DLN: 93493131044098 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

2016

Department of the Treasury Internal Revenue Service

foundations)

Do not enter social security numbers on this form as it may be made public
 Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

			alendar year, or tax year begin C Name of organization	ning 07-01-2016 , and ending	06-30-2017		ıdentıf	ıcatıon number
THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE Initial return Final Deturn/terminated Amended return Application pending City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, OH 45501 F Name and address of principal officer DR MICHAEL FRANDSEN THE BOARD OF DIRECTORS OF WITTENBERG UNIVERSITY 31-05371: Color of Directors OF WITTENBERG COLLEGE Number and street (or P O box if mail is not delivered to street address) E Telephone recommendation (937) 327 City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, OH 45501 F Name and address of principal officer DR MICHAEL FRANDSEN								
		_						
Fin	al					E Tolonhono	numbar	
□ Am	ended	l return	200 WEST WARD STREET	all is not delivered to street address) Ri	oom/suite			
⊔ Арі	piicatio	on penaing	City or town, state or province, coun	try, and ZIP or foreign postal code				
			·				· · · · ·	15,104,776
			DR MICHAEL FRANDSEN	officer	H(a)	· .	rn for	□ _{Yes} ☑ _{No}
			200 WEST WARD STREET SPRINGFIELD, OH 45501		Н(Ь)	Are all subordinates	;	Yes No
Tax	k-exen	npt status	✓ 501(c)(3)	insert no)	527	included? If "No," attach a list	(see	
W	ebsit	e:▶ WW	VW WITTENBERG EDU			Group exemption n	•	•
					I.v.		4 61 1	<u> </u>
(Forn	n of or	ganızatıon	Corporation Trust Asso	ciation U Other >	L Year		1 State H	of legal domicile
Pa	rt I	Sum	mary					
			scribe the organization's mission or					
			ERG UNIVERSITY PROVIDES A LIB					
3.5			. DIVERSE RESIDENTIAL COMMUNI RESPONSIBLE GLOBAL CITIZENS, ⁻					
2			IVITY, SERVICE, COMPASSION, AN		ND TO LEAD I	I ENSONAL, I NOI ESS	IONAL	, AND CIVIC LIVES
<u> </u>	=							
i e	-							
Governance	-							
			is box $ ightharpoonup$ if the organization dis		ed of more tha	an 25% of its net ass	eţs	1
Å	3	Number (of voting members of the governin	g body (Part VI, line 1a)			3	24
<u>≗</u>	4	Number (of independent voting members of	the governing body (Part VI, line	1b)		4	22
ACTIVILIES &	5	Total nur	mber of individuals employed in cal	endar year 2016 (Part V, line 2a)			5	1,810
₹	6	Total nur	mber of volunteers (estimate if nec	essary)			6	75
	7a	Total unr	elated business revenue from Part	VIII, column (C), line 12			7a	28,627
	ь	Net unrel	lated business taxable income from	Form 990-T, line 34			7b	27,614
						Prior Year		Current Year
a .	8	Contribut	tions and grants (Part VIII, line 1h		. 🗀	24,540,90	0	12,142,606
Ravenue	9	Program	service revenue (Part VIII, line 2g)	. $dash$	78,590,67	2	81,909,830
ōΛċ	l	Investme	5	3,780,790				
α	l		venue (Part VIII, column (A), lines	, , ,		-459,50		-313,568
	l		enue—add lines 8 through 11 (mu		12)	109,598,78		97,519,658
	_		nd similar amounts paid (Part IX, c			37,624,48	5	39,963,683
	l		paid to or for members (Part IX, co	, ,,	. ⊨		d	
S	l		other compensation, employee be	, ,,	-10)	28,097,30	6	26,901,785
Expenses	l	-	onal fundraising fees (Part IX, colu	, , , , , , , , , , , , , , , , , , , ,	· ·			
D G	l .		raising expenses (Part IX, column (D), li	, ,,				
ă	l		penses (Part IX, column (A), lines		- -	24,772,96	4	24,825,871
	l	·	penses Add lines 13–17 (must equ	•		90,494,75	+	91,691,339
	l		less expenses Subtract line 18 fro		. \vdash	19,104,02		5,828,319
S 9.					Beg	ginning of Current Yea	r	End of Year
Net Assets or Fund Balances			1 (D 1)(1 46)		_	102 247 05		244 420 525
ASS 1Ba	l		ets (Part X, line 16)		·	192,247,95		211,139,537
5 5	l		ollities (Part X, line 26)		·	49,457,59		60,729,688
			ts or fund balances Subtract line 2	1 from line 20		142,790,36	3	150,409,849
	t II		ature Block erjury, I declare that I have exami	ned this return, including accompa	nuna schodi	ulas and statements	and to	the best of my
			ef, it is true, correct, and complete					
iny ki	nowle	edge	<u> </u>					
		 	*			2018-05-10		
::		Signat	ure of officer			Date		
Sign Here		L DD MI	CHASE SPANDSEN PRESIDENT					
	-		CHAEL FRANDSEN PRESIDENT or print name and title					
		17	Print/Type preparer's name	Preparer's signature	Date	□ PT	.N	
Paic	1		KAREN O CRIM	KAREN O CRIM		Check L If PO	368385	5
		_ _F	Firm's name RSM US LLP	I		self-employed Firm's EIN ► 42-07	14325	
-	oare	?! <u> </u>	Firm's address ► 2000 W DOROTHY LN			Phone no (937) 29		
JSE	On	יע	DAYTON, OH 45439					
4	ha ID:	<u></u>	· · · · · · · · · · · · · · · · · · ·	un aboue? (ees metimostrone)		I		∕es □ No
ray t	ne IR	o aiscuss	this return with the preparer show	n apover (see instructions)			_ I ⊻ Y	es ∟ No

Cat No 11282Y

Form **990** (2016)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2016)					Page 2							
Par	t IIII Stat	ement of Program S	ervice Accomplis	hments									
	Chec	c if Schedule O contains a	response or note to a	any line in this Part III		🗹							
1	Briefly descr	be the organization's mis	sion										
DIVE GLO	RSE RESIDEN	TIAL COMMUNITY REFLECT TO DISCOVER THEIR CAL	CTING ITS LUTHERAN	HERITAGE, WITTENBE	ELLECTUAL INQUIRY AND WHOLE ERG CHALLENGES STUDENTS TO SIONAL, AND CIVIC LIVES OF CRI	BECOME RESPONSIBLE							
2	Dıd the orga	nızatıon undertake any sıg	gnificant program ser	vices during the year w	which were not listed on								
	the prior For	m 990 or 990-EZ?				🗌 Yes 🗹 No							
	If "Yes," des	cribe these new services o	on Schedule O										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program												
4	services ⁷												
	If "Yes," describe these changes on Schedule O												
4	Section 501	c)(3) and 501(c)(4) organ	nizations are required	to report the amount	e largest program services, as me of grants and allocations to other								
4a	(Code) (Expenses \$	58,633,493	including grants of \$	39,963,683) (Revenue \$	67,545,822)							
	See Additional	Data											
4h	(Code) (Expenses \$	9,883,151	including grants of \$) (Revenue \$	1,114,785)							
	See Additional		. ,										
Section 501(c)(3) and 501(c)(4) organi expenses, and revenue, if any, for each	8,508,053	including grants of \$) (Revenue \$	13,249,223)									
	See Additional	Data											
	•	, , ,		including grants of \$) (Revenue \$)							
	ACADEMIC SU	PPORT SERVICES AND INSTIT	UTIONAL SUPPORT SERV	/ICES									
4d	Other progra	am services (Describe in S	ichedule O)										
4u	- cc. p. c g												
4 u	(Expenses \$	6,416,222 am service expenses ▶	including grants of	\$) (Revenue \$)							

Yes

or X as applicable

Section 501(c)(3) organizations.

Checklist of Required Schedules 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1

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

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

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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 grants or other assistance to or for any

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,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼

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

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

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

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

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

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

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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

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?

for public office? If "Yes," complete Schedule C, Part I 💆

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11f

12a

12b

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14a

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Nο

Nο

No

Page 3

No

No Nο Nο Yes Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Nο

Νo

Nο

Nο

Nο

Form 990 (2016)

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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?

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Form 990 (2016)							
Par	t IV Checklist of Required Schedules (continued)						
			Yes	No			
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b					
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes,"</i> complete Schedule J	23	Yes				

24b

24c

24d

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25b

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Yes

Yes

Yes

Yes

Form 990 (2016)

Nο

No

No

Nο

Νo

Nο

No

No

Nο

Nο

Nο

Nο

Νo

No

Nο

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 Yes 24a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

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

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

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

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

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

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 🛸

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

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

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

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

	990 (2016)			Page
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 128			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CJ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-	2. 1227 12 mile du di de di gambadon me Form 6000 i i i i i i i i i i i i i i i i i	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		
•	required ⁷	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
b	Section 501(c)(29) qualified nonprofit health insurance issuers.			
ь.	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
ь 3 а	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
b 3 a b	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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	13a		
ь .3 а ь	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		No

Form	990 (2016)			Page 6
Par	Governance, Management, and DisclosureFor 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		nse to li	nes
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 24		Yes	No
	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 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? \cdot	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	<u>e Code</u>		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
11a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		v	
L	form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	124	165	
	conflicts?	12b	Yes	
	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14 15	Did the organization have a written document retention and destruction policy?	14	Yes	
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
h	Other officers or key employees of the organization	15a	Yes	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	List the States with which a copy of this Form 990 is required to be filed.			
17	List the States with which a copy of this Form 990 is required to be filed ► AR , KY , MA , MD , MI , MT , NV , NH , NY	<u>,</u> он ,	OR, WA	4
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records PAUL LOSCHEIDER PO BOX 720 200 WEST WARD STREET SPRINGFIELD, OH 45504 (937) 327-7025			- (2015)

orm 990 (2	rm 990 (2016) Pa										
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)

