned Project Costs 4,515,558 4,515,558 All other expenses 3,031,381 2,966,080 65,301 Total functional expenses. Add lines 1 through 24e 25 73,273,216 89,520,270 14,639,938 1,607,116 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

(B)

End of year

15,557

6.936.087

30,379,472

113,700

774.854

182,964

1,183,194

105,310,335

82,242,368

157,869,741

27,165,407

412,173,679

7,337,072

75,649,427

4,000,000

17,295,368

104,281,867

104,380,488

49,886,486

153,624,838

307,891,812

412,173,679 Form 990 (2015)

0

0

0

(A)

Beginning of year

9,982

6.813.032

28,871,989

209,014

822,583

187,013

1,040,250

105,491,754

81.651.470

175,282,580

29,264,067

429,643,734

6,473,271

75 967 406

15,227,859

11,351,230

109,019,766

117,692,962

52,741,604

150, 189, 402

320.623.968

429,643,734

190 343 748

85,033,413

10a

10b

1

2

3

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6

7

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9

**10**c

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12

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	Check if Sched

Form 990 (2015)

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Fund Balances

Net Assets or

Ralance Sheet ule O contains a response or note to any line in this Part X . . . .

> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

> 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

Cash-non-interest-bearing . . . .

Savings and temporary cash investments

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . . . . . .

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Retained earnings, endowment, accumulated income, or other funds

Paid-in or capital surplus, or land, building or equipment fund

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Pledges and grants receivable, net

Accounts receivable, net . .

Schedule L .

II of Schedule L

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets

Inventories for sale or use

Complete Part VI of Schedule D

Intangible assets . . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Less accumulated depreciation . Investments—publicly traded securities .

6	Donated services and use of facilities	_	_
		6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-6,117,351
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	307,891,812

Cash Accrual Other

Both consolidated and separate basis

Both consolidated and separate basis

Yes

Yes

Yes

Yes

Yes | Form **990** (2015)

2a

2b

2c

3a

3b

No

Νo

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**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

If the organization changed either its oversight process or selection process during the tax year, explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

### **Additional Data**

**Software ID:** 15000238

**Software Version:** 2015v3.0

**EIN:** 61-0444671

Name: Centre College

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

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
Randal B Kell Board Chairman	1 0	x		х				0	0	0	
Mark E Nunnelly	1 0										
Board Vice Chairman		Х		Х				0	0	0	
Cnt Luallen	1 0	x		Х				0	0	0	
Secretary		^		_^_					,		
Lea Stromire Johnson Trustee	1 0	x						0	0	0	
James L Rogers III Trustee	1 0	×						0	0	0	
James A Smith	1 0										
Trustee		Х						0	0	0	
James C Seabury III	1 0	х						0	0	0	
Trustee		_ ^						U	U	C	
Wıllıam S Bowmer III	1 0	×						0	0	O	
Trustee		_ ^						U	0	U	
Peggy P Patterson	1 0	×						0	0	0	
Trustee		,						-	-	-	
J David Grissom	1 0	×						0	0	C	
Trustee											

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Emp Compensated Employees, and Independent Contractors (C) (A) (B) (D) (E) (F) Name Average Position (do not check Reportable Reportable Estimated and Title hours per more than one box, compensation compensation amount of week (list unless person is both an from the from related other officer and a any hours organization organizations compensation for related (W-2/1099-(W-2/1099director/trustee) from the MISC) MISC) organizations organization Office Individual trustee emplovee Highest compensated Institutional Trustee below and related director dotted line) organizations employee Robert L 10 Elliott Х 0 0 Trustee Rutherford B 10 Campbell Х 0 0 Trustee Elizabeth T 10 Kennan Х Trustee Emeriti Paul W 10 Chellgren Х 0 Trustee John H 10 Newman Х 0 Trustee Thomas H 10 Meeker Х 0 0 Trustee George W 10 Privett Jr Х 0 Trustee Kevin D 10 Taylor Х 0 0 Trustee John R 10 Barton Х 0 0 Trustee Greg W 10 Caudill Х Trustee

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Emp Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Name Average Position (do not check Reportable Reportable Estimated and Title hours per more than one box, compensation compensation amount of week (list unless person is both an from the from related other officer and a any hours organization organizations compensation for related director/trustee) (W-2/1099-(W-2/1099from the organizations MISC) MISC) organization Officer employee Highest compensated Individual trustee or director below Institutional Trustee and related dotted line) employee organizations 10 Barb Emler Х 0 0 Trustee G Watts 10 Humphrey Χ 0 0 Trustee Thomas R 10 Baeker Х 0 0 Trustee 10 Angle Evans 0 0 Trustee Anıta M 1.0 Britton Х 0 0 Trustee Kenneth J 10 Mardick Χ 0 0

Trustee							
Trustee	1 0	х			0	0	Q
Eddy Roberts Jr	1 0	х			0	0	0

Trustee Nelson D 10

Rodes Jr 0 Х 0 Trustee

Sheila A

10

Burks Х

Trustee

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Emp Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Name Average Position (do not check Reportable Reportable Estimated and hours per more than one box, compensation compensation amount of Title week (list unless person is both an from the from related other any hours officer and a organization organizations compensation for related director/trustee) (W-2/1099-(W-2/1099from the organizations MISC) MISC) organization Officer Former emploviee Highest compensated Individual trustee below Institutional Trustee and related dotted line) employee organizations Joanne K 10 Duncan Х 0 0 Trustee 10 Jeff Mackin 0 0 0 Х Trustee 10 Jess Correll Χ 0 0 0 Trustee 10 Tao Le 0 Х 0 Trustee Brian 10 Mefford Х 0 0 0 Trustee 10 Lee Tatum Χ 0 0 0 Trustee James D 10 Rouse Х 0 0 0 Trustee Beth P Klein 10 Х 0 0 Trustee (partial year) Robert T 10 Brockman 0 0 Х Trustee John A 50 0

420,126

36,952

0

Roush

President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Emplo Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Position (do not check Average Reportable Reportable Estimated Title amount of hours per more than one box, compensation compensation week (list unless person is both an from the from related other any hours officer and a organization organizations compensation director/trustee) for related (W-2/1099-(W-2/1099from the MISC) organizations MISC) organization Officer Highest compensated Xe. emplovee Individual trustee Institutional Trustee below and related 90000 100000 dotted line) organizations employee Richard W 50 0 Trollinger 194,933 36,48 Х 0 VΡ Development Robert L Keasler 40 0 VP Finance, Χ 188,382 9,75 Treasurer (7-1-15 through 11-30-15) Stephanie L 50 0 Fabritius Х 0 47,36 173,235 VP Academic. Dean John Cuny 40 0 VP Finance. Х 7.500 Treasurer (12-1-15 through 1-31-16) John R Farris 40 0 Interim VP Χ 0 0 Finance. Treasurer (2-1-16 through 6-30-16) James P 50 0 Leahey Х 127,207 0 28,58 Counsel Shawn Lyons 50 0 Associate VP Х 127,115 19,13 Development Steven A 50 0 Hoffman Х 119,625 0 8.87 Director Norton Arts Ctr Beth Glazier-50 0 McDonald Х 114,597 0 24.55 Associate Dean Kay Drake 50 0 Director of 111,297 16.85 Human Resources

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hospital's name, city, and state

**170(b)(1)(A)(iv).** (Complete Part II )

described in section 170(b)(1)(A)(vi). (Complete Part II)

As Filed Data -DLN: 93493135124037 OMB No 1545-004

SCHEDULE A (Form 990 or 990EZ)

Department of the

Centre College

Part I

✓

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2

3

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

61-0444671

Treasury Internal Revenue Service Name of the organization ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

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

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

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

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

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

An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations . . . . . . . . . . . . . . . . Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Schedule A (Form 990 or 990-EZ) 2015

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2015 Page 2 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.)

