DLN: 93493079003298 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)

Open to Public

Department of the Treasury
Internal Revenue Service

▶ 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="www.irs.gov/form990">www.irs.gov/form990</a>

Inspection

A F	or th	e <b>2016</b> ca	alendar year, or tax year begi	nning 06-01-2016 , and ending 05-	31-20	)17			
		pplicable	C Name of organization				D Employer	ıdentıfı	ication number
		change	St Olaf College				41-06939	79	
	me ch	_	Doing business as				41 00333	, ,	
□ Ini Fin		turn	Doing business as						
□etur	n/terr	minated	Number and street (or P O box if n	nail is not delivered to street address) Room/s	suite		E Telephone	number	
_		d return	1520 St Olaf Avenue	,			(507) 786	5-2222	
⊔ Ар	plicati	on pending	City or town, state or province, cou	ntry, and ZIP or foreign postal code			, ,		
			Northfield, MN 55057				<b>G</b> Gross rece	pts \$ 27	77,631,819
			<b>F</b> Name and address of principal	al officer	Н	a) Is this	a group retu	rn for	· ·
			David Anderson		'''		inates?		□Yes <b>☑</b> No
			1520 St Olaf Avenue Northfield, MN 55057		Н(	b) Are all	subordinates	5	☐ Yes ☑No
I Ta:	x-exer	mpt status		(insert no ) 4947(a)(1) or 527		include	ed? ." attach a lis	- (	
7 147	- la - 14			(Insert no )	<b>⊣</b> на		exemption n		
J 44	ebsii	le:► ww	w stolaf edu			7 Group	exemption ii	umber	
<b>K</b> Forr	n of o	raanization	✓ Corporation ☐ Trust ☐ Assi	Other •	LY	ear of forma	tion 1874 <b>N</b>	1 State	of legal domicile
K TOIT	11 01 0	rganization	El Corporation El Trust El Assi	Sciation - Strief			N	1N	
Pa	rt I	Sum	mary		•		<u> </u>		
			scribe the organization's mission o	r most significant activities					
e	3	See Sched	dule O						
E E	:								
E	-								
Governance				scontinued its operations or disposed of			of its net ass		
	3	Number o	of voting members of the governi	ng body (Part VI, line 1a)	•			3	29
<b>~</b>	l		•	f the governing body (Part VI, line 1b)				4	28
#E	5	Total nun	mber of individuals employed in ca	llendar year 2016 (Part V, line 2a) .			•	5	3,630
Activities &	6	Total nun	nber of volunteers (estimate if ne	cessary)				6	700
ĕ	7a	Total unr	elated business revenue from Par	t VIII, column (C), line 12			1	7a	251,804
	Ь	Net unrel	lated business taxable income fro	•	7b	-145,148			
						Pric	or Year		Current Year
Qı.	8	Contribut	tions and grants (Part VIII, line 1h				26,137,29	4	24,604,390
Ě	9	Program	service revenue (Part VIII, line 29	g)	Ī		163,015,25	7	164,839,142
Rəvenue	10	Investme	ent income (Part VIII, column (A),	lines 3, 4, and 7d )	Ī		8,966,77	3	24,455,019
<u>a</u>	11	Other rev	venue (Part VIII, column (A), lines	5 5, 6d, 8c, 9c, 10c, and 11e)	Ī		410,91	8	290,333
	l			ust equal Part VIII, column (A), line 12)	ı		198,530,24	2	214,188,884
	-		nd similar amounts paid (Part IX,				65,408,64	0	69,300,123
	ı		paid to or for members (Part IX, o	• • •	t		· · ·		0
Ś	l		other compensation, employee be	7	68,333,150				
Expenses	l	-	onal fundraising fees (Part IX, colu	, , , , , , , , , , , , , , , , , , , ,	ŀ		67,617,15 73,24	+	174,857
9	l		raising expenses (Part IX, column (D),		ŀ			1	
五	l		penses (Part IX, column (A), lines	53,519,49	7	53,663,419			
	l		penses Add lines 13–17 (must eq		186,618,53	+	191,471,549		
	l	·	less expenses Subtract line 18 fr		22,717,335				
_ <u></u>	1.5	Kevenue	Tess expenses Subtract line 10 II	om me 12		Reginning (	11,911,70 of Current Yea		End of Year
Net Assets or Fund Balances						beginning (	or current rec	"	Elia or real
ssel ala	20	Total ass	ets (Part X, line 16)				764,920,26	5	805,923,602
Ž₩.	21	Total liab	oilities (Part X, line 26)		Ī		142,167,32	4	128,924,309
ξŝ	22	Net asset	ts or fund balances Subtract line	21 from line 20	Ī		622,752,94	1	676,999,293
Pai		Sign	ature Block		_				· · ·
Undei	r pen	alties of p	erjury, I declare that I have exam	nined this return, including accompanyin					
know any k			ef, it is true, correct, and complete	Declaration of preparer (other than off	ficer) i	is based or	n all informat	on of v	which preparer has
uny K	110111	Luge							
		*****	*				3-03-20		
Sign		Signati	ure of officer			Date	!		
Here	•	Janet H	Hanson Vice President & CFO						
		Type o	r print name and title						
		P	rınt/Type preparer's name	Preparer's signature	Date	Char	ck 🔲 ıf PT	[N	
Paid	t	L					employed		
Pre	pare	וד ⊢	Firm's name				's EIN ►		
Use		1 -	Firm's address 🕨			Phor	ne no		
May t	he IR	S discuss	this return with the preparer sho	wn above? (see instructions)				□ Y	es 🗌 No
For P	aper	work Re	duction Act Notice, see the se	parate instructions.		Cat No 1:	1282Y		Form <b>990</b> (2016)

Form	990 (2016)						Page <b>2</b>
Par	t IIII Stateme	ent of Program Servi	ce Accomplis	hments			
	Check If S	Schedule O contains a resp	onse or note to	any line in this Part III			. $\square$
1	Briefly describe t	he organization's mission					
		ges students to excel in th ourished by Lutheran tradit		amıne faith and values,	and explore meaningful vocation	ın an ınclusıve, g	lobally
2	Did the organizat	tion undertake any signific	ant program ser	vices during the year wh	nich were not listed on		
	the prior Form 99	90 or 990-EZ?				🗌 Yes 💆	☑ No
	If "Yes," describe	these new services on Sc	hedule O				
3	Did the organizat	tion cease conducting, or r	nake significant	changes in how it condu	cts, any program		
		· · · · · · · · · · · · · · · · · · ·				☐ Yes	☑ No
4	Describe the orga Section 501(c)(3	anızatıon's program servic	e accomplishmer ons are required	to report the amount of	argest program services, as meas f grants and allocations to others,		es
4a	(Code	) (Expenses \$	176,394,329	including grants of \$	69,300,123 ) (Revenue \$	164,839,142 )	
	See Addıtıonal Data	1				, , ,	
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	
4c	(Code	) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)	
70		) (Expenses p		merating grants or \$	) (Neveride \$		
	Ohlessin	(Dave 1					
4d	(Expenses \$		ule O) luding grants of	\$	) (Revenue \$	)	
4e	Total program :	service expenses ▶	176,394,3	29			

Section 501(c)(3) organizations.

Yes

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11d

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12a

12b

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14a

14b

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Page 3

No

Nο

Checklist of Required Schedules	
he organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete	_
nedule A 📆	

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . .

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🥞 .

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆 . . . . . . . . . .

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

**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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Yes

No

Yes
Yes
Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

Nο

Νo

Nο

Nο

Nο

Form **990** (2016)

# 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 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

or X as applicable

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Form	990 (2016)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	)a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ъ		
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	1	Yes	
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	2	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	3	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	4a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 20	4ь		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	4c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	4d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			

25a

25b

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28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2016)

No

Nο

Νo

Νo

No

Nο

Nο

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Nο

Νo

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

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

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

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

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

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

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

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

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

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . \*\*

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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)?

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

complete Schedule L, Part I . . . . . . . . . . . . . . . . . 🥞

instructions for applicable filing thresholds, conditions, and exceptions)

Form	990 (2016)			Page <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3,557			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return	2b	Yes	
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6</b> a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
92	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No
10	Section 501(c)(7) organizations. Enter	70		140
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		No
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments $^{7}$ If "No," provide an explanation in Schedule $^{O}$	14b		
				0 (2016)

orm 9	990 (2016)			Page (
Part	<b>VI Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	o" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 29	,		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	-		
b	Enter the number of voting members included in line 1a, above, who are independent  1b 28	,		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
	Did the organization delegate control over management duties customarily performed by or under the direct supervisioi of officers, directors or trustees, or key employees to a management company or other person?	n 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
	Did the organization have members or stockholders?	6	Yes	140
	-	<u> </u>	162	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
	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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	ie Code	∍.)	
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
	conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a ·	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b :	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	$\vdash$		1110
	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		
Sec	tion C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
	CA , MA , MD , MI , MN , NH , SC  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
1	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)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
	State the name, address, and telephone number of the person who possesses the organization's books and records ▶Janet Hanson 1520 St Olaf Avenue Northfield, MN 55057 (507) 786-2222			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
La Complete	e 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

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

(B)

(A)

• 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

(C)

(D)

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

(F)

(E)

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

Page 8

للناما	Section A. Officers, Direct	Tors, Trustees	3, KCY	<u>riiib</u>	10 9 6	<u> </u>	, and	<u> </u>	Test compensati	ed Linployees	(0011	tillueu)		
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than o	one b	ox, t an of tor/t	ot che unles fficer trust	neck mo ess pers er and a tee)	rson a	(D) Reportable compensation from the organization (W- 2/1099-MISC)	tion compensation e from related n (W- organizations (W		eportable Estimate appensation amount of o m related compensa		
		for related organizations below dotted line)		Institutional Truste	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-1415C	relat organiza	:ed		
See	e Addıtıonal Data Table	-	<u> </u>	·T·	igdash	_	<u> </u>	igdash	<u> </u>	<u> </u>	$\dashv$			
			<del>                                     </del>	$\vdash$	$\vdash$	$\vdash$	+-	$\vdash$		+	+			
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			┼	┼	$\vdash$	$\vdash$	_	$\vdash$		<del>                                     </del>	$\dashv$			
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		-	<del> </del>	+-	$\vdash$	+	_	+		+	+			
	Sub-Total						<u> </u>	<u> </u>			士			
	Total from continuation sheets to Pa Total (add lines 1b and 1c)						<b>&gt;</b>	_	3,024,102		$\vdash$		601,893	
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos					o rec	eived more than \$1	100,000				
	<u> </u>					_					_	Yes	No	
3	Did the organization list any <b>former</b> of line 1a <sup>2</sup> If "Yes," complete Schedule 3	,		,	,		, ,		- '	i employee on	3	Yes		
4	For any individual listed on line 1a, is organization and related organization individual									n the	4	1.22		
5	Did any person listed on line 1a receives services rendered to the organization									lividual for				
S	ection B. Independent Contract			Cuare				3011	<del></del>		5		No	
1	Complete this table for your five high from the organization Report comper	nest compensate								' '	mpen	nsation		
	<u> </u>	(A) and business addre		year		11119	WICH	1 VVIC		(B) cription of services		(C Comper		
The F	Boldt Company	dila pubilicas audie	255			_		_	Constructio				,344,027	
	5 N Roemer Road leton, WI 54911													
Bon A	Appetit Management Co			_			_	_	Food Service	te		8	,235,301	
Palo A	Hamilton Avenue Suite 400 Alto, CA 94301								Incurance	- 1		ļ ,	272 242	
200 5	cation & Institutional Insurance Adm S Wacker Dr Ste 100								Insurance A	Advisor		-	,073,242	
	ago, IL 60606 o System Inc								Constructio	on Contrac			809,196	
	O Centerville Road te Bear Lake, MN 55127													
_	er Speciality Flooring Inc								Constructio	n Contrac			730,340	
Linde	O Falling Waters Blvd enhurst, IL 60046													
· -	Total number of independent contractor	rs (including bu)	t not lim	oited <sup>a</sup>	to th	oose	heted	aho'	ve) who received m	nore than \$100.00	00 of			