KAPP CONSTRUCTION

329 MT VERNON AVENUE SPRINGFIELD, OH 455034143

compensation from the organization ▶ 14

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

Page 8

(A) Name and Title	(B) Average hours per week (list ann hours	Average hours per than one box, unless person us both an officer and a director/trustee)							(E) Reportable compensation from related organizations (1)	w-	(F) Estimated amount of othe compensation from the organization an	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated emptoxiee	Former	2/1099-MISC)	2/1099-MISC	,	relat organiza	ed
See Additional Data Table												
										_		
	1											
1b Sub-Total				Щ.						T		
c Total from continuation sheets to F d Total (add lines 1b and 1c)			•	•		▶		1,349,918		0		145,168
Total number of individuals (includin of reportable compensation from the	g but not limited	to thos			bove		rece	eived more than \$1	00,000			
											Yes	No
3 Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>			ee, k	ey er •	mple •	oyee,	or hi	ghest compensated	employee on	3	Yes	
For any individual listed on line 1a, is organization and related organization individual									n the	4	Yes	
5 Did any person listed on line 1a rece services rendered to the organization								-	vidual for	5		No
Section B. Independent Contrac											•	
Complete this table for your five high from the organization Report compe										npen	sation	
Name	(A) and business addre	ess						Desc	(B) ription of services		(C Comper	
SODEXO SERVICES								MEAL SERV	ICES/CATERING		2	,710,202
200 WEST WARD ST SPRINGFIELD, OH 45504												
PARKHURST DINING SERVICES PO BOX 644091								MEAL SERV	ICES/CATERING		1	,397,590
PITTSBURGH, PA 152644091 WFF FACILITY SERVICES								JANITORIAL	. SERVICES			499,549
211 SOUTH JEFFERSON AVENUE ST LOUIS, MO 63103												
OHIO INDIANA ROOFING								CONSTRUCT	TION SERVICES			478,425
1429 CRANBERRY ROAD ST HENRY, OH 45883												
KAPP CONSTRUCTION								CONSTRUCT	TION SERVICES			428 728

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

428,728

CONSTRUCTION SERVICES

Part		II Statement of	Revenue									rage 3
				a respo	onse or note to any	line in thi	s Part VIII					🗆
				·		(A Total re)	Rela exe fun	B) ted or empt ction	Unre bus	C) elated iness	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a				rev	enue			512-514
nts ints		b Membership dues		1b	<u> </u>							
ira nou		c Fundraising events		1c	58,766							
s. (An		d Related organizatio		1d								
Gift		e Government grants (co		1e	1,161,689							
Si E		f All other contributions,			-,===,===							
tion services		and similar amounts n		1f	10,922,151							
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included									
Contr and (ın lınes 1a-1f \$		2,70	00,511							
<u>ة ت</u>	L	n Total.Add lines 1a-1	lf				142,606					
표					Business							
۲٠٨٠	_	TUITION AND FEES	DEVENUE			611310		45,822 49,223	67,54 13,24	- 		
ت ج		AUXILIARY ENTERPRISE OTHER SOURCE INCOME				611710		14,785		4,785		
Service Revenue							-		·			
<i>3</i> 5	e	·										
Program		All other program se	rvice revenue	:								
Æ	g	Total.Add lines 2a-2f	f		▶ 81,9	09,830						
		Investment income (ii			interest, and other		1 600 424				272	1 600 153
		similar amounts). Income from investme			• • • • • • • • • • • • • • • • • • •	<u> </u>	1,600,424	'			272	1,600,152
		Royalties		-	ond proceeds		1,160)			10	1,150
		,	(ı) Rea		(II) Personal							
	6a	Gross rents										
	Ŀ	Less rental expenses				1						
	•	Rental income or (loss)										
	c	d Net rental income o	r (loss)			1						
			(ı) Securi	ties	(II) Other							
	7a	7a Gross amount from sales of 49,208,610 528,376 assets other than inventory										
	ŀ	b Less cost or other basis and 46,491,392 1,065,				_						
		sales expenses C Gain or (loss) 2,717			-536,852							
	c	d Net gaın or (loss) .					2,180,366	5			36,740	2,143,626
Other Revenue	8a	contributions reporte	58,766 ed on line 1c)	of								
eve		See Part IV, line 18			23,719 28,498							
÷ ه		Less direct expense Net income or (loss)		b sına ev]	-4,779	,				-4,779
the		Gross income from g	amıng actıvıt									
0		See Part IV, line 19		а	}							
	Ł	Less direct expense	s	b		1						
	•	Net income or (loss)	from gaming	actıvıt	ies							
	10	aGross sales of invent returns and allowand	tory, less ces	a								
	Ł	Less cost of goods s	sold	b		1						
	(Net income or (loss)		invent	tory ►							
	11	Miscellaneous			Business Code 900099		300.040				8 305	201 554
	11	Lapartnership inco	DME		900099		-309,949				-8,395	-301,554
	ŀ	·										
	ď											
		d All other revenue .										
		Total. Add lines 11a			•		200.01					
	12	2 Total revenue. See	Instructions				-309,949				_	
					-		97,519,658	5 <u> </u>	81,909,830		28,627	3,438,595 Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all cc	_	·	. ,	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	39,383,326	39,383,326		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	580,357	580,357		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	646,991	550,589	61,464	34,938
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	20,614,372	17,542,831	1,958,365	1,113,176
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	807,915	687,536	76,752	43,627
9 Other employee benefits	3,392,463	2,886,986	322,284	183,193
10 Payroll taxes	1,440,044	1,225,478	136,804	77,762
11 Fees for services (non-employees)				
a Management				
b Legal	261,354		261,354	
c Accounting	85,500		85,500	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	291,220		291,220	_
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,304,116	1,109,803	123,891	70,422
12 Advertising and promotion	1,137,994	968,433	108,109	61,452
13 Office expenses	1,178,366	1,002,789	111,945	63,632
14 Information technology	1,124,149	956,651	106,794	60,704
15 Royalties				
16 Occupancy	5,056,184	4,302,813	480,337	273,034
17 Travel	1,235,358	1,051,290	117,359	66,709
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest	2,628,084	2,236,499	249,668	141,917
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,523,730	2,998,695	334,754	190,281

536,421

2,843,536

2,789,945

611,332

218,582

91,691,339

456,494

2,419,849

2,374,243

520,243

186,014

83,440,919

50,960

270,136

265,045

58,077

20,765

5,491,583

28,967

153,551

150,657

33,012

11,803

2,758,837

Form **990** (2016)

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)

23 Insurance . . .

expenses on Schedule O)

a FOOD SERVICE EXPENSE

c BOOKS AND RECORDS

d MEMBERSHIPS

e All other expenses

b DEPARTMENTAL PROGRAMS

Page **11**

72,799,737

23,490,999

7.962.609

12.907.593

211,139,537

6.767,605

2,631,051

42,390,734

1.756.132

7.184.166

60,729,688

12.934.529

45,553,749

91.921.571

150,409,849

211.139.537

Form **990** (2016)

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1	Cash-non-interest-bearing	1,119	1	3,722
2	Savings and temporary cash investments	13,876,004	2	17,169,845
3	Pledges and grants receivable, net	16,000,627	3	11,787,669
4	Accounts receivable, net	2,260,219	4	2,874,743
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			1

50.774.759

33,373,282

7.303.572

5.873.174

7,082,686

1,693,348

29,922,841

1,913,083

1.613.000

7.232.632

49,457,590

11.834.827

44,563,647

86.391.889

142,790,363

192,247,953

192,247,953

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	3	Pleages and grants receivable, net	10,000,027		11,767,009		
	4	Accounts receivable, net			2,260,219	4	2,874,743
	5	Loans and other receivables from current and fo trustees, key employees, and highest compensa II of Schedule L		5			
6	6	Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations (voluntary employees' beneficiary organizations (Part II of Schedule L		6			
et	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
۸	9	Prepaid expenses and deferred charges			302,968	9	385,521
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	175,463,410			
	b	Less accumulated depreciation	10 b	113,706,311	62,482,229	10 c	61,757,099

19 Deferred revenue . . . 20 Tax-exempt bond liabilities . . . Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 . Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets

Assets or 30

Net

31

32

33

34

11

12

13 14

15

16

17

18

Investments—publicly traded securities .

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . . .

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11

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

check here

and complete lines 30 through 34.