S	ection A. Public Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d)2014	<b>(e)</b> 2015	(f)Total
•	fiscal year beginning in) > Gifts, grants, contributions, and	(-,	(-/	(-/	(-,	(-,	(-,
1	membership fees received (Do not include any unusual grants )	7,908,784	18,621,685	23,844,709	7,482,441	10,797,66	68,655,285
2	Tax revenues levied for the						
	organization's benefit and either						0
3	paid to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit						0
	to the organization without						
_	charge	7,000,704	10.624.605	22.044.700	7 402 444	10 707 66	60.655.305
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions	7,908,784	18,621,685	23,844,709	7,482,441	10,797,66	68,655,285
5	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						17,092,978
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5						51,562,307
	from line 4						31,362,307
S	ection B. Total Support						
/ 0 =	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	(f)Total
7	fiscal year beginning in) ► A mounts from line 4	7,908,784	18,621,685	23,844,709	7,482,441	10,797,666	68,655,285
8	Gross income from interest,	.,,			.,,		
	dividends, payments received						
	on securities loans, rents,	2,735,555	2,609,111	2,986,605	3,686,548	4,010,222	16,028,041
	royalties and income from similar sources						
9	Net income from unrelated						
	business activities, whether or						0
	not the business is regularly						
10	Carried on Other income Do not include						
10	gain or loss from the sale of	02.004	00.353	07.120	04.700	70.20	422.202
	capital assets (Explain in Part	92,804	80,352	87,130	84,709	78,207	423,202
	VI)						
11	<b>Total support.</b> Add lines 7 through 10						85,106,528
12	Gross receipts from related activit	ies, etc (see ins	tructions)	<u> </u>		12	311,633,867
13	First five years.If the Form 990 is			, thırd, fourth, or fı	fth tax year as a s	ection 501(c)	<u> </u>
	check this box and <b>stop here</b>						, ,
S	ection C. Computation of Pu	blic Support	Percentage			•	
14	Public support percentage for 201	5 (line 6, column	(f) divided by line	11, column (f))		14	60 59 %
15	Public support percentage for 201	4 Schedule A, Pa	ırt II, lıne 14			15	49 08 %
16a	<b>33 1/3% support test—2015.</b> If the	organization did	not check the box	on line 13, and li	ne 14 is 33 1/3%	or more, check	this box
	and <b>stop here.</b> The organization qu	ialifies as a public	cly supported orga	inization			▶ 🗸
b	<b>33 1/3% support test—2014.</b> If the	e organization did	not check a box o	n line 13 or 16a,	and line 15 is 33	1/3% or more,	check this
	box and <b>stop here.</b> The organization		, , ,	_			▶□
17a	<b>10%-facts-and-circumstances test</b> is 10% or more, and if the organize	_			, , ,		
	in Part VI how the organization me						
	organization			J		, , , , ,	▶ □
b	10%-facts-and-circumstances test						•
	15 is 10% or more, and if the organization in Part VI how the organization						-1

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

Schedule A (Form 990 or 990-EZ) 2015

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.)

Se	ction A. Public Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
•	iscal year beginning in) ▶	(-)	(-)	(0)_00	(-)	(-)	(1)
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 <b>Total.</b> Add lines 1 through 5						
6	Amounts included on lines 1, 2,						
/a	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 Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
٥	from line 6)						
Se	ction B. Total Support		•		•		•
	Calendar year						7.5.
(or f	iscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
9	Amounts from line 6						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
b	and income from similar sources Unrelated business taxable						
U	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
L1	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)						
L3	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
L4	First five years.If the Form 990 is	cor the organizati	n's first, second	, third, fourth, or	I fifth tax vear as a	section 501(c	)(3) organization
	check this box and <b>stop here</b>		,	,,,	,		<b>▶</b> □
Se	ction C. Computation of Pub	lic Support P	ercentage				-
15	Public support percentage for 2015			13 column (f))		45	
		•		15, column (1))		15	
L6	Public support percentage from 20		<u> </u>			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
L7	Investment income percentage for	<b>2015</b> (line 10c, c	olumn (f) dıvıded	by line 13, colun	nn (f))	17	
18	Investment income percentage from	n <b>2014</b> Schedule	A, Part III, line	17		18	
L9a	33 1/3% support tests—2015.If the				l line 15 is more t		nd line 17 is not
-	more than 33 1/3%, check this box	=					<b>▶</b> □
b	33 1/3% support tests—2014.If the					-	•
_	18 is not more than 33 1/3%, check	-					
20	Private foundation If the organizat						

#### 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, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V, D

	I, complete Sections A and D, and complete Part V )			
Se	ction 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 <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section	2		
3a	509(a)(1) or (2)  Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	<b>3</b> c		
<b>4</b> a	Was any supported organization not organized in the United States ("foreign supported organization")?  If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
_	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  Did the organization support any foreign supported organization that does not have an IRS determination under	15		 
C	organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?  If "Yes," complete Part II of Schedule L (Form 990)	8		
<b>9</b> a	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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	<b>9</b> c		
0a	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>10</b> a		
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)	<b>10</b> b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 3.5% controlled entity of a person described in (a) or (b) above 2.16 "Vee" to a bioric provide detail in Part VI	110		1

each of the supported organizations? Provide details in Part VI

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

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

3a

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	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		
,	Other expenses (see instructions)	7		
;	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)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	<b>—</b>		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c)  Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)						
Section D - Distributions			Current Year						
1 Amounts paid to supported organizations to accom	plish exempt purposes								
2 A mounts paid to perform activity that directly furthe excess of income from activity	A mounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity								
3 Administrative expenses paid to accomplish exemp									
4 Amounts paid to acquire exempt-use assets									
5 Qualified set-aside amounts (prior IRS approval rec	quired)								
6 Other distributions (describe in Part VI) See instru	ictions								
· · · · · · · · · · · · · · · · · · ·	20010115								
7 Total annual distributions. Add lines 1 through 6									
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide							
9 Distributable amount for 2015 from Section C, line	6								
10 Line 8 amount divided by Line 9 amount									
		T	I						
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 requiredsee instructions)									
<b>3</b> Excess distributions carryover, if any, to 2015									
a									
b									
<u>c</u>									
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 \$									
Applied to underdistributions of prior years									
<b>b</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)									
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c									
8 Breakdown of line 7									
a									
b									
<b>c</b> Excess from 2013									
<b>d</b> From 2014									
<b>e</b> From 2015									
			(F 000 000 F7) /2 0 1 F						

 and 6. Also complete this part for any additional information. (See instructions).								
Facts And Circumstances Test								