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 53

Part '		I Statement of	Revenue								rage <b>3</b>
				a respo	onse or note to any	line in tl	hıs Part VII	ι			🗆
				·		(	<b>A)</b> revenue	Rela ex fur	(B) ated or empt action	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaigi	ns	1a				rev	/enue		512-514
nts nts		<b>b</b> Membership dues		1b	<u> </u>						
iral 10 u		c Fundraising events		1c	160,406						
S. C An		d Related organizatio		1d	100,100						
ia Tar		e Government grants (co		1e	3,002,532						
. <u>S</u>		f All other contributions,		l re	3,002,332						
tior sr S		and similar amounts no above		1f	21,441,452						
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included								
Contr and (		ın lınes 1a-1f \$		5,10	00,125						
<u>ة ت</u>	_ <u>_</u> t	Total.Add lines 1a-1	f				,604,390				
ᆲ					Business	+					
Ye l		Other				900099		02,552	2,517,76	+	184,790
oŽ 1.		Sales & Services from A	ux			900099	· · · · · · · · · · · · · · · · · · ·	52,879 83,711	806,26 134,183,71	<u> </u>	26,700,961
Service Revenue	·					300033	154,1	05,711	134,103,71	1	
₹.	d										
Program	e f	All other program se									
Jog					164,8	39,142					
<u> </u>		Total.Add lines 2a-2f				1		1			
		Investment income (ir similar amounts)  .			Interest, and other		15,960,45	0		-239,738	16,200,188
	4	Income from investme	ent of tax-exe	mpt b	ond proceeds <b>&gt;</b>			0			
	5	Royalties			•		l	0			
	-	Cross routs	(ı) Rea	l	(II) Personal	-					
	oa	Gross rents	2	19,505	53,787						
	Ŀ	Less rental expenses	1	.53,218	7,896						
	,	: Rental income or		66,287	45,891	-					
		(loss)		,	,						
	C	Net rental income or			• • • •		112,17	8		45,891	66,287
	7-	Gross amount	(ı) Securit	ties	(II) Other	-					
	<i>7</i> d	from sales of assets other	69,5	61,236	331,966						
		than inventory									
	Ŀ	Less cost or other basis and	61.1	47.001	250 652	1					
		sales expenses		.47,981		]					
		Gain or (loss)  Net gain or (loss)	8,2	13,255	·	1	8,494,569				8,494,569
		Gross income from fi	undraising evi	• ents	<u> </u>	<u> </u>	0,454,50	1			0,454,303
<u>a</u>		(not including \$	160,406								
Other Revenue		contributions reporte See Part IV, line 18		a	   78,210						
Rev	Ŀ	Less direct expenses	s	b	178,641	1					
e	c	: Net income or (loss)	from fundrais	sing ev	ents •		-100,43	1			
ŧ.	9a	Gross income from g See Part IV, line 19		ies							
		See Farc IV, IIIle 19		a	}						
	Ŀ	Less direct expenses	s	ь		1					
	C	: Net income or (loss)	from gaming	activit	ies •		l	0			
	10	Gross sales of invent returns and allowand	ory, less								
				а	1,983,133						
	Ł	Less cost of goods s	sold	b	1,704,547						
	c	Net income or (loss)		invent	ory <b>&gt;</b>		278,58	6			278,586
	4 4	Miscellaneous	Revenue		Business Code	-					
	11	.a									
					•						
	t	)									
					•						
	C										
		All other revenue				_					
		e Total. Add lines 11a			•		ı	0			
	12	<b>Total revenue.</b> See	Instructions	• •	· · · · •		214,188,88	4	137,507,740	251,804	
											Form <b>990</b> (2016)

and 16

4 Benefits paid to or for members

section 4958(c)(3)(B) .

7 Other salaries and wages

9 Other employee benefits .

11 Fees for services (non-employees)

d Lobbying . . . . .

f Investment management fees .

**12** Advertising and promotion .

13 Office expenses .

**20** Interest . . .

23 Insurance . .

a Food Service

c All Other Expenses

e All other expenses

15 Royalties .

**17** Travel .

16 Occupancy .

14 Information technology

10 Payroll taxes . . .

a Management . . .

**b** Legal .

c Accounting

key employees .

468 063

1,912,304

198,205

354,311

155,174

174,857

263,453

255,784

97,493

62,700

203.415

14,796

1,271

229,295

207,886

783

71,743

10,453

4,683,136

Form 990 (2016)

790

83

277

Part IX Statement of Functional Expenses

governments, and foreign individuals. See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401

(k) and 403(b) employer contributions) . . . .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

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

25 Total functional expenses. Add lines 1 through 24e
 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)

federal, state, or local public officials .

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O )

b Tuition paid to other Institut

d Membership dues paid to others

q Other (If line 11q amount exceeds 10% of line 25, column

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)										
Check if Schedule O contains a response or note to any line in this Part IX										
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses						
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,000	7,000								
<b>2</b> Grants and other assistance to domestic individuals See Part IV, line 22	63,548,123	63,548,123								
3 Grants and other assistance to foreign organizations, foreign	5,745,000	5,745,000		_						

0

0

831,402

44,654,502

3,892,202

7,348,242

3,079,305

275,941

2,436,343

332,601

2,199,683

1,949,250

6,071,670

5,934,300

224,746

3,030,016

11,701,316

8.300.874

2,576,332

1,798,660

353,715

97,281

176,394,329

1,753

4,072

1,293,022

3,242,910

263,534

339,767

300,207

43,216

107,572

397,934

722,325

28.312

335.630

352,274

259,882

202,262

16,718

130,258

818,097

666,526

446,119

1,379

271,274

152,890

10,394,084

1,976

2,592,487

49,809,716

4,353,941

8,042,320

3,534,686

319.157

107,572

174,857

397,934

361,190

2,791,097

2,399,017

6,394,252

6,339,977

256,260

3,161,545

12,748,708

668,362

8.954.879

2,578,494

1,870,403

635,442

250,961

191,471,549

6,048

0

3,422,121

0

0

Page **11** 

291,799,776

6.792.854

36.295.529

805.923.602

16,965,377

5,446,640

3,510,633

85,252,405

15.213.398

2.535.856

128,924,309

282,661,370

180,998,707

213.339.216

676,999,293

805.923.602

Form **990** (2016)

Form 990 (2016)

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Liabilities 22

Fund Balances

Assets or 30

Net

Investments—other securities 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

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

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

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

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

Investments—program-related See Part IV, line 11

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

1	Cash–non-interest-bearing	291,057	1	526,541
2	Savings and temporary cash investments	15,738,412	2	17,439,095
3	Pledges and grants receivable, net	8,898,491	3	7,949,405
4	Accounts receivable, net	261,775	4	457,694
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)		_	

	6	trustees, key employees, and highest compensation of Schedule L Loans and other receivables from other disquali section $4958(f)(1)$ ), persons described in section contributing employers and sponsoring organizations.	fied per n 4958i	rsons (as defined under (c)(3)(B), and		5 6	0
Assets	7	voluntary employees' beneficiary organizations Part II of Schedule L Notes and loans receivable, net	(see ins	structions) Complete		7	750,000
SS (	8	Inventories for sale or use		•	593,109	8	729,076
A	9	Prepaid expenses and deferred charges			658,799	9	1,133,717
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	411,953,988			
	ь	Less accumulated depreciation	<b>10</b> b	163,281,052	237,071,439	10c	248,672,936
	11	Investments—publicly traded securities .			172,580,530	11	193,376,979

265,271,871

6.451.808

57,102,974

764,920,265

20,047,300

5,437,487

2,797,048

97,084,701

14.826.475

1.974.313

142,167,324

264.095.592

156,381,653

202.275.696

622,752,941

764.920.265

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Consolidated basis

☐ Separate basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b Yes

Yes

Yes

Yes Form 990 (2016)

3b

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

Consolidated basis Separate basis ☐ Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

2c

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

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

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

Audit Act and OMB Circular A-133? 3a

#### **Additional Data**

**Software ID:** 16000303

**Software Version:** 2016v3.0 **EIN:** 41-0693979

Name: St Olaf College

Form 990 (2016)

Form 990, Part III, Line 4a:

Postsecondary Education - 4 Year, Residential, Liberal Arts Education In the 2016-2017 academic year, St Olaf College enrolled 3,007 full time students and 50 part time students. The graduating class of 2017 had 681 graduates. A student to faculty ratio of 11 92 1 supports St Olaf students with classroom, laboratory, and off-campus experiences. St Olaf College is accredited as a degree-granting institution by the Higher Learning Commission of the North Central Association of Colleges and Secondary Schools. The Colleges academic programs are also accredited by the American Chemical Society, Commission on Collegiate Nursing Education, Council on Social Work Education, National Association of Schools of Dance, National Association of Schools of Theatre, and National Council for Accreditation of Teacher Education.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Key employee Institutional MISC) MISC) organizations related below dotted organizations line) Trustee

Lawrence Stranghoener	1 70	x					0	0	
Chair	0 00								
Kristine Johnson	1 70								
		l x					0	0	
Vice Chair	0 00								
Nancy Anderson	1 70								
Trainey Financial		Ιx					l 0	0	
Regent	0 00								
Kevin Bethke	1 70								
		Ιx					l o	0	
Regent		l	l	i l	l				l

		ΙX	I .	 			1 ()	
Regent	0 00					Ç	Ĭ	
Kevın Bethke	1 70	.,						
Regent		×				0	0	
Karı Bjorhus	1 70							
Regent	0 00	×				0	0	
Jeffrey Bolton	1 70							