Total net assets or fund balances

Total liabilities and net assets/fund balances

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

Form 990 (2016)

☐ Both consolidated and separate basis

2c

3a

3b

Yes

Yes

Yes (2016)

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Consolidated basis

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

✓ Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

MATHEMATICS, INTEGRATED SOCIAL STUDIES, AND LIFE SCIENCES, MULTI-AGE DRAMA/THEATER, FOREIGN LANGUAGE, MUSIC AND VISUAL ARTS

Software Version: **EIN:** 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

Form 990 (2016)

Form 990, Part III, Line 4a: WITTENBERG UNIVERSITY CURRENTLY ENROLLS APPROXIMATELY 1.800 FULL-TIME STUDENTS WHO PURSUE DEGREES IN MORE THAN 34 MAJOR FIELDS OF STUDY THE UNIVERSITY HOLDS GENERAL ACCREDITATION FROM THE NORTH CENTRAL ASSOCIATION OF COLLEGES AND SCHOOLS AND SOME DEPARTMENTS HOLD SPECIALTY ACCREDITATIONS EFFECTIVE DECEMBER 1, 2000, THE OHIO BOARD OF REGENTS GRANTED THE UNIVERSITY AN AMENDED CERTIFICATE OF AUTHORIZATION TO CONFER THE DEGREES OF BACHELOR OF ARTS, BACHELOR OF SCIENCE, BACHELOR OF FINE ARTS, BACHELOR OF MUSIC, BACHELOR OF MUSIC EDUCATION, AND MASTER OF ARTS

IN EDUCATION THE REGENTS ALSO APPROVED THE UNIVERSITY IN THE FOLLOWING TEACHER LICENSURE FIELDS EARLY CHILDHOOD, MIDDLE CHILDHOOD, INTERVENTION SPECIALIST MILD/MODERATE EDUCATIONAL NEEDS, ADOLESCENT TO YOUNG ADULT EARTH SCIENCES, INTEGRATED LANGUAGE ARTS, INTEGRATED

STUDENTS AT WITTENBERG HAVE THE OPPORTUNITY TO PARTICIPATE IN APPROXIMATELY 100 CO-CURRICULAR ORGANIZATIONS WITH MULTIPLE LEADERSHIP OPPORTUNITIES STUDENT ORGANIZATIONS ARE SOME OF THE MOST ACTIVE AND IMPACTFUL GROUPS ON CAMPUS WITTENBERG OFFERS A BROAD-BASED INTERCOLLEGIATE ATHLETICS PROGRAM NOW OFFERING 24 VARSITY TEAMS - 12 FOR MEN AND 12 FOR WOMEN - IN ADDITION TO NUMEROUS CLUB AND INTRAMURAL

OPPORTUNITIES THERE IS SOMETHING TO MEET EVERY STUDENT'S ATHLETIC AND RECREATIONAL NEEDS

Form 990, Part III, Line 4b:

WITTENBERG IS A RESIDENTIAL CAMPUS WITH APPROXIMATELY 90% OF THE STUDENTS RESIDING ON CAMPUS OR IN THE UNIVERSITY DISTRICT NEIGHBORHOOD IN CLOSE PROXIMITY TO THE CAMPUS STUDENTS MAY CHOOSE TO LIVE IN ONE OF 7 DISTINCT RESIDENCE HALLS WITTENBERG OFFERS A WIDE SELECTION OF HOUSES. AND APARTMENTS FOR JUNIORS AND SENIORS SEVERAL DINING LOCATIONS ARE AVAILABLE ON CAMPUS. AND THE STUDENT CENTER HOUSES A BOOKSTORE, CAMPUS MAILROOM, GAME ROOM, LOUNGES, AND OTHER AMENITIES

Form 990, Part III, Line 4c:

Compensated Employees, and Independent, Contractors (C) (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 any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Highest cor individual to or director Officer Former Key emplo Institution organizations MISC) MISC) related below dotted organizations line)

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

		กษอยา	ol Trustee		jee	mpensated			
DR RICHARD E HELTON	24 00			x			218,265	0	
PRESIDENT (TO 6/30/17)		^		^			210,203	0	
REV JONATHAN L EILERT	1 00								

DR RICHARD E HELTON	24 00		Ų		218,265	_	
PRESIDENT (TO 6/30/17)		_ ^	^		218,203	0	
REV JONATHAN L EILERT	1 00	V	<		0	0	
BOARD-CHAIR		_ ^	^		0		
JAMES J HENSON	1 00	×	х		0	0	
BOARD-VICE CHAIR		_ ^	^		9		
ALICIA SWEET HUPP	1 00						

EV JONATHAN L EILERT	1 00	×	×		0	0	
OARD-CHAIR		^	^		3	Ŭ	
AMES J HENSON	1 00	×	Х		0	O	
OARD-VICE CHAIR		,,			,		
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BOARD MEMBER

DAVID E BAINES

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

WILLIAM S BOGGS

WILLIAM D EDWARDS

WES C BATES

REV JONATHAN L EILERT		l .			۸ ا	۸ ا	
BOARD-CHAIR		_ ^	^		ľ	0	
JAMES J HENSON	1 00	,,	,				
BOARD-VICE CHAIR		×	×		U	0	
ALICIA SWEET HUPP	1 00	,	,				
BOARD-SECRETARY		*	*		0	0	
R ANDREW BELL	1 00	V	Ţ				
BOARD-TREASURER		^	^		٧	·	l "

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ALICIA SWEET HUPP	1 00	×	Y		0	0	0
BOARD-SECRETARY		_ ^	^		Ĭ		
R ANDREW BELL	1 00	×	x		0	0	0
BOARD-TREASURER			^		Ĭ	Ĭ	
ROY K ALLEN	1 00	,					

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 from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Office Highest compensate Former Individual trustee or director Key employee Institutional MISC) related organizations MISC) below dotted organizations line) Trustee

				d		
JANET E JACKSON	1 00	,			0	
BOARD MEMBER		^			0	
DOUGLAS E KENTFIELD	1 00	,			0	
BOARD MEMBER		^				
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ROBERT E NESS

BOARD MEMBER

ERIC C RUSNAK

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

LEWIS W SHAW II

CATHERINE L SCHIBLER-KEEGAN

		Ιx						ا ما	
BOARD MEMBER		^							
DOUGLAS E KENTFIELD	1 00	, , , , , , , , , , , , , , , , , , ,							
BOARD MEMBER		*							
DR WENDELL R LUTZ	1 00	v						0	
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OARD MEMBER OUGLAS E KENTFIELD OARD MEMBER X O OARD MEMBER X O OOARD MEMBER X O OOARD MEMBER X O OOARD MEMBER X O OOARD MEMBER ARAH HAGEN MCWILLIAMS	ANET E JACKSON		v			۸ ا	٥	
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DOUGLAS E KENTFIELD BOARD MEMBER	1 00	x			0	0	0
DR WENDELL R LUTZ BOARD MEMBER	1 00	x			0	0	0
SARAH HAGEN MCWILLIAMS BOARD MEMBER	1 00	x			0	0	0
FREDERICK B MITCHELL BOARD MEMBER	1 00	x			0	0	0
JOHN F MEIER	1 00						

BOARD MEMBER		,,			Ĭ		
SARAH HAGEN MCWILLIAMS	1 00	×			0	0	0
BOARD MEMBER		,					
FREDERICK B MITCHELL	1 00	V				0	
BOARD MEMBER		\				U	J
JOHN E METER	1 00						

BOARD MEMBER							
FREDERICK B MITCHELL BOARD MEMBER	1 00	x			0	0	0
JOHN F MEIER	1 00	×			0	0	0
BOARD MEMBER (TO 1/02/17)		^			Ĭ	Ŭ	

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Compensated Employees, and Independent Contractors (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation amount of other compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and organizations | 9 5 | 5 MISC) MISC) related

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

	below dotted line)	ivadual trustee director	stitutional Trustee	ন <u>িক</u>	y employee	hest compensated plovee	mer			organizations
ALAN D STEWART	1 00									
BOARD MEMBER		*							0	
MARTIN J UHLE	1 00									

ALAN D STEWART	1 00						,	ا	1
BOARD MEMBER		_ ^							
MARTIN J UHLE	1 00	×					0	0	
BOARD MEMBER		^						Ĭ	
SCOTT H MUDDY WATTERS	1 00								
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180,360

151,191

163,519

117,817

134,561

109,205

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21,528

17,877

13,170

14,765

13,408

22,934

0

0

BOARD MEMBER									
MARTIN J UHLE	1 00	V						0	
BOARD MEMBER		^					0	U	
SCOTT H MUDDY WATTERS	1 00	_					0	0	
BOARD MEMBER		^					0	Ů	
JAMES R WYMER	1 00								
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BOARD MEMBER

MARY JO ZEMBAR

INTERIM PROVOST

ELIZABETH A SORENSEN

CHARLES MCFARLAND

VP STRATEGIC INITIATIVES

TY BUCKMAN

VP FOR UNIVERSITY ADVANCEMENT

ASSISTANT VP FOR FINANCE ADMIN

PROFESSOR AND DIRECTOR OF NURSING

WENDY KOBLER

VP FINANCE

RANDAL J FREEBOURN

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average 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 (W-2/1099for related (W- 2/1099organization and Instituti organizations MISC) MISC) related below dotted organizations line)

		l trustee or	nal Trustee	oyee	ompensated		
LAURIE JOYNER	0 00						

................

FORMER PRESIDENT

275,000

efile	e GR/	APHIC pri	nt - DO NOT PROCE	SS	As Filed Data -			DLN: 9	3493131044098
SCI	HED	ULE A	Publi	ic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047
(For	m 990			ne org	anization is a sect	ion 501(c)(3) d	organization o		2016
990E	ZZ)				1947(a)(1) nonexe ► Attach to Form 9				
		the Treasury	► Information a		Schedule A (Form			ıctions is at	Open to Public Inspection
Name	e of th	ue Service ne organiza OF DIRECTORS	tion		www.m.sige	<u>, , , , , , , , , , , , , , , , , , , </u>		Employer identific	<u> </u>
		COLLEGE	OF					31-0537177	
	rt I		for Public Charity S a private foundation bec					See instructions.	_
1 1	rganiz		onvention of churches, o		•	•	,	(A)(i)	
2		•	scribed in section 170					(4)(1):	
3	$\overline{\mathbf{V}}$		or a cooperative hospital			·	• • • • • • • • • • • • • • • • • • • •	::::	
4		•	esearch organization op		-				ntor the heepital's
•	Ш		and state	eratec		a nospital descri	bed in Section .	170(D)(1)(A)(III). E	inter the hospital's
5			ation operated for the be (iv). (Complete Part II)		of a college or univer	sity owned or op	erated by a gov	ernmental unit descri	bed in section 170
6			tate, or local governme		jovernmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	۱)(v).	
7			ation that normally receil (0(b)(1)(A)(vi). (Comp			s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described in sec	ction :	170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization ant college of agricultur						ege or university or a
10		from activit	ition that normally receives related to its exempulated by income and unrelated been section 509(a)(2).	t funct	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
11	П	•	ation organized and oper	•		public safety S	ee section 509	(a)(4).	
12		more public	ation organized and oper ily supported organization through 12d that descr	ons de	scribed in section 5	09(a)(1) or sec	tion 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization on the control of the power to regular Part IV, Sections A and	operat arly ap	ed, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting organization nt of the supporting org	super anızat	ion vested in the san				
С		Type III fo	unctionally integrated organization(s) (see inst	I. A su	pporting organization				ted with, its
d		functionally	on-functionally integrated The organized The	zation	generally must satisf	y a distribution i			
e		Check this	box if the organization r	eceive	d a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		or Type III non-function of supported organizati		negrated supporting	organization			
g			ing information about th		ported organization(5)		_	
(i)N		f supported ((iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Total			tion Act Notice, see th			Cat No 11285		Coloradorio A.C. C	 90 or 990-EZ) 2016