Return Reference	Explanation
Schedule A, Part II, Line 10 Other	DESCRIPTION - FITNESS CENTER, COLUMN A - 92804 0, COLUMN B - 80352 0, COLUMN C -

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

DLN: 93493135124037

# **SCHEDULE D**

(Form 990)

Department of the

Internal Revenue Service

Treasury

**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

Open to Public Inspection

	me of the organization ntre College			Empl	oyer identificat	ion numb	er
Cei	ide College			61-0	444671		
Pa	Organizations Maintaining Donor Complete if the organization answere	Advised Funds or ed "Yes" on Form 990,	Other Similar For Part IV, line 6.	unds c	or Accounts.		
		(a) Donor advised fund		(b)	Funds and othe	r account:	s
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 a funds are the organization's property, subject to t	_		or advis	sed	☐ Yes	□No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the				r purpose	,	,
_	conferring impermissible private benefit?		1 1157 11		000 0 171	Yes	☐ No
	rt II Conservation Easements. Comple			n Forn	1 990, Part IV	, line /.	
1	Purpose(s) of conservation easements held by th	,	that apply)				
	Preservation of land for public use (e.g., recreeducation)	eation or	- Preservation of ai	n histor	ıcally important	: land area	a
	Protection of natural habitat	F	Preservation of a				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization	held a qualified conserva	tion contribution in t	he form	of a conservati	on	
	easement on the last day of the tax year	·					
					Held at the	End of the	e Year
а	Total number of conservation easements			2a			
b	Total acreage restricted by conservation easeme		odup (a)	2b			
C	Number of conservation easements on a certified		` ,	2c			
d	Number of conservation easements included in (or historic structure listed in the National Register	.) acquired after 6/17/06	, and not on a	2d			
3	Number of conservation easements modified, trai	nsferred, released, exting	uished, or terminate	d by the	e organization d	uring the	
	tax year ▶						
4	Number of states where property subject to cons	ervation easement is loca	ated ▶				
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		ing, inspection, hand	dling of	ΓYe	es [N	lo
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of vi	olations, and enforci	ng cons	servation easem	nents duri	ng the
	<b>-</b>						
7	A mount of expenses incurred in monitoring, inspe	ecting, handling of violation	ons, and enforcing co	onserva	ition easements	during th	ne year
	<b>\$</b>		_				
8	Does each conservation easement reported on III (B)(I) and section $170(h)(4)(B)(II)$ ?	,	•		` ^ `	•	lo
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the org					
Pai	rt III Organizations Maintaining Collec			or Oth	ner Similar A	ssets.	
	Complete if the organization answere	•	•				
<b>1</b> a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	assets held for public ex	hibition, education,	or resea	arch in furtherar		
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public ex					olic
(	(i) Revenue included on Form 990, Part VIII, line 1	L		<b>▶</b> \$		0	
(	ii) Assets included in Form 990, Part X		1		578		
2	If the organization received or held works of art, he following amounts required to be reported under S		her sımılar assets fo				
а	Revenue included on Form 990, Part VIII, line 1				<b>▶</b> \$		