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Gregory Buck

Sam Dotzler

William Gafkjen

Peter Gotsch

Regent

Regent

Regent

Kevin Bethke		×					n	0	
Regent	0 00						,	,	
Karı Bjorhus	1 70	×					0	0	
Regent	0 00						3	0	
Jeffrey Bolton	1 70	V					0	0	
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Karı Bjorhus	1 70	×			0	0	
Regent	0 00						
Jeffrey Bolton	1 70	_			0	0	
Regent	0 00	^			١		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per 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 organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensatemplovee Former Individual trustee or director Institutional MISC) organizations MISC) related director below dotted organizations employee line) Trustee 1 70 John Grotting Χ Regent 0.00 1 70 Susan Gunderson Х 0 Regent 0 00 1 70 Eric Hanson Х Regent 0 00 1 70 David Hill Х Regent 0.00 1 70

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Jody Kleppe Horner

Regent

Regent

Regent

Regent

Jay Lund

Regent

Timothy Maudlin

Ward Klein

Ronald Hunter

Mark Jordahl

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per 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 organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensatemplovee Former Individual trustee or director Institutional MISC) organizations MISC) related director. below dotted organizations employee line) Trustee 1 70 Philip Milne ...... Χ Regent 0.00 1 70 Gretchen Morgenson Х 0 Regent 0 00

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421,479

106,698

75,952

30,912

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Callyssa Ozzello

Regent

Regent

Regent

Regent

Regent

Regent

President

VP of Mission

Jo Beld

John Raitt

Jon Salveson

Glenn Taylor

Alphonso Tindall

Theresa Hull Wise

David Anderson

Compensated Employees, and Independent Contractors (E) (D) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and 로 후 | <sub>=</sub> Officer Highest compensat Former organizations | MISC) MISC) organizations employee

(F)

Estimated

from the

related

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0

0

28,095

20,930

34,388

13,948

42,978

39,968

26,376

47,040

1,071

47,863

207,630

125,148

89,101

123,970

152,290

196,079

151,871

187,074

123,397

218,890

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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	below dotted line)	dividual trustee director	nstitutional Trustee	ficei
Enoch Blazis	40 00			
				X
VP Advancement	0.00	l	l	i

Dan Dressen

Assoc Provost

Nathan Engle

Controller

Mark Gelle

Michael Goodson

VP Human Resour

Janet Hanson

Gregory Kneser

VP Student Life

Michael Kyle

VP Admissions

VP Gen Counsel

Provost Dean Co

Marci Sortor

Carl Crosby Lehmann

VP & CFO

CIO

Compensated Employees, and Independent Contractors (C) (E) (D) Reportable Name and Title Average Position (do not check more Reportable than one box, unless hours per compensation compensation person is both an officer from the week (list from related any hours and a director/trustee) organizations organization for related (W- 2/1099-(W- 2/1099organization and 

(F)

Estimated

amount of other

compensation

from the

related

41,477

29,848

24,512

16,244

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	organizations below dotted line)	ndividual trustee ir director	Institutional Trustee	ey employee	lighest compensated mplovee	ormer	MISC)	MISC)	related organizations
Christopher George Dean of Admission	40 00				х		130,795	0	41,47
Bruce King Instit Diversity	40 00				х		136,562	0	39,70

		-		2			
Christopher George	40 00						
				X	130,795	0	
Dean of Admission	0 00						
Bruce King	40 00						
y				Ιx	136,562	l 0	
Instit Diversity	0 00				<b>'</b>		
Rebecca Otten	40 00						
				Ιx	144,463	l o	
Dir of Development	0 00						

		l .		X		130,795	o	
Dean of Admission	0 00					155,755	, and the second se	
Bruce King	40 00			х		136,562	0	
Instit Diversity	0 00			,		130,302	3	
Rebecca Otten	40 00			Х		144,463	0	
Dır of Development	0 00			^		144,403	0	
LaVern Rippley	40 00							

Druce King				x	136,562	0	39,709
Instit Diversity	0 00				130,302		33,733
Rebecca Otten	40 00			х	144,463	0	16,246
Dir of Development	0 00				211,7100	Ĭ	15,2.15
LaVern Rippley	40 00			х	136,574	0	24,336
Professor	0 00			_^_	130,374		24,330

Rebecca Otten				\ \ \			
Dir of Development				Х	144,463	0	
LaVern Rippley	40 00			×	136,574	0	
Professor	0 00			^	150,574		•
Peter Sandhera	40 00						

Χ

Х

127,061

113,657

or Development	0 00						
aVern Rippley	40 00			х	136,574	0	
Professor	0 00				130,37		
Peter Sandberg	40 00						

avern rippiey				l <sub>x</sub>	136,574	ام	l
Professor	0 00				130,371	Ů	
eter Sandberg	40 00						
				×	131,363	0	

Peter Sandberg	40 00						
				Х	131,363	0	ĺ
Asst VP of Facilit	0 00						
Pohorta Lambka	40 00						

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0 00 40 00

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Roberta Lembke

Angela Mathews

Director of IT and Library

Budgeting & Auxiliary Opera

<u>efile GR</u>	APHIC pri	nt - DO NOT PROCESS	As Filed Data -				3493079003298	
	DULE A	Public (	Charity Statu	s and Pub	olic Supp		OMB No 1545-0047	
Form 99 90E <b>Z</b> )	00 or		ganization is a secti 4947(a)(1) nonexe	ection 501(c)(3) organization or a section exempt charitable trust.				
	f the Treasury	► Information abou	t Schedule A (Form	m 990 or Form 990-EZ. m 990 or 990-EZ) and its instructions is at agov/form990.  Inspe				
ame of t	he organiza:	tion				Employer identific	ation number	
						41-0693979		
Part I		for Public Charity Statual private foundation because				See instructions.		
1		onvention of churches, or as	`	•	,	(A)(i).		
 2	A school de	escribed in <b>section 170(b)(</b> :	L)(A)(ii). (Attach Sch	edule E (Form 9	90 or 990-EZ))			
3 □		or a cooperative hospital serv		·	•	iii).		
4 🗆	A medical r	esearch organization operate and state	-			•	nter the hospital's	
5 🗆	(b)(1)(A)	ation operated for the benefit (iv). (Complete Part II )	-	,			ped in <b>section 170</b>	
6 🗆	A federal, s	state, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	\)(v).		
7 🗆	section 17	ation that normally receives a ro(b)(1)(A)(vi). (Complete	Part II )		-	init or from the genera	al public described in	
8 🗆		ty trust described in <b>section</b>						
9 🗆		ural research organization de rant college of agriculture Se					ege or university or a	
<b>o</b> 🗆	from activit	ation that normally receives ties related to its exempt fun- tincome and unrelated busin See <b>section 509(a)(2).</b> (Co	ctions—subject to cert ess taxable income (le	ain exceptions,	and (2) no more	than 331/3% of its su	pport from gross	
ı 🗆	•	ation organized and operated		public safety S	ee section 509	(a)(4).		
2 🗆	more public	ation organized and operated cly supported organizations d a through 12d that describes	escribed in section 5	<b>09(a)(1)</b> or <b>sec</b>	ction 509(a)(2	). See section 509(a	e purposes of one or )(3). Check the box	
a 🗌	<b>Type I.</b> A so	supporting organization opera n(s) the power to regularly a <b>Part IV, Sections A and B.</b>	ated, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by		
b 🗆	<b>Type II.</b> A manageme	supporting organization supent of the supporting organiza	tion vested in the sam					
c 🗆	Type III f	unctionally integrated. A sorganization(s) (see instruction	upporting organization				ted with, its	
d 🗆	functionally	on-functionally integrated integrated integrated The organization (a) You must complete Par	generally must satisf	y a distribution i				
e 🗌	Check this	box if the organization receiv or Type III non-functionally	ed a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally	
<b>f</b> Ente	r the number	of supported organizations						
		ring information about the su		•				
i)Name o	of supported (	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No			
otal	work Paduc	tion Act Notice, see the In	etructions for	Cat No 11285	F .	 Schedule A (Form 9	  00 or 000-E7\ 2016	

Sch	nedule A (Form 990 or 990-EZ) 2016						Page <b>2</b>
P	art II Support Schedule for	Organizations	Described in S	ections 170(b	)(1)(A)(iv) ar	d 170(b)(1)(A	(vi)
	(Complete only if you ch	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or i	f the organization	on failed to quali	
	III. If the organization fa	ails to qualify un	der the tests lis	ted below, plea:	se complete Par	t III.)	
	Section A. Public Support		T	ı		1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	<b>(e)</b> 2016	(f)Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
	Section B. Total Support	1	•		•	•	
	Calendar year	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in) ▶	(4)2012	(6)2013	(6)2014	(4)2013	(0)2010	(1)10tai
7							
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9							
	activities, whether or not the						
10	business is regularly carried on Other income Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI )						
11	<del>_</del> _						
4.5	10 Gross receipts from related activities,	etc (see instruction	l ns)			12	
13	First five years. If the Form 990 is for	=				-	anization,
	check this box and stop here				<u> </u>	<u> ▶ ∟</u>	
	Section C. Computation of Public	• •		(6)			
	Public support percentage for 2016 (III			column (f))		14	
	Public support percentage for 2015 Sc					15	
16	a <b>33 1/3% support test—2016.</b> If the	e organization did r	not check the box	on line 13, and lir	ne 14 is 33 1/3% o	r more, check this	
	and <b>stop here.</b> The organization qual						ightharpoons
b	<b>33 1/3% support test—2015.</b> If th	ie organization did	not check a box of	on line 13 or 16a,	and line 15 is 33 i	/3% or more, chec	k this
	box and <b>stop here.</b> The organization						▶□
<b>17</b> a	a 10%-facts-and-circumstances test						
	is 10% or more, and if the organization in Part VI how the organization meets						
		the racts-and-cire	cumstances test	The organization	quaimes as a pubi	iciy supported	. □
	organization	rt_2015 If the	raanization did ===	t chack a hay as !	mo 12 165 164	or 17a and line	▶⊔
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organization						
	Explain in Part VI how the organization						
	supported organization			-	•	•	▶□
18	B 1 1 6 1 11 7611	on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	.7b, check this box	and see	· <b>—</b>
	instructions		, -	. , ,	,		►□
					Schodu	le Δ (Form 990 o	r 990-F7) 2016

ection A. Public Support								
the organization fails to o	qualify under t	he tests listed b	pelow, please co	mplete Part II.	)			
(Complete only if you ch	ecked the box	on line 10 of Pa	art I or it the or	ganization railed	a to qualify unde	er Part II. If		

	the organization rans to	9		ээлэл, рассо ос		/	
Se	ection A. Public Support						
	Calendar year	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in)	. ,		, ,		, ,	
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2							
_	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						
5	to or expended on its behalf The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	· ' '						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c						
-	from line 6 )						
-	ection B. Total Support						
	Calendar year	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
	Calendar year (or fiscal year beginning in) ▶	<b>(a)</b> 2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6	(a)2012	<b>(b)</b> 2013	(c)2014	<b>(d)</b> 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	<b>(a)</b> 2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	<b>(f)</b> Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	<b>(f)</b> Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 10a b c 111	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c,						
9 10a b c 111	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo						ganization,
9 10a b c 11 12	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th				
9 10a b c 11 12 13 14	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 <u>Se</u>	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here  ection C. Computation of Public Section C. Computation C. Computation C. Computation C. Computation C. Computation C. Computation C.	r the organization <b>Support Perce</b> e 8, column (f) d	's first, second, the intage invided by line 13,	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 S6 15	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here  ection C. Computation of Public S Public support percentage from 2015 S	r the organization <b>Support Perce</b> e 8, column (f) d chedule A, Part I	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9.0a b c 11 12 13 14 S6	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization  Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15  Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here  ection C. Computation of Public S Public support percentage from 2015 S	r the organization  Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15  Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization  Support Perce e 8, column (f) d chedule A, Part I:  ment Income  6 (line 10c, colu	's first, second, the second of the second o	olumn (f))	h tax year as a se	15 16	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015	r the organization  Support Perce e 8, column (f) d chedule A, Part I:  ment Income .6 (line 10c, colui 015 Schedule A,	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18	ganization, ▶□
9 l0a b c 11 12 13 14 Se 15 16 Se 17 18 19a	Calendar year  (or fiscal year beginning in) ►  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization  Support Perce e 8, column (f) d chedule A, Part I: ment Income .6 (line 10c, colui 015 Schedule A, organization did r	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18 133 1/3%, and line	ganization, ▶□