Sch	nedule A (Form 990 or 990-EZ) 2016						Page 2
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) 2013	(c)2014	(d)2015	(e) 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	Public support. Subtract line 5 from line 4						
	Section B. Total Support	1	•		•	•	
	Calendar year	(a)2012	(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	_ _						
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 33 1/3% support test—2016. 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 stop here. The organization qual						ightharpoons
b	33 1/3% support test—2015. 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 stop here. The organization						▶□
17 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	rne 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	· —
	instructions		, -	. , ,	,		►□
					Schodu	le A (Form 990 o	r 990-F7) 2016

Section A. Public Support	
the organization fails to qualify under the tests listed below, please complete Part II.)	
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT

Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
_	membership fees received (Do not	I					
	ınclude any "unusual grants`")	<u> </u>					
2	Gross receipts from admissions,	I					
	merchandise sold or services performed, or facilities furnished in	I					
	any activity that is related to the	I					
	organization's tax-exempt purpose	I					
_	Cross receipts from activities that are						
3	Gross receipts from activities that are not an unrelated trade or business	I					
	under section 513	I					
4	Tax revenues levied for the						
	organization's benefit and either paid	I					
5	to or expended on its behalf The value of services or facilities						
,	furnished by a governmental unit to	I					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5	<u></u>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I					
	5 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3						
	received from other than disqualified	I					
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I					
	13 for the year	I					
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
31	ection B. Total Support	Г	1	T	Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
U	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12) First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, ► □
<u> </u>	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2016 (lir			column (f))		15	
16	Public support percentage from 2015 S		· ·	(.,,		16	
	ection D. Computation of Invest	<u> </u>				10	
17	Investment income percentage for 20:			line 13, column (f))	17	
18	Investment income percentage from 2			,(••	18	
	331/3% support tests—2016. If the			on line 14, and lir	ie 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests—2015. If the						. —

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

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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 Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	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 Part VI 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 Part VI 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 Part VI when and how the organization made the					
	determination	3b				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	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 Part VI when and how the organization made the			
	determination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
C	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 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 fewers commented	\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 Part VI 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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b				
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections					
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					

	to the 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 Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by			
	amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
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			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
	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		
C -	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 Part VI how the organization			
	maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the	-		
	organization's investment policies and in directing the use of the organization's income or assets at all times during the ta			
	year? If "Yes," describe in Part VI 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 line 2 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 Part VI how you supported a government entity (s	ee instri	ictions)	١
_	The organization supported a governmental entity bescribe in Fair variow you supported a government entity (s	oc mond	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 Part VI identify those supported			
	organizations and explain how these activities directly furthered their exempt purposes, how the organization was			
	responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the 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 Part VI. 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

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

2

4

Schedule A (Form 990 or 990-FZ) 2016

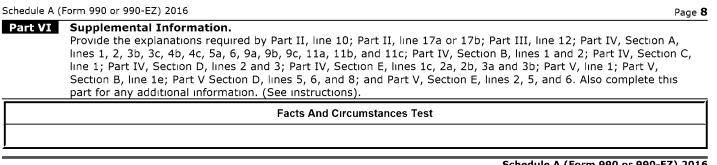
Enter 85% of line 1

Enter greater of line 2 or line 3

Minimum asset amount for prior year (from Section B, line 8, Column A)

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

e Excess from 2016. . . .



SCHEDULE C (Form 990 or 990-

EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public

OMB No 1545-0047

DLN: 93493131044098

▶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 Department of the Treasury www.irs.gov/form990.

Inspection

Intern	al Revenue Service						Inspe	CLIOII
		on Form 990, Part IV, Line 3, or Form 9		e 46 (Polit	ical Campaıg	n Ac	tivities), the	n
		omplete Parts I-A and B Do not complete		Do not cor	malata Dart I [ь		
	Section 501(c) (other than section Section 527 organizations Compl	501(c)(3)) organizations Complete Parts ete Part l-A only	s I-A and C below	Do not cor	npiele Part I-t	Б		
If the	e organizatıon answered "Yes" (on Form 990, Þart IV, Line 4, or Form 9						
		at have filed Form 5768 (election under s						
		at have NOT filed Form 5768 (election ur on Form 990, Part IV, Line 5 (Proxy Tax						
(Pro	xy Tax) (see separate instructio	ns), then	., (-,		-,	
	Section 501(c)(4), (5), or (6) organ	izations Complete Part III		<u> </u>				
THE	ne of the organization BOARD OF DIRECTORS OF				Employer id	entii	ication num	iber
	TENBERG COLLEGE				31-0537177			
Par	t I-A Complete if the org	anization is exempt under section	n 501(c) or is	a section	1 527 orga	niza	tion.	
1		anization's direct and indirect political can	npaign activities ir	n Part IV				
2	Political expenditures				•	\$_		
3	Volunteer hours		- F01(a)(2)					
		anization is exempt under section						
1	,	tax incurred by the organization under se			•	\$_		
2	•	tax incurred by organization managers u			•	\$_		
3	ir the organization incurred a se	ction 4955 tax, did it file Form 4720 for t	inis year?				☐ Yes	∐ No
4a	Was a correction made?						☐ Yes	□ No
<u>b</u>	If "Yes," describe in Part IV							
Par	t I-C Complete if the org	anization is exempt under sectio	n 501(c), exce	ept section	on 501(c)(3	3).		
1	Enter the amount directly exper	ded by the filing organization for section	527 exempt funct	ion activitie	es 🕨	\$_		
2		ganization's funds contributed to other o	rganızatıons for se	ection 527 e	exempt			
	function activities				•	⇒ _		
3	Total exempt function expenditu	ires Add lines 1 and 2 Enter here and or	n Form 1120-POL,	line 17b	•	\$_		
4	Did the filing organization file Fo	rm 1120-POL for this year?					☐ Yes	☐ No
5		employer identification number (EIN) of						
	organization made payments Fo	or each organization listed, enter the amo d that were promptly and directly deliver	ount paid from the	filing orga	nization's fund	ds Al hasa	lso enter the	amount
		tee (PAC) If additional space is needed,				45	a separate se	.gregatea
	(a) Name	(b) Address	(c) EIN	(d) Ama	ount paid from		(e) Amount	of political
	(a) Name	(b) Address	(C) EIN		rganization's		contributions	received
				funds I	if none, enter		and promp	
					-0-		directly deliv separate p	
							organızatıon	
		+				-	enter -	-0-
2								
3								
4								
 5								
						\dashv		
6 								

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

activity

Volunteers?

Media advertisements?

Return Reference

PART II-B, LINE 1

1

c

Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

0

(b)

Amount

(a)

Yes

No

Nο

Nο

Νo

Mailings to members, legislators, or the public? No Publications, or published or broadcast statements? Nο Nο Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? No Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? No Other activities? Yes Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year b Carryover from last year 2b C 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information** Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

DIRECTLY PARTICIPATE IN LOBBYING ACTIVITIES

Explanation THE ORGANIZATION PAYS MEMBERSHIP DUES TO ORGANIZATIONS, SUCH AS NACUBO, WHICH MAY

ENGAGE IN LOBBYING ACTIVITIES THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING ACTIVITIES, THIS AMOUNT, HOWEVER, IS IMMATERIAL THE ORGANIZATION DOES NOT

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. OMB No 1545-0047

DLN: 93493131044098

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

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

Open to Public Inspection

	E BOARD OF DIRECTORS OF TTENBERG COLLEGE			31-0537177		
	art I Organizations Maintaining Donor	Advised Funds or Ot	her Similar Fund			
	Complete if the organization answere					
		(a) Donor advised f	funds	(b)Funds and oth	ner accounts	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to t			r advised	☐ Yes	□ No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				☐ Yes	□ No
Pa	rt II Conservation Easements. Complet	e if the organization an	swered "Yes" on F	Form 990, Part IV, lin		
1	Purpose(s) of conservation easements held by the	e organization (check all th	at apply)			
	Preservation of land for public use (e g , rec	reation or education)	Preservation of	f an historically importai	nt land area	
	Protection of natural habitat		Preservation of	f a certified historic stru	cture	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	held a qualified conservation	on contribution in the		e End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easemen	ts		2b		
C	Number of conservation easements on a certified		• •	2 c		
d	Number of conservation easements included in (c) structure listed in the National Register) acquired after 8/17/06, a	nd not on a historic	2d		
3	Number of conservation easements modified, trantax year ▶	nsferred, released, extingu	ished, or terminated	by the organization dur	ing the	
4	Number of states where property subject to conse		-	_		
5	Does the organization have a written policy regar and enforcement of the conservation easements i	ding the periodic monitoring the holds?	ng, inspection, handli		Yes 🗌	No
6	Staff and volunteer hours devoted to monitoring, •	inspecting, handling of vio	lations, and enforcin	g conservation easemer	its during the	year
7	Amount of expenses incurred in monitoring, insperse \$	ecting, handling of violation	ns, and enforcing cor	servation easements du	ırıng the year	
8	Does each conservation easement reported on lin	e 2(d) above satisfy the re	equirements of section	n 170(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(ii)?				Yes 🗌 I	No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the orga			S	
Pai	Organizations Maintaining Collect Complete if the organization answere			Other Similar Asset	S.	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	eld for public exhibition, ed	lucation, or research	in furtherance of public		of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items	FAS 116 (ASC 958), to rep	ort in its revenue sta	tement and balance she		
1	(i) Revenue included on Form 990, Part VIII, line 1			> \$		
(ii)Assets included in Form 990, Part X			▶ \$		
2	If the organization received or held works of art, following amounts required to be reported under					
а	Revenue included on Form 990, Part VIII, line 1			▶ \$		
b	Assets included in Form 990, Part X			▶ \$		
For	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.	Cat	No 52283D Schedul	e D (Form 9	90) 2016