**b** Assets included in Form 990, Part X

## Subject or sequence and execution and exercises consisted and supply consisted and analysis collections consisted and supply in provide a description of the organizations collections and explain how they further the organizations' exempt purpose in Part XIII and complete the following that are an explainable in the organizations' exempt purpose in Part XIII and complete the following that was a description of the organizations collections and explain how they further the organizations' exempt purpose in Part XIII and complete the following that the organizations' collections and explain how they further the organizations' exempt purpose in Part XIII and complete the following that the	Part	1111	Organizations Maintaining (continued)	Collections of	Art, Historical	Treasures, o	r Other Simila	r Ass	ets	
b	3			cession, and other r	ecords, check any	of the following th	at are a significan	t use	of its	
Scholarly reservation   Scho	а	<b>√</b>	Public exhibition		d L	oan or exchange p	programs			
Part XIII   Par	b	<b>√</b>	Scholarly research		<b>e</b>	ther				
Part XIII	c	<b>√</b>	Preservation for future generations							
Part   March   Part	4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in								
Earth   Escrow and Custodial Arrangements   Description   Part XI, line   12,   Part X   Included on Form   190,   Par	5									
Complete   the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10.    Second	Dar				d as part of the org	anization's collec	tion?	Yes	✓ No	<u> </u>
Included on Form 990, Part X		CIV	Complete if the organization		on Form 990, Pa	rt IV, line 9, or	reported an am	ount	on Forr	m 990,
C   Additions during the year   16   16   17   17   17   17   17   17	1a			stodian or other int	ermediary for conti	ributions or other	_	Yes	∏ No	o
Main	b	If"	Yes," explain the arrangement in F	Part XIII and compl	ete the following ta	ble		A mou	ınt	
Ending balance	C	Вед	ginning balance				1c			
The finding balance    1	d	A d	ditions during the year				1d			
Description		Dıs	tributions during the year			_				
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V			=			L				
Part V	<b>2</b> a	Did th	ne organization include an amount o	on Form 990, Part >	K, line 21, for escro	w or custodial acc	count liability?	Yes	☐ No	•
Part V	b	If"Ye	es." explain the arrangement in Par	t XIII Check here	ıf the explanation h	as been provided	ın Part XIII			
1a         Beginning of year balance         285,886,308         267,165,187         231,243,960         207,316,337         214,120,391           b         Contributions         -5,242,540         15,329,127         5,920,759         2,487,888         2,466,520           c         Net investment earnings, gains, and losses         5,132,946         14,453,666         39,580,474         31,785,282         554,365           d         Grants or scholarships         4,892,290         4,651,683         4,191,749         3,920,656         4,677,418           e         Other expenditures for facilities and programs         5,667,649         5,194,588         4,066,799         5,089,145         4,116,292           f         Administrative expenses         1,358,807         1,215,341         1,221,468         1,335,766         1,033,209           g         End of year balance         273,857,968         285,886,300         267,165,187         231,243,960         207,316,337           2         Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         3         3         3         4         4,116,292           2         Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         3         4         5         6         5	Par									
b Contributions  -5,242,540 -5,329,127 -5,820,759 -2,487,888 -2,468,520  c Net investment earnings, gains, and losses -5,132,946 -1,14,453,606 -1,122,146 -1,1358,807 -1,14,453,606 -1,132,144 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,14,453,606 -1,				- ' ' '		· · ·	<del></del>			
C Net investment earnings, gains, and losses  d Grants or scholarships  4,892,290  4,651,683  4,191,749  3,920,556  4,677,418  e Other expenditures for facilities and programs  5,667,649  5,194,588  4,066,799  5,089,145  4,116,292  f Administrative expenses  1,358,807  1,215,341  1,221,458  1,335,766  1,033,209  End of year balance  273,857,968  285,886,308  267,165,187  231,243,960  207,316,357  2 Provide the estimated percentage of the current year end balance (line 1 g, column (a)) held as  8 Board designated or quasi-endowment ▶ 56 0 3 %  C Temporarily restricted endowment ▶ 5 6 0 3 %  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  5 If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?  2 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  Cost or other basis (cother)  1 Land	<b>1</b> a	Begin	ining of year balance	285,886,308	267,165,187	231,243,96	207,316,	357	21	4,120,391
Losses   1,132,496   14,435,606   39,800,474   31,783,282   554,365     Grants or scholarships   4,892,290   4,651,683   4,191,749   3,920,656   4,677,418     E Other expenditures for facilities and programs   5,667,649   5,194,588   4,066,799   5,089,145   4,116,292     f Administrative expenses   1,358,807   1,215,341   1,221,458   1,335,766   1,033,209     g End of year balance   273,857,968   285,886,308   267,165,187   231,243,960   207,316,357     2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 37 43 %     b Permanent endowment ▶ 56 03 %     c Temporarily restricted endowment ▶ 65 50 %     c Temporarily restricted endowment ▶ 65 4 %     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) related organizations   3a(i)   Yes   3a(i)   No     b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?   3a(ii)   No     b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?   3a(ii)   No     b If "Yes" on 3a(ii), are the related organization answered Yes' to Form 990, Part XI, line 11a.See Form 990, Part X, line 10.     Description of property   Cost or other basis (cother basis (cother)   Accumulated (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	b	Contr	nbutions	-5,242,540	15,329,127	5,820,75	59 2,487,	388		2,468,520
d Grants or scholarships	c			5,132,946	14,453,606	39,580,47	74 31,785,	282		554,365
e Other expenditures for facilities and programs  5,667,649  5,194,588  4,066,799  5,089,145  4,116,292  Administrative expenses  1,358,807  1,215,341  1,221,458  1,335,766  1,033,209  End of year balance  273,857,968  285,866,308  267,165,187  231,243,960  207,316,357  29 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board designated or quasi-endowment ▶ 37 43 %  b Permanent endowment ▶ 56 03 %  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  (iii) related organizations  b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Park 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.  Describe in Percentages on the organization answered "Yes" to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.  Describe in Park XIII the intended uses of the organization's endowment funds  Cost or other basis (cost	d	Grant	s or scholarships		, ,	· · ·				
f Administrative expenses	e	Other	r expenditures for facilities rograms	5,667,649	5,194,588	4,066,79	5,089,	145		4,116,292
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  Cost or other basis (investment)  Description of property  Land  Description of property  Description of property  Land  Description of property  Land  Description of property  Land  Description of property  Description of property  Land	f	A dmı	ŀ	1,358,807	1,215,341	1,221,45	58 1,335,	766		1,033,209
Board designated or quasi-endowment ▶ 37 43 %  b Permanent endowment ▶ 56 03 %  c Temporarily restricted endowment ▶ 6 54 % 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	g	End o	f year balance	273,857,968	285,886,308	267,165,18	231,243,	960	20	7,316,357
b Permanent endowment ▶ 56 03 %  c Temporarily restricted endowment ▶ 6 54 % 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	2	Provid	de the estimated percentage of the	current year end b	alance (line 1g, col	umn (a)) held as				
c Temporarily restricted endowment ► 6 54 % 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	а	Board	l designated or quasi-endowment 🕨	37 43 %						
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	b	Perma	anent endowment ▶ 56 03 %							
Figure	c		•		<b>%</b>					
(i) unrelated organizations   3a(i)   Yes   3a(i)   Yes   3a(i)   Yes   3a(i)   No   No   No   No   No   No   No   N	3a			ssession of the org	janization that are l	neld and administe	ered for the		· ·	
(ii) related organizations 3a(ii) No   b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b     4 Describe in Part XIII the intended uses of the organization's endowment funds   Part VI Land, Buildings, and Equipment.			•					3a(i		No
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) (b) Accumulated (c)depreciation (other)  Land			_							No
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) (b) (Cost or other basis (cother))       Accumulated (cother)       (d)Book value         1a Land       16,632,017       16,632,017       16,632,017         b Buildings       146,975,832       62,119,143       84,856,689         c Leasehold improvements       25,418,945       22,914,270       2,504,675         e Other       1,316,954       1,316,954       1,316,954         Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))					•			3b		
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.         Description of property       (a) (b) Cost or other basis (other)       Accumulated (c) depreciation       (d)Book value         1a Land        16,632,017       16,632,017         b Buildings       146,975,832       62,119,143       84,856,689         c Leasehold improvements        25,418,945       22,914,270       2,504,675         e Other       1,316,954       1,316,954       1,316,954       105,310,335					's endowment funds	<b>;</b>				
Cost or other basis (investment)  Land	Par	LVI			o Form 990, Part	: IV, line 11a.Se	ee Form 990, Pa	rt X,	line 10	
b Buildings       146,975,832       62,119,143       84,856,689         c Leasehold improvements			Description of property		Cost or other	basis   Cost or other			<b>(d)</b> Boo	k value
c Leasehold improvements       146,975,832       62,119,143       84,856,689         c Leasehold improvements       25,418,945       22,914,270       2,504,675         e Other       1,316,954       1,316,954       1,316,954         Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))	<b>1</b> a l	and				·   · · · · ·	2,017		1	6,632,017
c Leasehold improvements	b E	Buildin	gs				5 022		_	4.056.600
d Equipment	ا م		oold improvements			146,97	5,832 62,119	7,143	8	4,856,689
e Other			·			25 41	8.945 22 91	1.270		2.504.675
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶ 105,310,335				• • •		25,71	22,91	.,_, .		_,551,575
					2-mt V		·	$\perp$		
Schedule D (Form 990) 2015	iotal	. A aa l	imes ta uirough te (column (d) mu	ısı equal FOFM 990, F	-art x, column (B), II.	ne 10(C) )				

Part VII Investments—Other Securities. Com	plete if the organiza	ation answered 'Yes'	Page : on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	<u> </u>	(b)Book value	(c)Method of valuation
(Including name of security)  (1)Financial derivatives		.,	Cost or end-of-year market value
(2)Closely-held equity interests			
(3)O ther (A) Private Equity Securities		55,039,418	F
(B) Small cap equities		27,877,022	F
(C) Alternative Equity Strategies		15,991,014	F
(D) Notes receivable and other		1,756,041	F
(E) Large cap equities		57,206,246	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	157,869,741	
Part VIII Investments—Program Related.  Complete if the organization answered	Yes' on Form 990 F		. Farma 000 . Davit V . lura 12
(a) Description of investment	res dirionii 550, P	(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 For	m 990, Part IV, line 1:	1d See Form 990, Part X, line 15
(1) Funds Held in Trust by Others		, ,	<b>(b)</b> Book value 27,097,633
(2) Other Receivables			67,774
Total. (Column (b) must equal Form 990, Part X, col (B) line 15	)		▶ 27,165,407
Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25.	nization answered 'Y	es' on Form 990, Pa	art IV, line 11e or 11f.
1. (a) Description of liability	(b) Book value		
Federal income taxes			
FV Adjustment in Interest Rate Swaps	15,710,898		
Annuity Payment & Life Income Obligations	965,839		
-			
Advances from Federal Govt for student loans	618,631	· <u> </u>	
		-	
		-	
		4	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	17,295,368		financial statements that remarks the
2. Liability for uncertain tax positions In Part XIII, provide organization's liability for uncertain tax positions under FIN			