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ightharpoons

ightharpoons

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V ) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <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			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	1 - '		l

	(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or (2)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	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	

	III Section 309(a)(1) or (2)	2	i
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	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	3с	Ī

	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	
С	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	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewer or comparted	$\Box$	

		30	l	
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	3с		
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			

	to the foleigh supported organization was used exclusively for section 170(e)(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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by		
	amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to 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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	Supporting Organizations (continued)			
			Yes	No
11	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		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	stion B. Tuno I Summouting Ouspuingtions			
36	ction 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		1.03	"
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	<b>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		
	skien C. Tune II Cumpostine Opposite tions			
Se	ction 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	163	110
-	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	"		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
<b>C</b> -	skion D. All Tune III Sunnauking Ouseningking			
36	ction 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		1.03	"
	tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of t			
	Form 990 that was most recently filed as of the date of notification, and (iii) 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 ta			
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions)		
а	The organization satisfied the Activities Test. Complete <b>line 2</b> below	•		
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (s	ee instri	ictions)	١
_	The organization supported a governmental entity bescribe in lare variow you supported a government entity (s	oc mon	100113)	,
2	Activities Test Answer (a) and (b) below.		1	
			Yes	No
а	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</b>			
	organizations and explain how these activities directly furthered their exempt purposes, how the organization was			
	responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in <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.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, and the organization have the power to require the organization of the organization have the organization of the	of 3a		
	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 <b>Part VI.</b> the role played by the organization in this regard			
	Supported organizations: It res, describe in Fart #1. the fole played by the organization in this regard	3b	1	1

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015. . . . . .

e Excess from 2016. . . .

Schedule A (F	chedule A (Form 990 or 990-EZ) 2016 Page <b>8</b>					
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test					
990 Sched	990 Schedule A, Supplemental Information					
Retu	Return Reference Explanation					
Part I Addıt	tional Information	St Olaf College in the past has always checked box 7 along with box 2 because the college has always received a substantial part of its support from a governmental unit or from the general public				

Schedule A (Form 990 or 990-F7) 2016

**SCHEDULE C** (Form 990 or 990-

Department of the Treasury

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493079003298

Open to Public Inspection

nterna	il Revenue Service						
• Se • S • S f the • S	ection 501(c)(3) organizations Coection 501(c) (other than section Section 527 organizations Comporganization answered "Yes" Section 501(c)(3) organizations the	on Form 990, Part IV, Line 3, or Form 9 omplete Parts I-A and B Do not complete 1501(c)(3)) organizations Complete Part lete Part I-A only on Form 990, Part IV, Line 4, or Form 9 that have filed Form 5768 (election under 9 that have NOT filed Form 9 that have NOT filed For	e Part I-C is I-A and C below <b>990-EZ, Part VI, I</b> II section 501(h)) Co	Do not con ne <b>47 (Lob</b> lomplete Par	nplete Part I-I bying Activit t II-A Do not	B ties), then complete Part	II-B
		on Form 990, Part IV, Line 5 (Proxy Ta					
	ky Tax) (see separate instruction		x) (see separate i	nsu ucuons	s, or 1 orin 3.	30-LZ, Fait V,	ille Joc
	Section 501(c)(4), (5), or (6) orga						
	ne of the organization				Emplover id	lentification n	umber
	laf College						
					41-0693979		
Part	I-A Complete if the org	anization is exempt under section	on 501(c) or is	a section	527 orga	nization.	
1 2	Provide a description of the org Political expenditures	anization's direct and indirect political car	mpaign activities ii	n Part IV	<b>•</b>	\$	
3	Volunteer hours						
Part	I-B Complete if the org	anization is exempt under section	on 501(c)(3).				
1	Enter the amount of any excise	tax incurred by the organization under s	oction 4955			<u></u>	
	•	, <del>-</del>				<b>→</b>	
2	Enter the amount of any excise	tax incurred by organization managers u	inder section 4955		•	\$	
3	If the organization incurred a s	ection 4955 tax, did it file Form 4720 for	this year?			☐ Yes	. ☑ No
4a	Was a correction made?					☐ Yes	. V No
						⊔ Yes	. Y No
b	If "Yes," describe in Part IV  LI-C Complete if the ord	anization is exempt under section	n F01/a) ava	ont costio	n F01/c\/	21	
	<u> </u>	<del>-</del>					
1		nded by the filing organization for section	•			\$	
2	Enter the amount of the filing of function activities	rganization's funds contributed to other c	organizations for se	ection 527 e	exempt •	\$	
3	Total exempt function expendit	ures Add lines 1 and 2 Enter here and o	n Form 1120-POL,	line 17b	•	\$	
4	Did the filing organization file Fe	orm 1120-POL for this year?				☐ Yes	i □ No
5	organization made payments for political contributions received	d employer identification number (EIN) of for each organization listed, enter the amed at that were promptly and directly deliver ttee (PAC) If additional space is needed,	ount paid from the red to a separate p	e filing organ olitical orga	nization's fun inization, suc	ids. Also enter t	
	(a) Name	(b) Address	(c) EIN	filing or	unt paid from ganization's f none, enter -0-	contribution and profile directly descripted separate organizati	nt of political ons received mptly and elivered to a e political on If none, er -0-
2							
3							
4							
5							
6							
East De	promuonic Doduction Act Nation as	o the metrustions for Form 000 or 000 F7		N 5000/5	C-k-1-7	C (Farm 000 and	200 57) 2016

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

or e	ach "Yes" response on lines 1a thro	ough 1: below, provide in Part IV a detailed description of the lobbying	(a)		1	(b)	
ctiv	•	agn in below, provide in hare iv a detailed description of the lobbying	Yes	No	4	Amour	
1		anization attempt to influence foreign, national, state or local legislation, e public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Yes				
b		e compensation in expenses reported on lines 1c through 1i)?	Yes		$\dashv$		
c	Media advertisements?	e compensation in expenses reported on lines 1c tillough 1//	103	No	$\dashv$		
d	Mailings to members, legislators,	or the public?	Yes	""	+		4
e	Publications, or published or broad	•		No			
f	Grants to other organizations for			No			
g	<del>-</del>	er staffs, government officials, or a legislative body?	Yes				1
h	•	, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		Yes			-	111,8
j	Total Add lines 1c through 1i						112,4
2a	<del>-</del>	ne organization to be not described in section 501(c)(3)?		No			,
b	If "Yes," enter the amount of any				_		
С	If "Yes," enter the amount of any	tax incurred by organization managers under section 4912					
d	If the filing organization incurred	a section 4912 tax, did it file Form 4720 for this year?		No			
Par	t IIII-A Complete if the or	ganization is exempt under section 501(c)(4), section 501(c)	)(5), o	r sec	tion 5	501(c	:)
	(6).						
1	Were substantially all (90% or mo	ore) dues received nondeductible by members?			1	Yes	No
2	, ,	-house lobbying expenditures of \$2,000 or less?			2		
3	•	y over lobbying and political expenditures from the prior year?			3		
_			\/E\		lion E	01/0	1/6
	and if either (a) Board answered "Yes."	ganization is exempt under section 501(c)(4), section 501(c) OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	III-A				
1 2	and if either (a) Bo answered "Yes." Dues, assessments and similar an Section 162(e) nondeductible lobb	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part nounts from members bying and political expenditures (do not include amounts of political					
1	and if either (a) Bo answered "Yes." Dues, assessments and similar an	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part nounts from members bying and political expenditures (do not include amounts of political	III-A				
1 2	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobb expenses for which the section Current year Carryover from last year	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part nounts from members bying and political expenditures (do not include amounts of political	1 2a 2b				
1 2 a b	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobb expenses for which the section Current year Carryover from last year Total	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part nounts from members bying and political expenditures (do not include amounts of political no 527(f) tax was paid).	1 2a 2b 2c				
1 2 a b c	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobb expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in sec	nounts from members bying and political expenditures (do not include amounts of political no 527(f) tax was paid).  ettion 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1 2a 2b				
1 2 a b	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobb expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in section If notices were sent and the amouthe organization agree to carryover	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part nounts from members bying and political expenditures (do not include amounts of political no 527(f) tax was paid).	2a 2b 2c 3				
1 2 a b c 3	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobb expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in sec If notices were sent and the amout the organization agree to carryove expenditure next year?	nounts from members  bying and political expenditures (do not include amounts of political in 527(f) tax was paid).  etion 6033(e)(1)(A) notices of nondeductible section 162(e) dues and on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political	1 2a 2b 2c 3				
1 2 a b c 3 4	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobbe expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in section of the organization agree to carryove expenditure next year?  Taxable amount of lobbying and process."	nounts from members  bying and political expenditures (do not include amounts of political in 527(f) tax was paid).  Section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and on line 2c exceeds the amount on line 3, what portion of the excess does are to the reasonable estimate of nondeductible lobbying and political political expenditures (see instructions)	2a 2b 2c 3				
1 2 a b c 3 4	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobbe expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in section of the organization agree to carryove expenditure next year?  Taxable amount of lobbying and point IV  Supplemental Informed in Section 19 Point IV  Supplemental Informed in Section 19 Point IV	nounts from members  bying and political expenditures (do not include amounts of political in 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political political expenditures (see instructions)  formation  art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),	2a 2b 2c 3 4 5	, line	3, is		
1 2 a b c 3 4	and if either (a) Be answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobe expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in section the organization agree to carryove expenditure next year?  Taxable amount of lobbying and part IV Supplemental Informations), and Part II-B, line 1 Also	nounts from members  bying and political expenditures (do not include amounts of political in 527(f) tax was paid).  Section 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions)  Formation  art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), or complete this part for any additional information	2a 2b 2c 3 4 5	, line	3, is		
1 2 a b c 3 4	and if either (a) Bo answered "Yes."  Dues, assessments and similar an Section 162(e) nondeductible lobbe expenses for which the section Current year Carryover from last year Total  Aggregate amount reported in section of the organization agree to carryove expenditure next year?  Taxable amount of lobbying and part IV  Supplemental Informations), and Part II-B, line 1 Also Return Reference	nounts from members  bying and political expenditures (do not include amounts of political in 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political political expenditures (see instructions)  formation  art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),	2a 2b 2c 3 4 5	A, line	<b>3, is</b>	d 2 (se	ee

amount

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

As Filed Data -

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.