Par	t IIII	Organizations Ma	aintaining Coll	ections o	f Art, Hist	orical 1	reas	ures, o	r Other	Similar As	sets (cont	inued)	
3		g the organization's acq s (check all that apply)	uisition, accession	, and other	records, che	ck any o	f the f	ollowing t	that are a	significant us	se of its col	lection	
а		Public exhibition				d 🗆	Loar	n or exch	ange prog	grams			
b		Scholarly research				e 🗌	Oth	er					
С		Preservation for future	e generations										
4	Provi Part	de a description of the XIII	organization's colle	ections and	explain how	they fur	ther th	ne organiz	zation's ex	xempt purpos	se in		
5		ng the year, did the org ts to be sold to raise fur								nılar	☐ Yes	□ N	o
Pa	rt IV	Escrow and Cust	odial Arranger	nents.									
		Complete if the ord X, line 21.							•		nt on Forr	n 990,	Part ———
1a		e organization an agent ded on Form 990, Part I		n or other II	ntermediary	for conti	าbutio	ns or othe	er assets I	not	☐ Yes	□ N	0
ь	If "Ye	es," explain the arrange	ement in Part XIII	and comple	te the follow	ing table				Ar	nount		_
С		nning balance		,		_			1c				_
d	Addıt	tions during the year							1d				_
е	Distri	ibutions during the year	r						1e				_
f	Endır	ng balance							1f				_
2 a	Dıd t	he organization include	an amount on For	m 990, Part	t X, line 21,	for escro	w or c	ustodial a	account lia	ability?	☐ Yes	N	_ n
b	16 "V	es," explain the arrange	mont in Part VIII	Chack hara	if the evala	nation h	s boo	n provido	d in Bart \	VIII			•
	rt V	Endowment Fund											
ГС		Liidowinenti an	us. complete ii	(a)Current		b) Prior ye			ears back	(d)Three year		Four year	s back
1a	Beginn	ning of year balance .			135,296		1,124		96,737,383		90,493		509,647
Ь	Contril	butions	-	4,	554,757	3,88	32,401		3,681,454	1,4	83,099	1,	562,614
c	Net in	vestment earnings, gair	ns, and losses	8,	082,019	-1,14	13,282		4,226,374	12,4	18,331	7,	733,049
d	Grants	or scholarships		2,	348,013	2,14	10,821		1,925,521	2,2	205,533	2,	198,652
е		expenditures for facilitie	es	2,	700,527	4,37	74,126		2,808,566	5,2	49,007	5,	516,165
f	Admın	istrative expenses .											
g	End of	year balance	[103,	723,532	96,13	35,296	ġ	99,911,124	96,7	'37,383	90,	290,493
2	Provi	de the estimated perce	ntage of the curre	nt year end	balance (lin	e 1g, col	umn (a	a)) held a	ıs				
а	Board	d designated or quasi-e	ndowment 🟲	3 230 %									
b	Perm	nanent endowment 🟲	80 350 %										
c	Temp	porarily restricted endov	wment ▶ 16 4	20 %									
		percentages on lines 2a											
3а		here endowment funds	not in the possess	sion of the o	rganization	that are	held a	nd admın	istered fo	r the			
	-	nization by nrelated organizations									3a(i)	Yes	No No
		related organizations .					•	• • •			3a(ii)		No
b		es" on $3a(\pi)$, are the rel		s listed as re	equired on S	chedule	R?.				3b		
4	Desc	ribe in Part XIII the inte	ended uses of the	organization	n's endowme	nt funds							
Pa	rt VI	Land, Buildings,	and Equipmen	it.									
		Complete if the or	ganization answ	ered 'Yes'									
	Descr	ription of property	(a) Cost or othe (Investmer		(b)Cost or ot	her basis	(other)	(c)Acc	umulated d	epreciation	(d) B	ook value	e
1a	Land					5,:	103,732	2				5	5,103,732
b	Buildir	ngs				130,8	399,382	2		82,925,136		47	,974,246
С	Leasel	nold improvements						1					
		ment				37,0	050,942	2		30,781,175		6	,269,767

2,409,354

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

2,409,354

61,757,099

	Investments—Other Securities. Complete if th	e organi:	zation ansv	vered 'Yes' on For	m 990, Part IV,	line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Bo	ok value		Method of valuation	
(1)Financial	derivatives			2030 01	cha or year mark	et value
(3)Other	neld equity interests					
(A) ALTERNA (A)	ATIVE INVESTMENTS		23,490,999		F	
(B)						
(C)						
(D)						
(E)						
(F)						
(F) (G)						
(H)						
Total. (Colum Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. Complete if t		23,490,999 Nization ans	swered 'Yes' on Fo	orm 990, Part IV	/, line 11c.
	See Form 990, Part X, line 13.					
	(a) Description of investment	(в)	Book value		Method of valuati end-of-year marke	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)	•				
Part IX	Other Assets. Complete if the organization answered (a) Description	'Yes' on F	orm 990, Pa	rt IV, line 11d See		line 15) Book value
	TED BOND PROCEEDS AND RESERVES				(0)	9,083,140
` '	JRRENDER VALUE OF LIFE INSURANCE TIAL INTEREST IN TRUSTS					986,461 2,837,992
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)				. •	12,907,593
Part X	Other Liabilities. Complete If the organization at See Form 990, Part X, line 25.	nswered	'Yes' on Fo	orm 990, Part IV, I	ine 11e or 11f.	
1.	(a) Description of liability		(b) B	ook value		
(1) Federal	ncome taxes					
ACCOUNTS	HELD ON BEHALF OF OTHERS			502,254		
ANNUTTIES	AND TRUSTS PAYABLE			2,219,091		
FEDERAL GO (4)	OVERNMENT LOANS & GRANTS			4,462,821		
(5)						
(6)						
(7)		_				
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)	•		7,184,166		
	or uncertain tax positions. In Part XIII, provide the text of					

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

2d

4a

4b

Explanation

727,196

291,220

39,963,683

2e

3

4c

5

Page 4

727,196

51,436,436

40,254,903

91,691,339

Schedule D (Form 990) 2015

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 . . .

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

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

Other (Describe in Part XIII)

Add lines 2a through 2d .

Subtract line 2e from line 1 .

Part XIIII Supplemental Information

Return Reference

See Additional Data Table

Schedule D (Form 990) 2016

е

3

4

b

C

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

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

Supplemental Information
Return Reference

PART V, LINE 4 THE UNIVERSITY'S ENDOWMENT CONSISTS OF VARIOUS INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGN ATED BY THE GOVERNING BODY TO FUNCTION AS ENDOWMENTS (BOARD-DESIGNATED ENDOWMENT FUNDS) A S REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA (GA AP), NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING BOARD-DESIGNATED ENDOWMENT FUND S, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICT IONS THE UNIVERSITY HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURE E ACH YEAR AS A PERCENTAGE OF ITS ENDOWMENT FUND'S AVERAGE FAIR VALUE OVER THE TWELVE QUARTE RS ENDING DECEMBER 31ST OF THE PRIOR CALENDAR YEAR THE COMMITTEE SEEKS TO REDUCE THIS SPE NDING RATE TO 5% OVER THE FIVE-YEAR PERIOD FROM FISCAL YEAR 2018 TO FISCAL YEAR 2022 THE POLICY ALLOWS FOR APPROPRIATIONS IN EXCESS OF 5 5% BASED UPON APPROVAL BY THE BOARD OF DIR	Return Reference	Explanation
ECTORS IN ESTABLISHING THIS POLICY, THE UNIVERSITY CONSIDERED THE LONG TERM EXPECTED RETU RN ON ITS ENDOWMENT ACCORDINGLY, OVER THE LONG-TERM, THE UNIVERSITY EXPECTS THE CURRENT S PENDING POLICY TO ALLOW ITS ENDOWMENT TO GROW AT AN ACCEPTABLE LEVEL THIS IS CONSISTENT W ITH THE UNIVERSITY'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF ENDOWMENT ASSETS HELD I N PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN	PART V, LINE 4	OF PURPOSES THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGN ATED BY THE GOVERNING BODY TO FUNCTION AS ENDOWMENTS (BOARD-DESIGNATED ENDOWMENT FUNDS) A S REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA (GA AP), NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING BOARD-DESIGNATED ENDOWMENT FUND S, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICT IONS THE UNIVERSITY HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURE E ACH YEAR AS A PERCENTAGE OF ITS ENDOWMENT FUND'S AVERAGE FAIR VALUE OVER THE TWELVE QUARTE RS ENDING DECEMBER 31ST OF THE PRIOR CALENDAR YEAR THE COMMITTEE SEEKS TO REDUCE THIS SPENDING RATE TO 5% OVER THE FIVE-YEAR PERIOD FROM FISCAL YEAR 2018 TO FISCAL YEAR 2022 THE POLICY ALLOWS FOR APPROPRIATIONS IN EXCESS OF 5 5% BASED UPON APPROVAL BY THE BOARD OF DIR ECTORS IN ESTABLISHING THIS POLICY, THE UNIVERSITY CONSIDERED THE LONG TERM EXPECTED RETURN ON ITS ENDOWMENT ACCORDINGLY, OVER THE LONG-TERM, THE UNIVERSITY EXPECTS THE CURRENT S PENDING POLICY TO ALLOW ITS ENDOWMENT TO GROW AT AN ACCEPTABLE LEVEL THIS IS CONSISTENT WITH THE UNIVERSITY'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF ENDOWMENT ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH

Return Reference	Explanation
PART X, LINE 2	FROM THE AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2017 THE UNIVERSITY IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(A) OF THE U S INTERNAL REVENUE CODE, AND BY A SIMILAR PROVISION OF STATE LAW THE UNIVERSITY IS SUBJECT TO FEDERAL INCOME TAX ON ANY UNR ELATED BUSINESS TAXABLE INCOME THE UNIVERSITY'S TAX YEARS STILL SUBJECT TO EXAMINATION BY TAXING AUTHORITIES ARE YEARS SUBSEQUENT TO 2013 THE UNIVERSITY COMPLETED AN ANALYSIS OF TAX POSITION IN ACCORDANCE WITH ACCOUNTING STANDARDS CONTECATION (ASC.) 740, INCOME TO

TIS TAX POSITION, IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME T AXES, AND DETERMINED THAT NO AMOUNTS WERE REQUIRED TO BE RECOGNIZED IN THE FINANCIAL STATE

MENTS AS OF JUNE 30, 2017 AND 2016

Supplemental Information

Supplemental Information							
Return Reference	Explanation						
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 337,656 LOSS ON EXTINGUISHMENT OF DEBT -280,833 LOSS ON UNCOLLECTIBLE PLEDGES -2,677,500						

Supplemental Information Return Reference Explanation PART XI, LINE 4B - OTHER SCHOLARSHIPS AND AID NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS 39,963,683 PARTNERSHI ADJUSTMENTS P INCOME FROM K-1S NOT INCLUDED ON FINANCIAL STATEMENTS 91.892 LOSS ON SALE OF PROPERTY -727.196

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSS ON SALE OF PROPERTY 727,196

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND AID NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS 39,963,683

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493131044098 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 war anization **Employer identification number** THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 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)

Schedule E (Form 990 or 990EZ) (2016) Page 2						
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)						
Return Reference	Explanation					
SCHEDULE E, PART I, LINE 3	WITTENBERG IS COMMITTED TO ENSURING A DIVERSE ENVIRONMENT FOR ALL INDIVIDUALS AS SUCH, WE INCORPORATE THIS COMMITMENT ON SEARCH MATERIALS, THE WEBSITE, RECRUITMENT PUBLICATIONS, AND STUDENT, FACULTY, STAFF HANDBOOKS, AMONG OTHER COMMUNICATIONS BOTH INTERNALLY AND EXTERNALLY					
SCHEDULE E, PART I, LINE 6	WITTENBERG UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FROM THE U.S. GOVERNMENT IN CONNECTION WITH THE PELL GRANT AND SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAMS WITTENBERG UNIVERSITY ALSO RECEIVES SUPPORT FROM THE STATES OF OHIO AND PENNSYLVANIA FOR CERTAIN PROGRAMS					

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

efile GRAPHIC print -	DO NOT PE	ROCESS	As Filed Data -	ata - DLN: 9349313104409			
SCHEDULE F (Form 990)	Stater	ment of A	Activities (Outside the Uni	OMB No 1545-0047		
(1 51111 555)		► Complete	_	n answered "Yes" to Form (14b, 15, or 16.	990,	2016	
Department of the Treasury Internal Revenue Service	▶ Informatio		ich to Form 990. ▶	See separate instructions. and its instructions is at wi	/w.irs.gov/form990.	Open to Public Inspection	
Name of the organization THE BOARD OF DIRECTORS WITTENBERG COLLEGE					31-0537177	ntification number	
	formation o art IV, line 1		Outside the U	Inited States. Comple	te if the organization a	answered "Yes" to	
to award the grants For grantmakers. outside the United S	or assistance Describe in Postates	e? Part V the orga	anızatıon's proce	stance, and the selection dures for monitoring the cated if additional space is	use of its grants and ot	☐ Yes ☑ No her assistance	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region	
(1) See Add'l Data				. og.o.r/			
(2)							
(4)							
(5)							
3a Sub-total b Total from continuatio Part I		(0 0			5,610,060 196,127	
c Totals (add lines 3a a		•	0 0 s for Form 990.		No 50082W Schedu	5,806,187	

(5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash (book, FMV, assistance assistance appraisal, other)

(1) See Add'l Data (2)

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.

(3)

(4)

Sche	dule F (Form 990) 2016		Page 4
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)	☑ 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	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☑ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

Additional Data

Software ID: Software Version:

EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

Page 5

Schedule F (Form 990) 2016

(a) Pegion

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).

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

(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
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA &	0	0	INVESTMENTS		4,892,942

			recipients located in the region)		
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		4,892,942
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM		0	PROGRAM SERVICES	EDUCATION	254,020

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		4,892,942
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM		0	PROGRAM SERVICES	EDUCATION	254,020
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	PROGRAM SERVICES	EDUCATION	58,149

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	PROGRAM SERVICES	EDUCATION	2,158	
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	PROGRAM SERVICES	EDUCATION	18,561	
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	SCHOLARSHIPS	EDUCATION	132,230	

Form 990 Schedule F Pari	Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	SCHOLARSHIPS	EDUCATION	196,000		
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	SCHOLARSHIPS	EDUCATION	56,000		
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	SCHOLARSHIPS	EDUCATION	89,320		

Form 990 Schedule F Par	<u>t I - Activities</u>	Outside The L	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	0	0	SCHOLARSHIPS	EDUCATION	27,592
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	SCHOLARSHIPS	EDUCATION	30,000
CENTRAL AMERICA & THE CARRIBEAN	0	0	SCHOLARSHIPS	EDUCATION	49,215

-

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S												
(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)					
	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	4		PAID TO UNIVERSITY ON STUDENTS' BEHALF								
	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	7		PAID TO UNIVERSITY ON STUDENTS' BEHALF								

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S												
(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)					
SCHOLARSHIPS	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	2	,	PAID TO UNIVERSITY ON STUDENTS' BEHALF								
SCHOLARSHIPS	SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	3	,	PAID TO UNIVERSITY ON STUDENTS' BEHALF								

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 (e) Manner of (f) Amount of (g) Description of (h) Method of assistance of of cash grant cash non-cash non-cash valuation (book, recipients disbursement assistance assistance FMV, appraisal, other) 27,592 PAID TO SCHOLARSHIPS SOUTH ASIA -**JUNIVERSITY ON** AFGHANISTAN, ISTUDENTS' BEHALF lbangladesh. BHUTAN, INDIA, MALDIVES, NEPAL. **SCHOLARSHIPS** 30.000 PAID TO SUB-SAHARAN UNIVERSITY ON lafrica - angola.l STUDENTS' BEHALF BENIN, BOTSWANA. BURKINA FASO,

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (h) Method of (b) Region (c)Number (d) Amount of (e) Manner of (f) Amount of (a) Description of assistance cash grant cash disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV. appraisal. other) SCHOLARSHIPS 49,215 PAID TO CENTRAL **UNIVERSITY ON** AMERICA & THE STUDENTS' BEHALF CARRIBEAN

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

DLN: 93493131044098

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

Employer identification number Name of the organization THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have ındıvıdual from activity (or retained by) (or retained by) custody or or entity (fundraiser) fundraiser listed in organization control of col (i) contributions? Yes No STRATEGIC **ROYALL & COMPANY** DEVELOPMENT AND 1920 E PARHAM RD DELIVERY OF No 0 121,319 SOLICITATIONS RICHMOND, VA 23228 2 3 8 10 Total 121,319 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, AR, FL, GA, HI, IL, MA, MI, NV, NH, NY, NC, OH, OR, PA, SC, UT, VA, WA, WV, CA, CT, LA, KY, KS, ND, NJ, NM, OK, RI, WI, TN, CO, DC, ME, MN, MS, MO

Part II

than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c)Other events (a)Event #1 (b) Event #2 (d) Total events **FOOTBALL GOLF** WOMEN'S SOCCER (add col (a) through OUTING **OUTING** (total number) col (c)) Revenue (event type) (event type) 1 Gross receipts. 29,673 31,152 21,660 82,485 2 Less Contributions. 22,248 22,963 13,555 58,766 3 Gross income (line 1 minus 7,425 8,189 8,105 line 2) 23,719 4 Cash prizes 5 Noncash prizes 336 665 2,076 3,077 Direct Expenses Rent/facility costs 3.700 5.740 4,150 13,590 7 Food and beverages 8 Entertainment Other direct expenses 3,488 4,388 3,955 11,831 **10** Direct expense summary Add lines 4 through 9 in column (d) 28,498 11 Net income summary Subtract line 10 from line 3, column (d) . -4,779 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No If "Yes," explain _