Schedule D (Form 990) 2015

1

2

b

d

48,553,645

-8,302,566

0

2a

2b

**2**c

		1
Add lines <b>2a</b> through <b>2d</b>	2e	-8,302,566
Subtract line <b>2e</b> from line <b>1</b>	3	56,856,211
A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,358,807		
Other (Describe in Part XIII )		
Add lines <b>4a</b> and <b>4b</b>	4c	34,351,820
Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	91,208,031
Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per	Return.
Total expenses and losses per audited financial statements	1	61,285,801
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments		
Other losses		
Other (Describe in Part XIII )		
Add lines <b>2a</b> through <b>2d</b>	2e	0
Subtract line <b>2e</b> from line <b>1</b>	3	61,285,801
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b  1,358,807		
Other (Describe in Part XIII )		
Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	28,234,469
Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	89,520,270
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		de any additional
	Add lines 2a through 2d	Add lines 2a through 2d

Explanation

campus for viewing by the campus community and visitors

Collections include paintings, glass and sculpture. The art collection exists primarily to help fulfill the

liberal arts education mission of the College Many, but not all, pieces are displayed throughout

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

Total revenue, gains, and other support per audited financial statements .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . .

Donated services and use of facilities .

Recoveries of prior year grants .

Other (Describe in Part XIII)

Return Reference

Schedule D, Part III, Line 4

collections

Collections of art - description of

that the tax position would be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax benefit will be recorded. The College would recognize interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The College recognized and accrued no amounts for interest and penalties as of June 30, 2016 or 2015 or for the years then ended As of June 30, 2016 and 2015, there were no uncertain tax positions identified. Management does not expect the total amount of unrecognized tax benefits to change significantly in the next 12 months Forms 990 and 990-T filed by the College are subject to examination by the Internal Revenue Service (IRS) for up to three years from the extended due date of each return Management believes Forms 990 and 900-T have been filed appropriately. Forms 990 and 990-T filed by the College are FINANCIAL AID AND SCHOLARSHIPS - 26875662 ACTUARIAL LIABILITY FOR ANNUITY Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited OBLIGATIONS - 129893 VALUATION CHANGE IN INTEREST RATE SWAPS - 5976958 Write off financial statements of uncollectible pledges - 10500 Schedule D, Part XII, Line 4(b) Other FINANCIAL AID AND SCHOLARSHIPS - 26875662 expenses in form 990 not in audited financial statements

Page 5

OMB No 1545-0047

2015

Open to Public Inspection

# **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.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

**SCHEDULE E** 

(Form 990 or 990-EZ)

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

Name of the organization **Employer identification number** Centre College 61-0444671 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Yes 4c  $\mathbf{d}$  Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo b Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5**c Νo d Scholarships or other financial assistance? 54 Νo e Educational policies? Νo 5e f Use of facilities? Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a h Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05

of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

any other additional information (see instructions)							
Return Reference	Explanation						
Schedule E, Part I, Line 3 RACIALLY	In addition to the Equal Opportunity Employer notice that appears with all of Centre's employment ads,						

Schedule E (Form 990 or 990EZ) (2015)

	the College has an official nondiscrimination statement that is reprinted in major publications such as our introduction-to-the-College brochure, the admission view book, and the catalog. The statement also appears on the College's wiebsite
Schedule E, Part I, Line 6(a)	Centre College receives assistance from the federal student aid program to fund the cost of attendance

FINANCIAL AID OR ASSISTANCE for eligible students. These programs include Pell, Federal Work Study, Perkins, Federal Supplemental

FROM A GOVERNMENT Educational Opportunity grants and Stafford loans Federal assistance from other sources include the National Science Foundation and the U.S. Environmental Protection Agency

Page 2

efile GRAPHIC print - DO NO	T PROCESS	As Filed Dat	ta -	DLN:	DLN: 93493135124037		
SCHEDULE F (Form 990)	tement of	Activities C	ed States	OMB No 1545-0047			
Department of the Treasury	•	if the organization Part IV, line 1  ▶ Attach to ile F (Form 990) a	990, ww.irs.gov/form990.	2015  Open to Public Inspection			
Name of the organization Centre College					tification number		
Part I General Information Complete if the organic				61-0444671 14b.			
For grantmakers. Does the and other assistance, the gr used to award the grants or	organızatıon m rantees' elıgıbıl	naıntaın record	s to substantiate the	amount of its grants			
<ul> <li>For grantmakers. Describe assistance outside the Unite</li> <li>Activites per Region (The following)</li> </ul>	in Part V the or ed States				Yes No		
(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region		
(1) See Add'l Data		region	regiony				
(2)							
(3)							
(4)							
(5)							
Sa Sub-total     D Total from continuation sheets     to Part I	0				29,510,815 0		
c Totals (add lines 3a and 3b)  For Paperwork Reduction Act Notice, se	0	_		No 50082W <b>Sche</b> o	29,510,815 Jule F (Form 990) 2015		

Schedule F (Form 990) 2015

organization	and EIN (if applicable)	grant 	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1)							
( 2)							
( 3)							
(4)							

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 . . . . . 

Schedule F (Form 990) 2015

Page 2

Schedule F (Form 990) 2015	Schedule F (Form 990) 2015										
	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	<b>(d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
(1) SCHOLARSHIPS	East Asia and the Pacific	11	105,500								
(2) SCHOLARSHIPS	North America (Canada & Mexico only)	47	521,101	Credit							
(3) SCHOLARSHIPS	Europe (Including Iceland and Greenland)	86	1,052,537	Credit							
(4)											
( 5)											
( 6)											
(7)											
(8)											
(9)											
(10)											
(11)											
( 12)											
(13)											
(14)											
( 15)											
( 16)											

(17)

8621)

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 Yes

Yes

Nο

▽ (see Instructions for Form 8865) 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 Νo

#### **Additional Data**

**Software ID: 15000238** 

Software Version: 2015v3.0

**EIN:** 61-0444671

Name: Centre College

Schedule F (Form 990) 2015

Page 5

#### 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).

Form 990 Schedule F	Part I - Activi	ties Outsiae i	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		1	Program Services	SEMESTER STUDY ABROAD	614,216
North America (Canada & Mexico only)		1	Program Services	SEMESTER STUDY ABROAD	219,064
Europe (Including Iceland and Greenland)			Program Services	SCHOLARSHIPS	1,052,537

(a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program service, for region type) (i.e., fundraising, describe specific type of agents in region service(s) in region region program services, grants to recipients located in the region) North America (Canada & Program Services ISCHOLARSHIPS 521,101 Mexico only) East Asia and the Pacific Program Services ISEMESTER STUDY 119.773 la broad Central America and the Investments 26,878,624