DLN: 93493079003298 OMB No 1545-0047

Schedule D (Form 990) 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

1

6

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** St Olaf College 41-0693979 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☑ Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a 2 Total acreage restricted by conservation easements 2b 15 Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ Yes **☑** No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 36,014 1,792,781 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	3111	Organizations Ma	aintaining Coll	ections o	of Art, His	storica	I Trea	asures, c	or Other	Similar A	ssets (co	ontinued)	
3		g the organization's acq s (check all that apply)	uisition, accessior	, and other	records, ch	neck an	of the	e following	that are a	significant i	use of its	collection	
а	<b>✓</b>	Public exhibition				d [		oan or excl	hange prog	ırams			
b	<b>✓</b>	Scholarly research				e [	□ o	ther					
С		Preservation for future	e generations										
4	Provi Part :	de a description of the XIII	organızatıon's coll	ections and	explain ho	w they	urther	the organ	ization's ex	xempt purpo	ose in		
5		ng the year, did the org ts to be sold to raise fur								nılar	<b></b> Yes	. 🗆 r	lo
Par	t IV	Escrow and Cust Complete if the or X, line 21.			" on Form	990, F	art IV	/, line 9, d	or reporte	ed an amou	unt on Fo	orm 990,	Part
1a		e organization an agent ded on Form 990, Part I		an or other	intermediar	y for co	ntribut	tions or oth	ner assets	not	✓ Yes	. <b>_</b> _ r	lo
b	If "Y€	es," explain the arrange	ement in Part XIII	and comple	ete the follo	wing ta	ole			A	mount		_
c	Begir	nning balance							1c			789,33	1
d	Addıt	tions during the year							1d			663,46	6
е	Dıstrı	ibutions during the year	r						1e			592,92	.9
f	Endır	ng balance							1f			859,86	8
2a		he organization include		,	•	•				,	✓ Yes		lo
b		es," explain the arrange										. 🗸	
Pa	rt V	Endowment Fund	<b>ds.</b> Complete if									/ - \F	
1a	Beainn	ning of year balance .		(a)Curren 447	,701,139	<b>(b)</b> Prior	year ,506,47		years back 435,935,124		,501,188	<b>(e)</b> Four yea 328	,985,882
	-	butions			,518,220		,066,88		10,077,735		,924,729		,953,711
		vestment earnings, gair	ns, and losses		,708,370		,507,72		16,623,144		,433,253		,567,892
			•	5	,608,563		,998,03	39	4,471,680	4,	,013,894	3	,793,720
e	Other	expenditures for facilities ograms	es	8	,120,180	4	,910,83	37	2,205,166	2,	,483,586	1	,887,570
f	Admin	istrative expenses .			489,013		455,62	20	452,684		426,566		325,007
g	End of	year balance		498	,709,974	447	,701,13	39 4	455,506,474	435	,935,124	379	,501,188
2 a		de the estimated perce d designated or quasi-e	-	ent year end 37 500 %	balance (li	ne 1g,	olumr	n (a)) held	as				
a b		anent endowment <b>&gt;</b>	39 200 %	3, 300 ,0									
_		porarily restricted endov		00 %									
С		percentages on lines 2a			1%								
3a		here endowment funds		•		n that a	e held	l and admii	nistered fo	r the			
		nization by	·									Yes	No
	(i) u	nrelated organizations									3a		
		related organizations .									3a(		No
ь 4		es" on 3a(II), are the rel ribe in Part XIII the inte	-						• • •		. 3	D	No
	t VI	Land, Buildings,			ii s endown	ient iun	u 5						
	C VI	Complete if the or			on Form 9	990, P	art IV	, line 11a	. See For	m 990, Pai	rt X, lıne	10.	
	Descr	iption of property	(a) Cost or oth (investme	er basıs	(b)Cost or				cumulated d			<b>d)</b> Book valu	e
1a	Land						1,232,8	890					1,232,890
	Buildin	ngs		1,405,300		29	3,856,			109,042,287			6,219,823
		nold improvements								. ,			•
		ment					4,755,	144		37,076,725		1	7,678,419
				182,500			0,521,			17,162,040			3,541,804
		lines 1a through 1e (Co	ı olumn (d) must ed	·	90, Part X,					<b>&gt;</b>			8,672,936

Part VII		ganızatıon answ	ered 'Yes' on Form 990	), Part IV, line 11b.
	See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	( <b>b)</b> Book value		d of valuation -year market value
	derivatives	value	Cost of end-of	-year market value
(2)Closely-l (3)Other	neld equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum	on (b) must equal Form 990, Part X, col (B) line 12 )	<b>▶</b> 291,799,776		
Part VIII	<b>Investments—Program Related.</b> Complete if the of See Form 990, Part X, line 13.	organization ans	wered 'Yes' on Form 99	90, Part IV, line 11c.
	(a) Description of investment	(b) Book value		d of valuation -year market value
(1)				,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	on (b) must equal Form 990, Part X, col (B) line 13 )  Other Assets. Complete if the organization answered 'Yes	on Form 990 Bar	t IV line 11d See Form (	200 Part V Juna 15
-	(a) Description	on Form 990, Far	tiv, iiie iiu See roiiii s	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, col (B) line 15 )			<b>&gt;</b>
Part X	Other Liabilities. Complete if the organization answer	ered 'Yes' on For	m 990, Part IV, line 1:	
1.	See Form 990, Part X, line 25.  (a) Description of liability	<b>(b)</b> Bo	ok value	
(1) Federal	income taxes			
Asset Retire	ment Obligation		2,535,856	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	on (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>	2,535,856	
	or uncertain tax positions. In Part XIII, provide the text of the			

Part XI

2

а

b

c

d

е

3

4

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

31,859,273

-70,028,312

-1,804,977

1,804,977

69.698.058

2e

3

4c

2e

3

4c

5

Page 4

-38,169,039

215,993,861

-1,804,977

214,188,884

123,578,468

1,804,977

121.773.491

69,698,058

191,471,549

Schedule D (Form 990) 2015

# Other (Describe in Part XIII ) . . Add lines 2a through 2d . . . .

Other (Describe in Part XIII ) . . . . . .

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

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 .

Other (Describe in Part XIII ) . . . . . .

Supplemental Information

Subtract line 2e from line 1 .

Add lines 4a and 4b . . .

Donated services and use of facilities .

Prior year adjustments . . . .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Net unrealized gains (losses) on investments . . .

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

Donated services and use of facilities . Recoveries of prior year grants . . . Amounts included on Form 990, Part VIII, line 12, but not on line 1

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

2c Investment expenses not included on Form 990, Part VIII, line 7b.

2d 4a 4b

2a

2b

2c

2d

4b

Explanation

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

2a

2b

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

schedule D (Form 990) 2015	Page <b>5</b>
Part XIII Supplemental Information (contin	ued)
Return Reference	Explanation

Schedule D (Form 990) 2016

## **Additional Data**

Software ID: 16000303
Software Version: 2016v3.0

**EIN:** 41-0693979

Name: St Olaf College

### Supplemental Information

Return Reference	Explanation
easements	Money received initially was recorded as unrestricted revenue and placed into a board desi gnated quasi-endowment. Expenses that are incurred pertaining to the easements are recorde d as operating expenses. The land related to the easements is included in as Property, Pla

Supplemental Information	
Return Reference	Explanation
Part III, Line 4 Description of organization's collections and how it furthers its purpose	The College's collections are composed primarily of artwork donated and displayed on the p remises of the College The collection furthers the exempt purpose by providing subjects f or students to observe and interpret

S

Supplemental Information	
Return Reference	Explanation
Part IV, Line 1b Why is organization an agent, trustee, custodian or other intermediary for contrib	The College serves as an agent for several student and other organizations

S

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ipplemental Information						
Return Reference	Explanation					
Part IV, Line 2b Explanation of escrow account liability	Included in Line 21 of Part X are two separate types of liabilities. First are "Annuities Payable" \$13,336,999 resulting from Charitable Annuities and Trusts where the College serv es as the trustee of the assets and records a liability for the present value of future ca sh flows estimated to be paid out to the income beneficiaries. In addition, the College al so records "Funds Held in Trust for Others" \$1,876,399 that primarily result from trusts u nder control of the College that will benefit other organizations at the termination of the Trust.					

Supplemental Information	
Return Reference	Explanation
Part V, Line 4 Intended uses of the endowment fund	The intended uses of the Endowment Fund include scholarships, endowed faculty chairs, and general support to subsidize various operations

upple	emental Information	
	Return Reference	Explanation
art X	FIN48 Footnote	The College follows the accounting standards for contingencies in evaluating uncertain tax positions. This guidance prescribes recognition threshold principles for the financial st atement recognition of tax positions taken or expected to be taken on a tax return that ar e not certain to be realized. No liability has been recognized by the College for uncertain tax positions as of May 31, 2017.

Su

Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d Other expenses and losses per audited F/S	Cost of Goods Sold on Inventory \$1704547 Loss from Fundraising Events \$100430

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Scholarships and Grants \$69300124 Endowment Fund Investment Mngt Fees \$397934

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493079003298 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the organization **Employer identification number** St Olaf College 41-0693979 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way 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? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2016)

chedule E (Form 990 or 990EZ) (2016)	Page <b>2</b>
Part II Supplemental Information. Provide the exp any other additional information (see instructions)	lanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide
Return Reference	Explanation
Schedule E, Line 6 - Explanation of Aid or Assistance from Governmental Agency	St Olaf College participates in the Federal Student Financial Aid Program administered through the U.S. Department of Education. St. Olaf students receive funding from campus based programs (Perkins, SEOG and Federal Work Study) as well as Federal Pell Grants and Federal Student Loans. In addition, St. Olaf students receive funding via the Minnesota State Grant, Work Study and SELF loan programs administered through the Minnesota Office of Higher Education. The College also received other grants through federal and state programs, such as the Department of Education and National Science Foundation.
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized	The College does not engage in signficant advertising activities via newspapers or broadcast media. However, when the College posts job openings in newspapers the applicable discrimination policies are included.
Schedule E, Line 4 - Explanation of Records and Materials Not Maintained	
Schedule E, Line 5 - Explanation of Organization Discrimination by Race	
	Schedule E (Form 990 or 990-EZ) (2016)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493079003298 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number St Olaf College 41-0693979 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed ) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 101,503,000 3a Sub-total 7,000 **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 101,510,000

Page **3** 

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.