Sche	dule G (Form 990 or 990-EZ) 2016					F	age
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		a 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			ganization ▶ \$ and th	ne			
	amount of gaming revenue retained b	y the third party $ hildsymbol{ ho}$ \$					
С	If "Yes," enter name and address of the	ne third party					
	Name •						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilder$ $\$$						
	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				
D.	in the organization's own exempt activ			- (···) -	and (). a	ad Dawt	
Pal		l5c, 16, and 17b, as app	tions required by Part I, line 2b, column licable. Also complete this part to provid				
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-EZ)	201

efile GRAPHIC print - DO NOT PROCESS DLN: 93493131044098 As Filed Data OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** THE BOARD OF DIRECTORS OF 31-0537177 WITTENBERG COLLEGE Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (g) Description of (book, FMV, appraisal, organization if applicable non-cash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

Schedule I (Form 990) 2016

(2) (3) (4) (5)

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

> PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN THE UNITED STATES. THE ORGANIZATION USES STUDENT FINANCIAL AID GUIDELINES TO MONITOR THE USE OF GRANT FUNDS WITTENBERG UNIVERSITY ONLY AWARDS INSTITUTIONAL AND PRIVATELY FUNDED FINANCIAL AID AWARD AS ASSISTANCE FOR STUDENTS BASED ON A CASE-BY-CASE BASIS, BASED ON MERIT, NEED, AND EXTRACURRICULAR ACTIVITIES IN DOING SO, THE UNIVERSITY'S FINANCIAL AID DEPARTMENT ADHERES STRICTLY TO ALL FEDERAL AND STATE REGULATIONS AND IS SUBJECT TO THE COMPLIANCE AND INTERNAL CONTROL REOUIREMENTS OF OMB-A133. IN WHICH THEY FOLLOW ALL APPLICABLE GUIDELINES. THE FINANCIAL AID OFFICE AWARDS GRANTS AND OTHER FORMS OF FINANCIAL ASSISTANCE TO STUDENTS. BASED ON REVIEW OF SELECT DATA AND ACCORDING TO A SPECIFIED METHODOLOGY DATA USED IS MAINTAINED IN EITHER PHYSICAL OR ELECTRONIC FORMAT UNTIL NO LONGER REOUIRED BY RECORD RETENTION GUIDELINES GENERALLY. ALL RECORDS ARE MAINTAINED FOR THE MOST RECENT FISAP REPORTING YEAR.

(6)

PLUS THE THREE YEARS PRIOR

Schedule I (Form 990) 2016

PART I, LINE 2

DLN: 93493131044098 **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

Name of the organization THE BOARD OF DIRECTORS OF

Employer identification number WITTENBERG COLLEGE 31-0537177 Part I Questions Regarding Compensation

			_		Yes	No
La	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	─ First-class or charter travel	Ľ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ.	Health or social club dues or initiation fees			
	Discretionary spending account	Ľ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de	_	1 1 2 21 1	1b	Yes	
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec		,	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all thused by a related organization to establish compens	at appl	y Do not check any boxes for methods			
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Γ.	Compensation survey or study			
	Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
ļ	During the year, did any person listed on Form 990, or a related organization	Part VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro-	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizate	ions m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
;	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
,	For persons listed on Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," d			7		No
3	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in in Part III					NI -
)		e rebutt	able presumption procedure described in Regulations	9		No

FORMER PRESIDENT

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	J	(B) Breakdown of	fW-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (i) 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
1 DR RICHARD E HELTON PRESIDENT (TO 6/30/17)	(i)	196,650	0	21,615	8,784	32,702	259,751	0
	(ii)	0	0	0	0	0	0	0
2 RANDAL J FREEBOURN VP FINANCE	(i)		0	625	9,215	12,313	201,888	0
	(ii)	0	0	0	0	0	0	0
3 MARY JO ZEMBAR INTERIM PROVOST	(i)	450.407	0	1,054	7,383	10,494	169,068	0
	(ii)	0	0	0	0	0	0	0
4 WENDY KOBLER VP FOR UNIVERSITY	(i)	152,595	0	10,924	7,513	5,657	176,689	0
ADVANCEMENT	(ii)	0	0	0	0	0	0	0
5 LAURIE JOYNER	(i)	_	0	275,000	0	0	275,000	0

Part III Supplemental Information											
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information											
Return Reference	Explanation										
·	DR RICHARD HELTON WAS HIRED IN JANUARY 2016 HE RECEIVES PERSONAL USE OF A RESIDENCE, CAR ALLOWANCE AND A CLUB MEMBERSHIP THE CLUB MEMBERSHIP (VALUED AT \$650 ANNUALLY) AND CAR ALLOWANCE (VALUED AT \$12,000 ANNUALLY) ARE INCLUDED IN HIS TAXABLE COMPENSATION REPORTED ON THIS FORM 990 THE PERSONAL USE OF A RESIDENCE IS NOT INCLUDED IN 2016 TAXABLE COMPENSATION BUT IS REPORTED IN COLUMN D AS A NONTAXABLE BENEFIT THE RESIDENCE IS FURNISHED FOR THE CONVENIENCE OF WITTENBERG UNIVERSITY AND THE ANNUAL VALUE OF THE RESIDENCE IS \$18,000 THE VALUE OF UTILITIES, HOUSEKEEPING, SUPPLIES, AND OTHER HOME EXPENSES IS \$14,358, WHICH IS ALSO REPORTED IN COLUMN D AS A NONTAXABLE BENEFIT THE RESIDENCE IS										

Schedule J (Form 990) 2015

AVAILABLE FOR USE TO HOST FACULTY, STAFF, AND STUDENT FUNCTIONS THE PRESIDENT IS REQUIRED TO LIVE IN THE RESIDENCE AS A CONDITION OF EMPLOYMENT AND THE RESIDENCE IS CONTIGUOUS TO WITTENBERG'S CAMPUS PART I, LINE 4A

Schedule J (Form 990) 2015

DURING THE YEAR THERE WAS A SEVERANCE PAYMENT MADE PURSUANT TO A CONFIDENTIAL AGREEMENT ALL AMOUNTS PAID HAVE BEEN PROPERLY REPORTED ON FORM W-2 AND REPORTED IN FORM 990, PART VII. COLUMN D. AND ALSO IN SCHEDULE J. PART II. COLUMN

B(III)

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Schedule (Form 990				Information o										45-0047 1	
(1 01111 330		➤ Complete if the	e organization ans	wered "Yes" to Form , and any additional	990, Part I	[V, line	24a. I	Provide des	scriptions,				201	L O	
Department of the	e Treasury		explanations	Attach to Form 99		I III Pali	. VI.					Op	en to P	ublic	
Internal Revenue :	Service ´	▶Informatio	n about Schedule I	K (Form 990) and its	instruction	s is at <u>v</u>	ww.i	irs.gov/for	<u>m990</u> .	I =1		Ī	nspect	ion	
Name of the orgar THE BOARD OF	DIRECTORS OF									-		tificatio	n numbe	şr	
WITTENBERG C										31-05	37177				
Part I B				1.05.						1					
(a) 1	Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	((†) Descripti	on of purpose	(g) De	feased		On alf of		Pool ncina
													uer		
										Yes	No	Yes	No	Yes	No
A PUBLIC FI	NANCE AUTHORITY	27-3866124	74445FAC8	10-25-2016	43,3	·	PAY C		NDING BONDS, F CREDIT, AND		X		X		X
							CAFII	AL PROJECT							
Part III P	roceeds														
						A		E	3	C				D	
	of bonds retired					32,527	7,723								
	of bonds legally defease														
	ceeds of issue					43,397	7,732								
	oceeds in reserve funds					3,987	7,731								
	ed interest from procee														
	in refunding escrows .														
	costs from proceeds .					1,043	3,651								
8 Credit en	hancement from proce	eds													
	capital expenditures fro														
10 Capital e	xpenditures from proce	eeds				6,882	2,278								
11 Other spe	ent proceeds														
12 Other un	spent proceeds														
13 Year of s	ubstantial completion .				20	016									
					Yes	No	,	Yes	No	Yes	No		Yes		No
14 Were the	bonds issued as part o	of a current refunding	gıssue [?]		×										
15 Were the	bonds issued as part o	of an advance refund	ing issue?			Х									
16 Has the f	inal allocation of proce	eds been made? .			Х										
	organization maintain				Х										
	rivate Business Us								I						
					,	A		E	3	C				D	
					Yes	No	<u> </u>	Yes	No	Yes	No		Yes		No
1 Was the financed	organization a partner by tax-exempt bonds?	ın a partnership, or a	member of an LLC,	which owned property		×									
2 Are there	any lease arrangemer	nts that may result in	private business us			х									
	k Reduction Act Notic				د	t No 50	0193F		<u> </u>		S	chedul	e K (Fo	rm 990	1) 2016

D

D

Schedule K (Form 990) 2016

Nο

Yes

C

C

Nο

Yes

Χ

Χ

Α

No

Х

Χ

Х

Х

Χ

Yes

Χ

0 %

0 %

0 %

В

Nο

Yes

Х

Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government

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)

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

organization, or a state or local government

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?

Arbitrage

Part IV

c

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

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 Schedule K (Form 990) 2016

Arbitrage (Continued)

the GIC satisfied?

requirements of section 148? . . .

applicable regulations?

Return Reference

SCHEDULE K, PART II, LINE 3

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

LEARNINGS

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

Part IV

period?