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

Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (a) Region (d) Activities offices in the employees or conducted in region (by (d) is a program service, for region type) (i.e., fundraising, describe specific type of agents in region service(s) in region region program services, grants to recipients located in the region) East Asia and the Pacific Program Services SCHOLARSHIPS 105,500

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and C
Governments
Complete if the organize
Department of the

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

Treasury

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

OMB No 1545-0047

**2015** 

Employer identification number

DLN: 93493135124037

Open to Public Inspection

Schedule I (Form 990) 2015

Centre College						61-0444671	
Part I General Information	n on Grants and	d Assistance					
Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organization.	ard the grants or as tion's procedures fo	sistance? or monitoring the use	of grant funds in the Un				√ Yes No
Part III Grants and Other Assistanthat received more than \$				plete if the organization	answered "Yes" on F	orm 990, Part IV, line 21	l, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<ul><li>2 Enter total number of section 50</li><li>3 Enter total number of other organ</li></ul>							

Cat No 50055P

Procedures for monitoring use of

grant funds

are maintained and documented

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Schedule J (Form 990)

**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.

DLN: 93493135124037 OMB No 1545-0047

reas	ury nal Revenue Service	Thromation about Schedule 3 (1 only	550	y and its instructions is at www.irs.	<u>4047101111330</u> .	Insp	ectio	n
Νa	me of the organiz	zation			Employer identification	ation nu	nber	
Cer	ntre College				61-0444671			
Pa	rt I Questi	ons Regarding Compensation						
							Yes	No
<b>1</b> a		ropiate box(es) if the organization provid Section A, line 1a Complete Part III to						
	First-clas	s or charter travel	<b>~</b>	Housing allowance or residence fo	r personal use			
	<b>✓</b> Travel for	companions		Payments for business use of pers	·	j	İ	ĺ
	Tax idemr	nification and gross-up payments	<b>~</b>	Health or social club dues or initia		j	Ì	ĺ
	Discretion	nary spending account	Γ	Personal services (e g , maid, chai	ıffeur, chef)	ĺ	Ì	Ì
b		xes in line 1a are checked, did the orgai or provision of all of the expenses desc				1b	Yes	
2		ation require substantiation prior to rein ees, officers, including the CEO/Execut				2	Yes	
3	organization's (	. If any, of the following the filing organiza CEO/Executive Director Check all that ed organization to establish compensati	apply	Do not check any boxes for metho	ds			
	✓ Compensa	ation committee	Г	Written employment contract				
	Independe	ent compensation consultant	<b>~</b>	Compensation survey or study				
	Form 990	of other organizations	~	Approval by the board or compens	ation committee			ļ
4	During the year or a related org	r, did any person listed on Form 990, Pa anization	rt VI	I, Section A, line 1a with respect to	the filing organizati	on		
а	Receive a seve	rance payment or change-of-control pay	/men	t?		4a		No
b	Participate in, o	or receive payment from, a supplementa	l non	qualified retirement plan?		4b		No
c	Participate in, o	or receive payment from, an equity-base	d cor	mpensation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and provi	de th	e applicable amounts for each item i	n Part III			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organization	ns mu	ıst complete lines 5-9.				
5	For persons list	ted on Form 990, Part VII, Section A, li contingent on the revenues of		•	any			
а	The organization	on?				5a		No
b	Any related org	janization?				5b		No
	If "Yes," on line	e 5a or 5b, describe in Part III						
6		ted on Form 990, Part VII, Section A, li contingent on the net earnings of	ne 1a	a, did the organization pay or accrue	any			
а	The organization	on?				6a		Νo
b	Any related org	janization?				6b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III						
7	•	ted on Form 990, Part VII, Section A, li lescribed in lines 5 and 67 If "Yes," des		, , , ,	on-fixed	7	Yes	
8		nts reported on Form 990, Part VII, pai nitial contract exception described in Re				8		No
9	If "Yes" on line	8, did the organization also follow the re	ebutt	able presumption procedure describ	ed in Regulations	٩		.,,

5 James P Leahey

Counsel

92,491

25,000

(i)

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

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)(1)-(u1) 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

Note. The sum of columns (B)(I	)-(111)		Tai must equal the total	amount of Form 990,	Part VII, Section A, iin	е та, аррисавіе соіці	nn (D) and (E) amount	s for that individual
(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(E) Total of columns	` ' '
		Base (1) compensation	(iı) Bonus & ıncentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 John A Roush President	(i)	317,402	100,000	2,724	26,500	10,452	457,078	0
	(ii)	0	0	0	0	0	0	0
2 Richard W Trollinger VP Development	(i)	166,459	26,584	1,890	17,637	18,852	231,422	0
· !	(ii)	0	0	0	0	0	0	0
3 Robert L Keasler	(i)	186,858	0	1,524	7,200	2,550	198,132	0
VP Finance, Treasurer (7-1- 15 through 11-30-15)	(ii)	0	0	0	0	0	0	0
4 Stephanie L Fabritius VP Academic, Dean	(i)	155,957	16,307	971	16,227	31,141	220,603	0
	(11)	0	0	0	0	0	0	0

9,716

28,583

155,790

Page 3

### companions Schedule J, Part I, Line 1a Housing allowance or residence for personal use

Schedule J (Form 990) 2015

Schedule J. Part I. Line 1a Health or The College purchased a membership in the local country club in the President's name to gain access to the facilities for occasional business purposes

social club dues or initiation fees The use is 100% business and not considered to be taxable compensation.

Bonuses are earned based on meeting goals set at the beginning of the year by the President of the College

Schedule J, Part I, Line 7 Non-fixed

payments Schedule J (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Schedule K

DLN: 93493135124037 OMB No 1545-0047

**Supplemental Information on Tax Exempt Bonds** ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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.

Name of the organization

Employer identification number

	-t Callana										ipioyei it	ientinca	icioni nu	IIIDEI	
cer	ntre College									61	-04446	71			
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue p	orice	(f)	Description	n of purpose	(g) De	feased		O n		Pool
												l	alf of uer	fina	ncing
										Yes	No	Yes	No	Yes	No
A	County of Boyle Kentucky	61-6000756	103462BD8	04-24-2008	34,38	5,000	Curre	nt Refunding	9		Х		×		Х
В	County of Boyle Kentucky	61-6000756	103462BA4	08-30-2007	44,15	6,380		onstruction	and advanced		х		Х		Х
							reruita	amy 2007	_						
Pa	rt III Proceeds														
						A			В		С			D	
1	A mount of bonds retired.						0		2,411,380						
	A mount of bonds legally def	eased					0		0						
3	Total proceeds of issue					35,675	5,876		44,499,416						
4	Gross proceeds in reserve f	unds					0		0						
5	Capitalized interest from pro	oceeds					0		0						
6	Proceeds in refunding escro	ws					0		0						
7	Issuance costs from procee	ds				233	3,242		334,422						
8	Credit enhancement from pr	oceeds				10:	1,758		398,632						
9	Working capital expenditure	s from proceeds					0		0						
10	Capital expenditures from p	roceeds					0		12,576,750						
11	Other spent proceeds					35,340	0,876		31,189,612						
12	Other unspent proceeds .			•			0		0						
13	Year of substantial completi	on			20	10		20	09						
					Yes	N	lo	Yes	No	Yes		No	Ye	5	No
14	Were the bonds issued as pa	art of a current refund	ing issue?		X				_ x						
15	Were the bonds issued as pa	art of an advance refu	ındıng ıssue?			×	<	Х							
16	Has the final allocation of pr	oceeds been made? .			Х			Х							
17	Does the organization maint allocation of proceeds?	·		port the final	х			×							
	rt IIII Private Business		• •												
тŒ	Filvate business	036				4	Τ		3		С			D	
					Yes	N	•	Yes	No	Yes		No.	Yes	<del></del>	No
1	Was the organization a partr	ner in a partnership, o	r a member of an L	LC, which owned					Y						

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds? . . . . .