Taic III can be	auplicated if addition	onar space is i	iccaca.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							
1		l l		Í		1	

Sche	dule F (Form 990) 2016		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>☑</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 Pry	☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	<b>✓</b> Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	<b>☑</b> No

hedule F (Form 990) 2016 Page <b>5</b>				
Part V  Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method) amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).				
Return Reference	Explanation			
Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US	The College offers grants in the form of need or merit based scholarships to students who are studying outside of the United States. Before the grant or award is available and disbursed, the International and Off-Campus Studies Office must approve any program that a student is participating in Once the grant has been disbursed to the student's account to cover fultion for the study abroad progam, the International and Off-Campus Studies Office maintains contact with the host institutions to monitor the student's attendance and notifies the Financial Aid Office and Student Accounts Office if a student withdraws from an off-campus program			

## **Additional Data**

(a) Pegion

Europe

East Asia & the Pacific

**Software ID:** 16000303 **Software Version:** 2016v3.0

EIN: 41-0693979 Name: St Olaf College

(b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

Intl Studies

10,000,000

1,379,000

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

(a) Negion	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
C America & Caribbean	0	0	Investments		83,387,000

0 Investments

0 Program Service

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 2,448,000 Europe 0 Program Service Intl Studies Middle East & N. Africa 0 Program Service Intl Studies 234,000 Russia & Neighboring States 0 Program Service Intl Studies 127,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Intl Studies 382.000 South America 0 |Program Service South Asia 0 Program Service Intl Studies 28,000 Sub-Saharan Africa 0 Program Service Intl Studies 151,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) C. America & Carribean Intl Studies 363.000 0 Program Service South America 0 Program Service Music Tours 104,000 Fast Asia & the Pacific 0 Program Service Alumni Study Travel 610,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Russia &the Neighboring Alumnı Study Tour 393.000 0 Program Services States Sub-Saharan Africa 0 Program Service Alumni Study Travel 258.000 Central America & the 0 |Program Service Alumnı Study Travel 702.000 Caribbea

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Alumni Study Travel 926.000 Europe 0 Program Services Europe Student Recultment 11,000 0 | Program services South Asia 0 Program Services Student Recruitment 1,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program reaion services, grants to service(s) in region region recipients located in the region) Fast Asia & the Pacific Student Recruitment 6.000 0 Program Services

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Merit-Based Aid 13 155,000 Credit on Acct IC America & Carrib Merit-Based Aid 29 198,000 Credit on Acct East Asia & the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) Merit-Based Aid 114 1,312,000 Credit on Acct Europe Merit-Based Aid 83,000 Credit on Acct Russia & Neighbors

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Merit-Based Aid 38 184,000 Credit on Acct South America Merit-Based Aid 56,000 Credit on Acct South Asia

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Merit-Based Aid 13 148,000 Credit on Acct Sub-Saharan Africa Need-Based Aid 92,000 Credit on Acct C America & Carrib

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) Need-Based Aid 668,000 Credit on Acct East Asia & the Pacific Need-Based Aid 314 2,225,000 Credit on Acct |Europe

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Need-Based Aid 150,000 Credit on Acct Russia & Neighbors Need-Based Aid 70,000 Credit on Acct South America

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Need-Based Aid 201,000 Credit on Acct South Asia Need-Based Aid 68,000 Credit on Acct Sub-Saharan Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Tuition Waivers 16,000 Credit on Acct IC America & Carrib 31,000 Credit on Acct Tuition Waivers East Asia & the Pacf

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) **Tuition Waivers** 42,000 Credit on Acct South America **Tuition Waviers** 46,000 Credit on Acct

Europe

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493079003298

OMB No 1545-0047

**SCHEDULE G Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

►Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **2016** 

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

**Employer identification number** 

St Olar College						41-0693979	
_	•		-	on answered "Yes" on I	Form 990, F	Part IV, line 1	17.
	ers are not required			•			
1 Indicate whether the orga	anization raised funds	through a	any of th			•	
a ✓ Mail solicitations				e ✓ Solicitation of no	on-governme	nt grants	
<b>b</b> Internet and email so	licitations			f Solicitation of go	overnment gr	ants	
c Phone solicitations				g 🗹 Special fundraisi	ing events		
d 🗹 In-person solicitations	5						
2a Did the organization have or key employees listed in						<u> </u>	es 🗆 No
b If "Yes," list the ten higher to be compensated at least	est paid individuals or st \$5,000 by the orga	entities ( nization	fundraise	ers) pursuant to agreemen	its under whic	ch the fundrais	er is
(i) Name and address of ındıvıdual or entity (fundraıser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	or reta fundraise	int paid to ined by) er listed in (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Norris Peterson 1638 Mississippi River BL	Consulting & Working with		No			84,575	
St Paul, MN 55116	Consulting						
Give Campus Inc 903 G ST	Consuming		No			47,125	
Washington DC, DC 20003	Consulting						
West Wind Consulting LLC 120 Brindley ST Ste 7	Consuming		No			24,000	
Ithica, NY 14850	Consulting &						
Plus Delta Part Inc 6965 El Camino Real Suite	Training &		No			8,877	
Carisbad, CA 92009	Consulting						
Blackbaud Inc 2000 daniel Island DR			No			8,280	
Charleston, SC 29492							
			No				
			No				
Total			<b>•</b>			172,857	

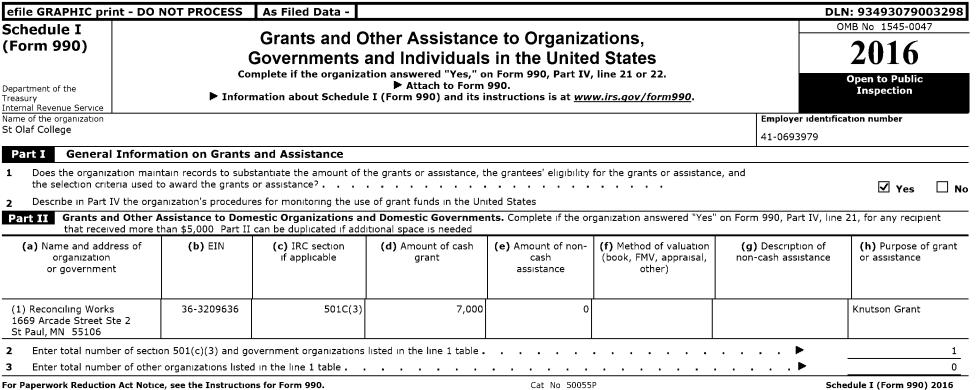
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, WV, WI, WY, DC

Cat No 50083H

Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising experiences.	event contributions and			
Revenue	gross receipts greater than \$.	(a)Event #1  Gala  (event type)	(b) Event #2  (event type)	(c)Other events (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	238,616			238,616
	2 Less Contributions	160,406			160,406
	line 2)	78,210			78,210
se.	5 Noncash prizes	503			503
Expenses	7 Food and beverages	69,665			69,665
ਹ ਹ	8 Entertainment	91,277			91,277
Direct	9 Other direct expenses	17,196			17,196
	10 Direct expense summary Add lines 4 t	through 9 in column (d)		•	178,641
	11 Net income summary Subtract line 10	from line 3, column (d)		•	-100,431
Pai	on Form 990-EZ, line 6a.	anızatıon answered "Ye	es" on Form 990, Part I	IV, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
æ	1 Gross revenue				
lses	2 Cash prizes				
Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	│	│	│	
	7 Direct expense summary Add lines 2 t	_			
	8 Net gaming income summary Subtrac				
9 a b	Enter the state(s) in which the organization licensed to conduct go	aming activities in each of	these states?		☐ Yes ☐ No
10a b	Were any of the organization's gaming lid	· ·	_	·	Yes No

Sche	dule G (Form 990 or 990-EZ) 2016					F	Page
11	Does the organization conduct gaming	j activities with nonmember:	s?		☐Yes	□No	
12	Is the organization a grantor, benefici- formed to administer charitable gamin		member of a partnership or other entity		□Yes	□No	
13	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			(
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	ecords			
	Name •						
	Address >						
15a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			anization 🕨 \$ and th	ne			
	amount of gaming revenue retained b	y the third party $ hildsymbol{\blacktriangleright}$ \$					
С	If "Yes," enter name and address of the	ne third party					
	Name ►						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilde{ ho}$ \$						
	Description of services provided						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	,	te law to make charitable di	stributions from the gaming proceeds to		_	_	
	retain the state gaming license?				☐ Yes	∐No	
b	·		uted to other exempt organizations or spent				
Da	in the organization's own exempt activity  Supplemental Information		*:ions required by Part I, line 2b, column	c (m) s	and (v): a	nd Dart	
rai		l5c, 16, and 17b, as app	licable. Also complete this part to provide				
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-F71	201



Schedule I (Form 990) 2016						Page <b>2</b>
Part III Grants and Other Ass Part III can be duplicat				nization answered "Yes"	" on Form 990, Part IV, line 22	
(a) Type of grant or assista		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Tuition Waiver		60	1,539,426			
(2) Merit Based Scholarships		2157	26,513,740	<u> </u>		
(3) Need Based Financial Aid		3303	35,015,974	<u> </u>		
(4) Scholarships for NonTuition & l	. Fees	67	101,020	1		
(5) Independent Educational Activity 5			97,375			
(6) Center for Vocation & Career Assist 147		147	276,838			<del></del>
(7) Title IX W/O Legal /Complianc	(7) Title IX W/O Legal /Compliance 3 3,750				<u>'</u>	
(7)	7)					
Part IV Supplemental I	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.					
Return Reference	Explanation					
Grants are Used	Grant funds disbursed by the College are predominantly available as merit or need based scholarships. These scholarships are disbursed by the Financial Aid office and are credited directly to the student's account to pay for tuition, room and board. They are then monitored by the Financial Aid Office and the Student Accounts Office, both of whom are notified if the student's enrollment status changes during the semester. These offices monitor whether the grantee is taking the necessary classes and is therefore utilizing the grant as it was intended. If a student's enrollment changes, award adjustments are made. Other grant funds are disbursed by the College through Accounts Payable. Qualification and use of these payments are monitored by the respective departments responsible for the disbursement.					

## **Additional Data**

Tuition Waiver

Merit Based Scholarships

Need Based Financial Aid

Scholarships for NonTuition & Fees

Independent Educational Activity

**Software ID:** 16000303 Software Version: 2016v3.0 **EIN:** 41-0693979

1,539,426

26,513,740

35,015,974

101,020

97,375

Name: St Olaf College

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)Amount of cash grant	(d)Amount non-cash assis

60

2157

3303

67

58

•	(d)Amount of
	non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(e) Method of valuation (book, FMV, appraisal, other)

(f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) Center for Vocation & Career Assist 147 276.838

3.750

Title IX W/O Legal /Compliance

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493079003298

**Employer identification number** 

## OMB No 1545-0047

## 2015

Open to Public Inspection

## 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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

St Olaf College 41-0693979 Part I **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4c** Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а Νo 5h Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? Nο

Schedule 3 (Form 990) 2015							Page Z
Part III Officers, Directors	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.						
For each individual whose compensal instructions, on row (ii) Do not list al <b>Note.</b> The sum of columns (B)(i)-(iii)	ny individuals that are	not listed on Form 990	, Part VII	• , ,	-	·	
(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

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

Dage 3

Schedule J (Form 990) 2015

Schedule 1 (Form 990) 2015

**Software ID:** 16000303 **Software Version:** 2016v3.0

> **EIN:** 41-0693979 Name: St Olaf College

(A) Name and Title		• •	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1Angela Mathews Budgeting & Auxiliary Opera	(I) (II)	109,417		4,240	10,280	5,964 	129,901	
1Bruce KingInstit Diversity	(I) (II)	135,321		1,241	12,014	27,695 	176,271	
<b>2</b> Christopher George Dean of Admission	(I) (II)	129,157		1,638	13,785	27,692	172,272	
<b>3</b> David AndersonPresident	(I) (II)	415,935		5,544	38,323	37,629	497,431	
<b>4</b> Enoch Blazis VP Advancement	(I) (II)	205,980		1,650	19,064	9,031	235,725	
<b>5</b> Gregory Kneser VP Student Life	(I) (II)	151,631		240	15,268	11,108	178,247	
<b>6</b> Janet HansonVP & CFO	(I) (II)	192,917		3,162	19,437	20,531	236,047	
<b>7</b> LaVern RıppleyProfessor	(I) (II)	134,374		2,200	13,700	10,636	160,910	
<b>8</b> Marcı Sortor Provost Dean Co	(I) (II)	216,455		2,435	19,920	27,943	266,753	
<b>9</b> Michael Goodson VP Human Resour	(I) (II)	149,825		2,465	15,611	27,367	195,268	
10Michael KyleVP Admissions	(I) (II)	185,389		1,685	18,837	28,203	234,114	
11Peter Sandberg Asst VP of Facilit	(I) (II)	126,915		4,448	13,107	16,741	161,211	
12Rebecca Otten Dır of Development	(I) (II)	143,127		1,336	13,785	2,461	160,709	
<b>13</b> Roberta Lembke Director of IT and Library	(I) (II)	125,969		1,092	12,985	11,527	151,573	

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	dule K n 990)			Information o					scriptions.				No 154		
			explanations	s, and any additional i Attach to Form 996	informatio	n in Par	t VI.		,						
	ent of the Treasury Revenue Service	▶Informatio	n about Schedule I	K (Form 990) and its		ıs is at <u>v</u>	ww.	.irs.gov/for	<u>m990</u> .				en to P nspecti		
Name of St Olaf	the organization College									Emplo	yer ideni	tificatio	n numbe	•	
										41-06	93979				
Part				1.05.			I	(() 5		1, 15				(1)	
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	1	(f) Descripti	on of purpose	(g) De	efeased		On alf of		Pool ncing
										<u> </u>			uer		
A MN	NHEFA - Series 6-0	41-0988525	60416HKK9	03-29-2007	46.3	207 404	Const	truction & Re	fundina	Yes	No	Yes	No X	Yes	No X
	WILLIA Selles 0 0	41 0300323	0041011KK9	03 23 2007	+0,2	207,707	COMS	ici decioni & ice	g	^			^		
B MN	IHEFA - Series 7-F	41-0988525	60416HTL8	08-31-2010	34,0	045,664	Refi v	variable rate	debt		X		X		X
C MH	HEFA - Series 8-G	41-0988525	60416HL51	07-01-2015	61,1	107,599	Cons	truction and	advance Refun	X			Х		Х
<b>D</b> MH	HEFA - Series 8 - N	41-0988525	60416HZ80	09-15-2016	25,6	528,247	Refur	nd balance se	eries 7 F	X			Х		X
Part 1	Proceeds						l .								
						Α			3					D	
	mount of bonds retired mount of bonds legally defea					45,405	5,000		30,325,000		2,145,	.000			
	otal proceeds of issue					46.20	7 40 4		24.045.664		61 107	F00		25.6	20.247
	Fross proceeds in reserve fun					46,207	7,404		34,045,664 595,191		61,107,	.599		25,6	15
	apitalized interest from proc					2,235	5 562		393,191						
	roceeds in refunding escrows					2,23	3,302								
	ssuance costs from proceeds					310	0,982		293,295		441.	170			265,273
	redit enhancement from pro						,,,,,				,				
	Vorking capital expenditures														
<b>10</b>	apıtal expenditures from pro	ceeds				28,341	1,082				25,000,	000			2,468
11 0	other spent proceeds					12,119	9,736		31,350,000						
<b>12</b> C	other unspent proceeds														
13 Y	ear of substantial completion	1			2	800				20	17		2	2016	
					Yes	No		Yes	No	Yes	No		Yes		No
	Vere the bonds issued as par					X		X		Х					X
15 <sup>V</sup>	Vere the bonds issued as par	t of an advance refundi	ing issue?		Х				Х	Х			Х		
16 H	las the final allocation of pro-	ceeds been made? .	<u>.</u>		Х			X		Х			Χ		
	oes the organization mainta roceeds?				Х			×		Х			X		
Part I	Private Business l	Use					<u>'</u>		<u>'</u>						
						Α			3	(				D	
1 %	Vas the organization a partne nanced by tax-exempt bond	er in a partnership, or a	member of an LLC,	which owned property	Yes	No X		Yes	No X	Yes	No X		Yes		No X
<b>2</b> A	re there any lease arrangem roperty?	ents that may result in	private business use			X			×		X				X
	perwork Reduction Act No				C:	at No. 50	1 1193F				S	hedul	e K (For	m 990	) 2016

b

d

6

Part IV

c

Х

Χ

No

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Χ

Page 2

D

Yes

Χ

Yes

Χ

Schedule K (Form 990) 2016

D

В

No

Х

Χ

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Χ

Yes

Χ

Yes

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No

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Χ

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В

Yes

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Yes

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Yes

Х

C

No

X

Χ

Х

Х

Yes

Х

No

Χ

Χ

Х

Χ

C

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government . . . . . Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply? . . . .

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . . . .

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . . . Is the bond issue a variable rate issue? . . . .

Was the hedge superintegrated? . . . . . . Was the hedge terminated? . . . . . . . .

Arbitrage

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Are there any management or service contracts that may result in private business use of
bond-financed property?
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside
counsel to review any management or service contracts relating to the financed property?
Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Were gross proceeds invested in a quaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the

voluntary closing agreement program if self-remediation is not available under

original GIC term of 1 yearThis bond has been retired in 2017

requirements of section 148? . . .

applicable regulations?

Return Reference

Schedule K (Form 990) 2016

(GIC)?

period?

Part V

Part VI

Part VI

Part IV	Arbitrage (Continued)		
			4
		Yes	No

Α

No

Yes

Х

Χ

Χ

Χ

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

**Explanation** Part 1 Line C Column f refund of prior issue bond with issue date of 3/29/2007Part 3 Line 7 These are qualified 501 (c)3 bond issuesPart IV Line 2c Column B Arbitrage was done by Springsted and a opinion given by Faegre Baker &

Daniels done on October 31, 2014Part IV Line 5b & 5c - There are two GIC providers to disclose for the Series 6-0 bond issuance. The information is as follows MBIA, Inc. with an original GIC term of 6 yearsDEPFA Bank with an

See Part VI

Χ

Yes

No

Χ

Χ

В

No

Yes

Χ

Yes

Χ

Yes

Χ

No

C

No

Page 3

No

Χ

No

D

D

Yes

Χ

Yes

Х

efile GRAPHI	C print - DC	NOT	PROCES	S As F	iled Data -				DLN: 9349307900329					03298
Schedule L (Form 990 or 990	-EZ)	"Υ		► Compl rm 990, Pa	lete if the orga art IV, lines 2!	anization and 5a, 25b, 26, 3	terested Persons nization answered a, 25b, 26, 27, 28a, 28b, or 28c, l, line 38a or 40b.							
					990-EZ, Part to Form 990							ZU		0
Department of the Trea	asurv	Infor	mation abo		ule L (Form 99 <u>www.irs.gov</u>	0 or 990-EZ		ructio	ns is	at	C	pen i Insp		
Name of the org St Olaf College	anızatıon							Er	nplo	yer ide	entifica	tion n	umb	er
										3979				
					(c)(3), section ! Form 990, Part !						ne 40h			
	) Name of dis				Relationship be			$\overline{}$		escript		(d	) Cor	rected?
					C	organization			tr	ansactı	on	n Yes		No
								+						
4958 3 Enter the ar  Part II Loa  Cor	mount of tax,  ans to and,  nplete if the o  orted an amou	or From From Internal	on line 2, a  om Interestion answer  Form 990, Form 990, Purpose	bove, reim  ested Pered "Yes" o  Part X, line  (d) Loan	n Form 990-EZ,	rganization .		90, Pa	rt IV,	line 26	\$ \$ b, or if the state of the sta	(	anıza i)Writ ireem	ten
			-	То	From			Yes	No	Yes	No	Yes		No
								-						
Total						<u> </u>		+						
	nts or Assi	stance	e Benefit	ing Inter	ested Perso									
	•				es" on Form 9									
(a) Name of Inter	ested person		Relationship ested perso organizati	n and the	(c) Amount	of assistance	(d) Type	of assi	stand	æ	(e) Pui	pose c	f ass	istance
(1) 4 Individuals		Discou	inted Tuition			117,056	Discounted T	uition		aı	de ın E	ducatio	n	
For Paperwork Red						-	at No. 500564							E7\ 2016

(a) Name of Interested person	(b) Relationship	(c) Amount of	(d) Description of transaction	(e) Sharing	
	between interested	transaction		of	
	person and the			organization's	
	organization			revenues?	
				Yes No	

Nο No No

Schedule I (Form 990 or 990-FZ) 2016

(1) Substantial Contributor	Regent	1,000,000	Gıft to College	
(2) Substantial Contributor	Regent	900,000	Gıft to College	
(3) Substantial Contributor	Regent	1,000,000	Gıft to College	
(A) G 1 + + + + G + + + +		E00.000	0.5 1 0 11	

Former Regent 500,000 Gift to College

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

Nο (4) Substantial Contributor

**Explanation** 

Part V **Supplemental Information** 

Return Reference

DLN: 93493079003298 efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection **Employer identification number** Name of the organization St Olaf College 41-0693979 Part I **Types of Property** (a) (c) (d) (b) Check If Noncash contribution Method of determining Number of contributions or applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . 31,199 Replmnt cost Χ 2 Art—Historical treasures Art-Fractional interests Books and publications Χ 68,106 Replmnt cost Clothing and household Cars and other vehicles Boats and planes . . Intellectual property . . Securities—Publicly traded . 104 4,937,378 Avg Market Val 9 Χ Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . 15 Real estate—Residential . Χ 58,000 Appraised Valu **16** Real estate—Commercial 17 Real estate—Other . . Χ 90 Replmnt cost 18 Collectibles . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . Historical artifacts . 22 23 Scientific specimens . 24 Archeological artifacts . Other ▶ ( Х 5,017 Replmnt cost 25 Equipment ) Χ 26 Other ▶ ( 210 Replmnt cost Event Passes Other ▶ Χ 25 Replmnt cost Gift Certificat Other ▶ ( Χ 100 Replmnt cost Recordings,CDs, ) Number of Forms 8283 received by the organization during the tax year for contributions 29 116 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 Nο **b** If "Yes," describe the arrangement in Part II 31 31 Yes 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 32a contributions? . . . . . . . Yes **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, describe in Part II For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016) Cat No 51227J