Χ

				١	I	В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use	х			Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina			×						
prope								-	-	
С	Are there any research agreements that may result in private business use financed property?	e of bond-		x		Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert									
4	Enter the percentage of financed property used in a private business use by other than a section 501(c)(3) organization or a state or local government			0 %		0 %		•		
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government	ersection		0 %		0 %				
6	Total of lines 4 and 5			0 %		0 %				
7	Does the bond issue meet the private security or payment test?			Х		Х				
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bon issued?			x		Х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or o	disposed of						_		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all noncombonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?	•	х		Х					
Par	IV Arbitrage								•	•
		A			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		х		х					
2	If "No" to line 1, did the following apply?		•						•	
a	Rebate not due yet?		Х		Х					
b	Exception to rebate?	Х		Х						
С	No rebate due?		Х		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?	Х			Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	×			Х					
b	Name of provider	See Part VI								
С	Term of hedge									
d	Was the hedge superintegrated?		Х							
e	Was the hedge terminated?		X							

No

5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?			X		×				
b	Name of provider									
С	Term of GIC									
d	<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
6	Were any gross proceed period?	ls invested beyond an available temporary		x		×				
7	Has the organization es the requirements of sec	tablished written procedures to monitor tion 148? .   .   .	×		x					
Par	rt V Procedures T	o Undertake Corrective Action								
			А		В		С		D	
			Yes	No	Yes	No	C Yes	No	Yes D	No
	that violations of federa and corrected through t	tablished written procedures to ensure I tax requirements are timely identified he voluntary closing agreement program if available under applicable regulations?		No		No		No		No
Pa	that violations of federa and corrected through t self-remediation is not	l tax requirements are timely identified he voluntary closing agreement program if	Yes		Yes		Yes			No
Pa	that violations of federa and corrected through t self-remediation is not	l tax requirements are timely identified he voluntary closing agreement program if available under applicable regulations?	Yes		Yes		Yes			No

No

Yes

В

No

Yes

No

Yes

Yes

Return Explanation Reference All bond proceeds have Schedule K been spent Therefore the Part IV, Line 2c rebate Exception calculation to Rebate does not need to be performed

Return Explanation Reference The difference between Part I Schedule K (e)A issue Part II, price and Part Line 3 II, Line 3A Total total proceeds proceeds of of \$343,036 is issues the result of 2007 Bond vestments arnings

Return Reference	Explanation
Schedule K, Part IV, Line 4b Providers identified with a hedge	UBS 29 7 years PNC 25 3 years

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# **Transactions with Interested Persons**

▶ Complete if the organization answered

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

DLN: 93493135124037 OMB No 1545-0047

**2015** 

Department of the

Schedule L (Form 990 or 990-EZ)

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

Open to Public

nternal Revenue Se	rvice				.,					-111	spect	on
Name of the or	<u> </u>						En	nploye	r identi	fication	numbe	r
Centre College							61	-044	1671			
Part I Exce	ess Benefi	t Transactio	ons (section	501(c)(3), se	ection 501(c)	(4), and 501(				onlv)		
		ganızatıon ansv									<b>4</b> 0b	
<b>1 (a)</b> Nam	ne of disquali	fied person	<b>(b)</b> Re	•	•	fied person an	d (4	•	cription	of	(d) Cor	rected?
				or	ganization			trans	saction		Yes	No
							-					
							+			-		
							+					
							+					
	mount of tax	incurred by or	ganızatıon ma	anagers or dis	qualified pers	ons during the	e year ı	under	section			
4958 .								•	\$			
<b>3</b> Enter the a	amount of tax	t, if any, on line	2, above, rei	mbursed by th	ne organizatio	n		•	<b>&gt;</b> \$			
Part II Lo	ans to an	d/or From I	nterested	Persons.								
Со	mplete if the	organization ai	nswered "Yes	" on Form 990		line 38a, or F	orm 99	0, Par	t IV , lın	ie 26, o	rıfthe	
org	ianization rep	oorted an amou	nt on Form 99	90, Part X, lin	e 5, 6, or 22							
(a) Name of	(b) Relation	ship (c)	(d) Loan	to	(e)O riginal	(f)Balance	(g)	In	(h	)	(i)Wr	ıtten
interested	with	Purpose	of or from th	ie	principal	due	defa		Appro	ved	agreer	nent?
person	organizati	on loan	organizatio	on?	amount				by boa			
			То	From	1		Yes	No	Yes	No	Yes	No
										-		
			+	1						-		
												+
Total		<b>▶</b> \$										
		sistance Be										
		e organizatio							1,,		-	
(a) Name of i		(b) Relations interested pe		(c) A mount	of assistance	<b>(d)</b> ⊤ype	or assi:	stance	(e)	Purpos	e of ass	istance
p 0.00	•••	organiz										
(1) SEE PART V					40,500	INSTITUTI			Edu	cation A	ssistar	nce
						SCHOLARS	HIP		+			
									+			
									+			
									+			
					<u> </u>		-					

Schedule L (Form 990 or 990-EZ) 2015

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organi: reven	f zation's
				Yes	No
(1) MIKE FABRITIUS	HUSBAND OF STEPHANIE FABRITIUS, OFFICER	56,334	COMPENSATION		No
(2) ELIZABETH TROLLINGER	WIFE OF RICHARD TROLLINGER, officer	4,548	COMPENSATION		No
					<u> </u>
					—

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

Return Reference

ASSISTANCE BENEFITING

INTERESTED PERSONS

COLLEGES, UNIVERSITIES AND PRIMARY AND SECONDARY SCHOOLS ARE NOT REQUIRED Schedule L, Part III GRANTS OR

FORM 990, SCH L, PART III, COLUMNS (A) AND (B) HAVE BEEN LEFT BLANK

Explanation

FELLOWSHIPS AND SIMILAR FINANCIAL ASSISTANCE PURSUANT TO THE INSTRUCTIONS TO

TO IDENTIFY INTERESTED PERSONS TO WHOM THEY HAVE PROVIDED SCHOLARSHIPS,

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE M** 

DLN: 93493135124037

# **Noncash Contributions**

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

2015

OMB No 1545-0047

Open to Public Inspection

Treasury

(Form 990)

► Attach to Form 990.