Schedule M (Form 990) (2016)	Page <b>2</b>
	cion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
Parties	In tax year 2016, the College used several brokers to sell publicly traded securities that were transferred to the College In addition, in several tax years, the College has used an auction house to sell collectible items that were donated to the College several years ago
	Schedule M (Form 990) (2016)

efile GRAPH	IC print	t - DO NOT PROCESS	As Filed Data -		DLN	: 93493079003298	
(Form 990 or EZ) Department of the Tr	partment of the Treasury  Tinformation about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.						
Name of the org. St Olaf College		pplemental Information	n		<b>Employer iden</b> 41-0693979	tification number	
Return Reference				Explanation			
Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	Busines	ss Relationship High Five Kir	ng and Regent Gunde	erson			

Return Reference	Explanation
Form 990, Part VI, Line 4 Description of Significant Changes to Organizational Documents	In August 2016, the St Olaf Board of Regents approved a number of changes to the Articles of Incorporation and Bylaws Significant changes to the Articles of Incorporation include d the following 1)Replacing the ELCA Churchwide Assembly with the ELCA Church Council in the listing of members,2)Eliminating the detailed description of the composition of the Board Significant changes to the Articles of Incorporation included the following 1) Clarifying terms of office for elected Regents,2) Clarifying provisions for removing appointed Regents, 3) Adding a specific provision for confidentiality,4) Modifying provisions for officers of the Board, 5) Specifying that committees may include committee members who are not Regents, 6) Clarifying the voting requirements for members of the Executive Committee

Regents of the Corporation

Return Reference	Explanation
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	The members of St Olaf Corporation shall be those individuals holding the following Posit ions and offices (a) The members of the Evangelical Lutheran Church in America Church Council, or succeeding body of the Evangelical Lutheran Church in America or its successor, (the "Church Council"), as such members are appointed in accordance with the discipline and usage of the Evangelical Lutheran Church in America, or its successor. Such members of the Church Council shall remain members of the Corporation until they no longer serve as members of the Church Council (b) The officers of the Evangelical Lutheran Church in America, or its successor (c) The President of the Corporation and(d) The members of the Board of

Return Reference	Explanation
Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	The management and direction of the business and affairs of St. Olaf Corporation shall be vested in a Board of Regents. To the extent consistent with the Articles of Incorporation and permissible under Minnesota Statutes Chapter 317A, the Bylaws of the Corporation shall specify the number, term of office, method of selection, removal, powers and duties of the Board of Regents of the Corporation, the time and place of their meetings, voting rights and such other regulations relating to the Board of Regents as may be desired

Shareholders

Return Reference	Explanation
Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or	Certain decisions made by the Board of Regents, such as election of Regents and changes to by-laws, must be approved by all members of the Corporation

Return Explanation
Reference

Form 990,
Part VI, Line
11b Form
990 Review
Process

To review the 990, the Board of Regents delegated the detail review process to the Audit C
ommittee On March 7, 2018 the Committee reviewed and approved the Form in its entirety I
n addition, the form (not including Schedule B) was circulated to all members of the Board
of Regents prior to the filing date

Return Reference						
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	On an annual basis, a Conflict of Interest Questionnaire is circulated to the Board of Reg ents and Officers. The Questionnaire requires the individual to disclose any relationships or transactions that would result or appear to result in a Conflict of Interest. The Coll ege collects and reviews the forms and discusses whether the appropriate actions have been taken in voting, discussions, and other meetings to properly recognize the conflict. Rest rictions, such as being unable to participate in voting or discussions, may be imposed on any individual who has a conflict. These conflicts are additionally reviewed by the Conflict of Interest Committee, as well as the Board of Regents Audit Committee, on an annual basis in order to ensure the appropriate measures are being followed. In general, any identified conflict of interest is monitored by the Vice President and Chief Financial Officer(for financial statement reporting purposes) and the President's Office (to ensure compliance, proper considerations are made at meetings)					

Return Reference	Explanation
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	Comparative data for the President and his direct reports, which includes all Vice Preside nts, is gathered from CUPA survey data from the 26 members of the Associated Colleges of the Midwest (ACM) and the Great Lakes Colleges Association (GLCA) and for the 24 St. Olaf "Peer Group" liberal arts colleges. The executive committee of the Board of Regents reviews this data and sets the salary for the President. The executive committee considers the recommendation the President makes regarding the other key officers and when the recommendations are approved, sets their salary. The Chair of the Board reviews the decision of the executive committee with the full Board of Regents during an executive session of the Board. The Chair of the Board sends a letter to the VP of Human Resources indicating the new salary for the President and documentation of the process followed to establish it. That let ter is filed with Human Resources. The President reports the new salary for his direct reports, including all Vice Presidents, to Human Resources.

Return Reference	Explanation
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	Comparative data for all Vice Presidents is gathered from CUPA survey data from the 26 mem bers of the Associated Colleges of the Midwest (ACM) and the Great Lakes Colleges Associat ion (GLCA) and for the 24 St. Olaf "Peer Group" liberal arts colleges. The executive committee of the Board of Regents reviews this data and sets the salary for the President. The executive committee considers the recommendation the President makes regarding the other k ey officers and when the recommendations are approved, sets their salary. The Chair of the Board reviews the decision of the executive committee with the full Board of Regents during an executive session of the Board. The Chair of the Board sends a letter to the VP of H uman Resources indicating the new salary for the President and documentation of the process followed to establish it. That letter is filed with Human Resources. The President reports the new salary for his direct reports, including all Vice Presidents, to Human Resource.

D - 4. . . . .

Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The College's governing documents and conflict of interest policy are available upon reque st of the CFO's Office. The annual form 990, 990T, and financial statements are available on the College's website as well as upon the request of the CFO's Office.

Funlametics.

990 Schedule O, Supplemental Information Return Explanation Reference Other = -\$0 Changes In Net Assets Or Fund

Balances -Other Decreases

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Changes In Net Assets Or Fund Balances - Other Decreases	Adj to prior service costs and Retiree Heath Care Liability = -\$586670

990 Schedule O, Supplemental Information

Return Explanation

Reference	·
Other Changes In Net Assets Or Fund Balances - Other Increases	Adjustment to actuarial libility for annuities payable = \$1563119

Return
Reference

Cother

Loss due to refinancing = -\$1306705

ı	Other	Loss due to retinancing = -\$1306705	i
ı	Changes In		ı
ı	Net Assets		ı
ı	Or Fund		ı
ı	Balances -		ı
ı	Other		ı
I	Decreases		ı

Return Reference	Explanation
Form 990 Part VI Line 7b-Governing Body	The ByLaws, Article VII, section 7 04 states that "The Executive Committee of the Board of Regents shall be composed of those individuals designated by the Board of Regents from to time. The Executive Committee shall act only during intervals between meetings of the Board of Regents and shall at all times be subject to the control and direction of the Board of Regents. During such intervals, and subject to such control and direction, the Executive Committee shall have and may exercise all of the authority and powers of the Board of Regents in the management and affairs of the Corporation, subject to such limitations as the Board of Regents may impose. The Executive Committee shall keep regular minutes of its proceedings and report the same to the Board of Regents." During tax year 2016, the committee's members were Lawrence Stranghoener Board Chair, Kristine Johnson Board Vice Chair, Jody Horner, Philip Milne, Timothy Maudlin, Kevin Bethke, Glenn Taylor and David Anderson.

Return Explanation
Reference

Mission

Form 990,
Part I, line 1 Organization's V Lutheran tradition

St Olaf College challenges students to excel in the liberal arts, examine faith and value
s, and explore meaningful vocation in an inclusive, globally engaged community nourished b

SCHEDULE R
(Form 990)

Related

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

Department of the Treasury

Internal Revenue Service
Name of the organization

## **Related Organizations and Unrelated Partnerships**

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

2016

DLN: 93493079003298

OMB No 1545-0047

Open to Public

Inspection
Employer identification number

Schedule R (Form 990) 2016

Actual to Form 5

► Attach to Form 990. ► Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

St Olaf College 41-0693979 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization (f) (g) (b) 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 (1) Employer-Contribution VEBA Trust St Olaf Employee Benefit Plan MN 501c9 No 1520 St Olaf Avenue N/A Northfield, MN 55057 04-3838456 MN (2) Employee-Contribution VEBA Trust St Olaf Employee Benefit Plan 501c9 No 1520 St Olaf Avenue N/A Northfield, MN 55057 04-3838476

Cat No 50135Y

chedule R (Form 990) 2016												Pa	ge <b>2</b>
Part III Identification of Related Organization				e if the or	ganızatıon	answered "Ye	s" on Form	າ 990,	Part I	V, line 34 b	ecaus	e it had	I
one or more related organizations treated as a partnership du  (a)  Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomir income(rel unrelate excluded t tax und sections 5 514)	ted, total income d, om er	(g) Share of e end-of-year assets	(h) Disproprtionate r allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partn	lor Per	<b>(k)</b> ercentage wnership
					311)			Yes	No		Yes	No	
Part IV Identification of Related Orgobecause It had one or more related Orgobecause It had one		d (state		st during t			(f) Share of tota Income	l Share	(g) e of end year assets	-of- Perce	n) ntage rship	Section (13) of er	ontrol
(1)Chrtbl Rmndr Annuity 3	Investments		MN	N/A		Trust						Yes	N No
L520 St Olaf Avenue Northfield, MN 55057													
(2)Chrtbl Rmndr Unı Trust 13	Investments		MN	N/A		Trust							No
1520 St Olaf Avenue Northfield, MN 55057													
(3)Pooled Income Fund 1	Investments		MN	N/A		Trust							No
L520 St olaf Avenue Northfield, MN 55057													
(4)Life Income Fund 2	Investments		MN	N/A		Trust							No
L520 St Olaf Avenue Northfield, MN 55057													
(5)Makeup Income Chariable Unit Trust 2	Investment		MN	N/A		Trust							No
1520 St olaf Avenue Northfield, MN 55057													
										Sahadula B			

Schedule k (Form 990) 2016		Page 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Ye	es No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		$\top$
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)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	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
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

g	Sale of assets to related organization(s)	1g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	No
1	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
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
О	Sharing of paid employees with related organization(s)	1o	No
р	Reimbursement paid to related organization(s) for expenses	1p	No
q	Reimbursement paid by related organization(s) for expenses	1q	No
r	Other transfer of cash or property to related organization(s)	1r Yes	
s	Other transfer of cash or property from related organization(s)	1s	No

Schedule R (Form 990) 2016

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

<b>1</b>																	
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section		section		section		(f) Share of total income	total end-of-year	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	in box managing ) partner? edule 1		<b>(k)</b> Percentage ownership
			514)	Yes	No	<b>!</b>		Yes	No		Yes	No					
	Schedule R (Form 990) 2											0) 2016					

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016