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

Internal Revenue Service

Name of the organization

**Employer identification number** Centre College

61-0444671 **Types of Property** Part I (a) (b) (d) (c) Check Number of contributions Method of determining Noncash contribution ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g Art—Works of art . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household . . . . . . 6 Cars and other vehicles 7 Boats and planes . . . Intellectual property . . 9 Securities-Publicly traded . Х 55 735,090 Market value 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . . 14 Oualified conservation contribution—Other . . . 15 Real estate—Residential . Χ 1,037,446 Market value 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 ▶ (\_\_ **26** Other ▶ ( \_\_\_\_\_) **27** Other ▶ ( \_\_\_\_\_ **28** Other ▶ ( \_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 29 1 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a

**b** If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . . . . . b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

31

32a

Νo

Νo

Yes

Page 2

Schedule M (Form 990) (2015)

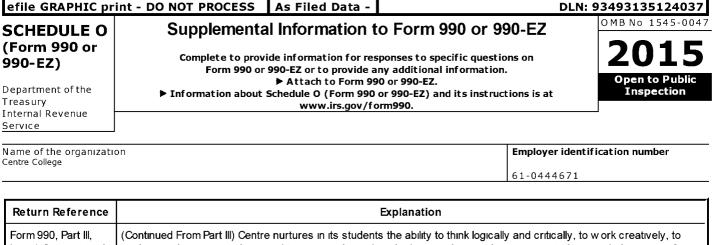
contributions The College is reporting the number of contributions

Schedule M, Part I, Line 9 Number of contributions or items contributed Schedule M. Part I Explanations of

Schedule M (Form 990) (2015)

reporting method for number of Residential - The college is reporting the number of contributions

|Securities - Publicly traded - The college is reporting the number of contributiosn Real estate -



Return Reference

| Continued From Part III) Centre nurtures in its students the ability to think logically and critically, to work creatively, to analyze and compare values, and to write and speak with clarity and grace. It acquaints students with the range of accomplishments of the human mind and spirit in a variety of arts and theoretical disciplines. It enables students to choose and fulfill significant responsibilities in society. In short, Centre's highest priority is to prepare its students for lives of learning, leadership, and service.

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	There shall be an Executive Committee of the Board of Trustees appointed each year by the Chair of the Board, and approved by vote of the Board. The Executive Committee shall have all the powers of the Board of Trustees when the Board is not in session, except the power to elect or remove the President of the College, to amend the Charter and Bylaw's of the College, and to elect new Trustees. The Executive Committee shall consist of nine or more members, including the Chair of the Board, the Vice Chair of the Board and the Secretary of the Board. Any action of the Executive Committee to be effective must be authorized by at least five affirmative votes.

Return Reference	Explanation
	A draft of the form 990 and supplemental schedules is prepared by the Controller with assistance from an
Review of form 990 by	independent accounting firm. The final form 990 and supplemental schedules was provided electronically to
governing body	the Board of Trustees prior to filing with the IRS

Return Reference	Explanation
Line 12c Conflict of interest policy	All trustees and officers are surveyed annually, via an extensive questionnaire, to disclose a variety of relationships with each other or directly with the College. This survey is reviewed and maintained by College counsel, and reviewed by both the VP Finance and the Controller. Those found to have a potential conflict, or the appearance of such, do not participate in final related business discussions or votes.

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Board of Trustees has a Committee on Compensation and Performance Evaluation, composed of eight members of the Board, which reviews the performance of the President on an annual basis. As part of the evaluation of the President, the Committee reviews an expansive report written by the President on the drivers and goals associated with his work, and also reviews objective institutional data. In setting the compensation of the President in the President's current contract, the Committee employs an independent consultant who provides an assessment of compensation from comparable presidents at comparable colleges. For the current contract, the consultant provided recommendations to the Committee, which then made recommendations to the entire Board of Trustees. The Board of Trustees approves the base salary for the President under the current contract, and has established a maximum percentage for any annual incentive compensation. Each year, in connection with the evaluation of the President, the Committee makes recommendations on any incentive compensation for which the President is eligible, subject to the approval of the Board of Trustees. Written documentation of contract discussions, approvals, attendance, and action taken are maintained on campus by a non-

Board member The President is currently completing the second year of a five-year contract

Fundametica.

D-4....

Return Reference	Explanation
	Audited financial statements are available on our wiebsite. Currently the conflict of interest policy and governing documents are not required to be made available by the IRS

Return Reference	Explanation							
Form 990, Part XI, Line 9 Other changes in	ACTUARIAL LIABILITY FOR ANNUITY OBLIGATIONS129893, VALUATION CHANGE IN							
net assets or fund balances	INTEREST RATE SWAPS5976958, Write off of uncollectible pledges10500,							

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

**Related Organizations and Unrelated Partnerships** 

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

2015

DLN: 93493135124037 OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

61-0444671

Department of the Treasury Internal Revenue Service Name of the organization

Centre College

(Form 990)

▶ Attach to Form 990.

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

Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (f) (e) End-of-year assets Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2015

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.		

	1 43		 	(6)							
(a) Name, address, and EIN of related organization	Primary activity  (c)  Legal  domicile  (state or  foreign  country)		(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of e end-of-year assets	d-of-year  allocat		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		ownership
			314)			Yes	No	1	Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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) (c) Primary activity Legal domicile (state or foreign country)		(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total Income	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i) Section (b)(1 contro entit	l3) illed y?
CHARITABLE REMAINDER (1)TRUSTS (6)	CHARITABLE REMAINDER TRUST	кү	NA	Trust				Yes	No

chedule k (Form 990) 2015					Рад	ge <b>3</b>				
Part V Transactions With Related Organizations Complete if the organization answ	ered "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					Yes	No				
<b>1</b> During the tax year, did the orgranization engage in any of the following transactions with one or more i	related organizations li	sted in Parts II-IV?								
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No				
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> b		No				
<b>c</b> Gift, grant, or capital contribution from related organization(s)				<b>1</b> c		No				
<b>d</b> Loans or loan guarantees to or for related organization(s)				<b>1</b> d		No				
e Loans or loan guarantees by related organization(s)				1e		No				
f Dividends from related organization(s)				1f		No				
g Sale of assets to related organization(s)										
<b>h</b> Purchase of assets from related organization(s)				1h		No				
i Exchange of assets with related organization(s)				1i		No				
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No				
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No				
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No				
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
o Sharing of paid employees with related organization(s)				10		No				
p Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No				
$oldsymbol{q}$ Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No				
r Other transfer of cash or property to related organization(s)				1r		No				
$oldsymbol{s}$ O ther transfer of cash or property from related organization(s)				<b>1</b> s		No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet				s						
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	( <b>d)</b> Method of determining a	mount II	nvolved					

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships																		
<b>(a)</b> Name, address, and EIN of entity	( <b>b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		501(c)(3) organizations?		501(c)(3) organizations?		(f) Share of total income	end-of-year	(h) Dispropitionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner <sup>9</sup>		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No						
												1 I						
													<u>.                                    </u>					