Part V

Part VI

-	(GIC) ²	×		
ь	Name of provider			

Yes

Х

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

Explanation TOTAL PROCEEDS ON LINE 3 ARE NOT IDENTICAL TO THE ISSUE PRICE LISTED IN PART I DUE TO INVESTMENT

Х

No

No

В

Yes

Yes

No

No

Page 3

No

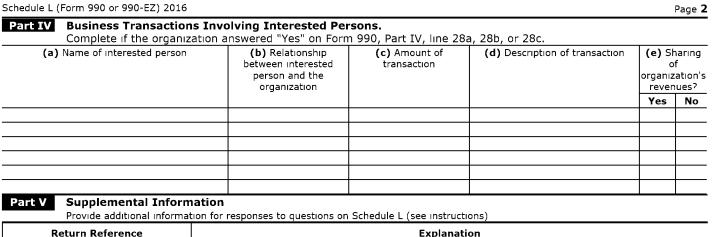
No

D

Yes

Yes

Name of the organization THE BOARD OF DIRECTORS OF WITHEREARS COLLEGE Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization organization (c) Description of transaction (d) Correct Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship (c) Purpose of loan To From T	efile G	RAPHIC pri	nt - DO NO	OT PROCES	S A	s Fil	ed Data -					DL	.N: 93	4931	310	44098
Complete if the organization of tax, if any, on line 2, above, reimbursed by the organization of tax, if any on line 2, above, reimbursed by the organization of tax, if any on line 2, above, reimbursed by the organization of tox incurred by organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization of loan or from 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization of loan or from 990-EZ, Part V, line 26, or if the organization of loan organization or form 990-EZ, Part V, line 26, or if the organization of loan organization or form 990-EZ, Part V, line 26, or if the organization organiza				Tran						าร			10	MB No	1545	5-0047
Part I Loans to and/or From Interested Persons Complete if the organization answered "Yes" on Form 990-E2, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization answered "Yes" on Form 990-E2, part V, line 38a, or Form 990, Part IV, line 25, or if the organization answered "Yes" on Form 990-E2, part V, line 38a, or Form 990, Part IV, line 25, or if the organization answered "Yes" on Form 990-E2, part V, line 38a, or Form 990, Part IV, line 25, or if the organization answered "Yes" on Form 990-E2, part V, line 38a, or Form 990, Part IV, line 26, or if the organization of loan organization? Part II Loans to and/or From Interested Persons (a) Name of line 49b organization answered "Yes" on Form 990-E2, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization organization? Part II Loans to and/or From Interested Persons (b) Relationship (c) Purpose (d) Loan to or from the organization? Part II Loans to and/or From Interested Persons (b) Relationship (c) Purpose (d) Loan to or from the organization? Part II Loans to and/or From Interested Persons (b) Relationship (c) Purpose (d) Loan to or from the organization? Part II Loans to and/or From Interested Persons (b) Relationship (c) Purpose (d) Loan to or from the organization? Part II Loans to and/or From Interested Persons (b) Relationship (c) Purpose (d) Loan to or from the organization? Part II Coans to and from the organization answered "Yes" on Form 990, Part IV, line 25, or if the organization? Part II Coans to and from the organization answered "Yes" on Form 990, Part IV, line 27. Part II Coans to and from the organization answered "Yes" on Form 990, Part IV, line 27. Part II Coans to and from the organization answered "Yes" on Form 990, Part IV, line 27. Part II Coans to and from the organization answered "Yes" on Form 990, Part IV, line 27.				"Yes" on Fo	orm 990	0, Pai	t IV, lines 25	ia, 25b, 26, i	27, 28a, 28b,	or 28	Зс,			26	11	6
Name of the organization Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization orga					► A	Attack	to Form 990	or Form 99	0-EZ.							
Remote of the organization Remote of DRIECTORS of PORTECTORS OF WITTENSERG COLLEGE Struck Stru			▶Int	ormation ab	out Sci) and its inst	ructio	ns is	at	(
THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization of transaction (c) Description of transaction organization (d) Correct Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. 5 S Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization principal amount on Form 990, Part X, line 5, 6, or 22 (a) Name of line organization of loan To From To From To From To From To From To Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (d) Type of assistance (e) Purpose of assistance (e) Purpose of assistance (b) Relationship between interested person and or from 990, Part IV, line 27. (d) Type of assistance (e) Purpose of assistance (f) Type of assistance (g) Purpose of assistance (h) Type of assistance (e) Purpose of assistance (f) Amount of assistance (g) Type of assistance (g) Purpose of assistance			<u>I</u> tion							E	mplo	yer ide	entifica			
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Ag58 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization				<u>'</u>		` _		rganization	<u> </u>		tr	ansactı	on			No
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Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of interested person (b) Relationship with organization of loan (c) Purpose of assistance (c) Purpose of loan (d) Loan to or from the organization? (b) Relationship (c) Purpose of loan (d) Loan to or from the organization? (c) Purpose of loan (d) Loan to or from the organization? (d) Loan to or from the organization? (e) Original due default? Approved by board or committee? Yes No Ye	Part II	Loans	o and/or	From Inter	ested	Per	sons.									
(a) Name of interested person with organization (b) Relationship with organization (c) Purpose of loan (d) Loan to or from the organization? (e) Original amount (f) Balance due due due due due default? (h) Approved by board or committee? To From Yes No	I GIC 11	Complete	e if the organ	ization answe	ered "Ye	es" on	Form 990-EZ,	Part V, line 3	88a, or Form 9	90, Pa	rt IV,	line 26	or if	the org	janiza	ation
Interested person with organization of loan organization? principal amount due default? Approved by board or committee? To From Yes No	(a) Na	· ·						(a)0mmn	(f)Palance	1.0	\ Tm		L \	,	: >\^/	tton
To From Yes No Y								1					•		•	
To From Yes No Y								amount						d or ´		
Total Total					To		From	1		Yes	No			Yes No		No
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance																
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organization	(a) Name	e of interested		erested perso	on and t		(c) Amount o	of assistance	(d) Type	of ass	ıstano	:e	(e) Pu	rpose o	of ass	istance
(1) 57,817 SCHOLARSHIPS TUITION BENEFITS	(1)			organiza	uon			57,817	SCHOLARSHI	:PS		Т	UITION	BENE	ITS	
						$\overline{}$										
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50056A Schedule L (Form 990 or 990-EZ.	Eor Dana	uork Dodusti-	n Act Nation	can the Tret	ctions f	or East	m 000 c= 000 F	7	t No 500564					000	. 000	E71 224



Schedule I (Form 990 or 990-FZ) 2016

Part V

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493131044098 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 Name of the organization Employer identification number THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 Part I Types of Property (b) (d) (a) (c) Check If Number of contributions or Noncash contribution Method of determining noncash contribution amounts applicable items contributed amounts reported on Form 990, Part VIII, line Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household aoods Cars and other vehicles Boats and planes . . 8 Intellectual property . . 2,657,580 FMV Securities-Publicly traded . Χ 133 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial Real estate—Other . . 17 Collectibles **19** Food inventory . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . . 23 Scientific specimens . . Archeological artifacts . . 13,900 COST 25 Other ▶ (GRAND PIANO) 26 Other ▶ (9,793 COST GOLF OUTING SILENT AUCTION ITEMS Х 600 COST Other ► (OTHER MISCELLANEOUS ITEMS 28 Other ▶ (_ Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a No **b** If "Yes," describe the arrangement in Part II 31 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 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. Cat No 51227J Schedule M (Form 990) (2016)

Schedule M (Form 990) (2016)	Page 2
Part II Supplemental Info Provide the informat	ormation. tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
I, column (b), the no this part for any add	umber of contributions, the number of items received, or a combination of both. Also complete ditional information.
Return Reference	Explanation
	THE ORGANIZATION USES SECURITY TRUST TO SELL STOCK GIFTS ALSO, THE ORGANIZATION ENGAGES WITH ROYALL TO DEVELOP AND MAIL PROMOTIONAL SOLICITATIONS, HOWEVER, ROYALL DOES NOT SOLICIT ON BEHALF OF THE ORGANIZATION
<u> </u>	Schedule M (Form 990) (2016)

efile GRAPH	93493131044098								
SCHEDIII	E 0	Sunnlement	al Informatio	on to Form 990 or 9	190-F7	OMB No 1545-0047			
SCHEDULE O (Form 990 or 990-EZ) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.						2016 Open to Public Inspection			
Internal Revenue Se Name of the org THE BOARD OF DI WITTENBERG COL	fication number								
990 Schedul	e O, Supp	plemental Informatio	n						
Return Reference				Explanation					
FORM 990, PART VI, SECTION B,	T VI, LIC ACCOUNTING FIRM, THE ORGANIZATION'S CFO AND CONTROLLER, AND THE AUDIT COMMITTEE WILL D								

LINE 11B

Return Explanation
Reference

FORM 990,	ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO ANNUALLY COMPLETE THE CONFLICT OF INTE
PART VI,	REST QUESTIONNAIRE REPORTED POTENTIAL CONFLICTS ARE DISCLOSED TO THE AUDIT COMMITTEE AND
SECTION B,	DISCUSSED IF A CONFLICT IS FOUND, THE MEMBER WITH THE CONFLICT ABSTAINS FROM VOTING ON TH
LINE 12C	F RELATED ISSUE

Return Explanation
Reference

PRESIDENT, OFFICER, & KEY EMPLOYEE COMPENSATION IS REVIEWED USING COMPENSATION SURVEYS AND COMPENSATION DATA FROM PEER INSTITUTIONS. THE REVIEWS WERE LAST CONDUCTED IN 2016. THE EX.

SECTION B,
LINE 15
WHEN DR. HELTON WAS HIRED, AND THE PRESIDENT REVIEWED OFFICER AND KEY EMPLOYEE COMPENSATIO. N IN 2016 AND AS NEW EMPLOYEES JOINED THE ORGANIZATION. THE BOARD ANNUALLY REVIEWS THE PRESIDENT'S PERFORMANCE IN CLOSED SESSION.

Return Explanation
Reference

FORM 990, THE ORGANIZATION DOES NOT MAKE DOCUMENTS AVAILABLE TO THE PUBLIC
PART VI,
SECTION C,
LINE 19

Return Explanation

FORM 990, CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 337,656 PARTNERSHIP INCOME FROM K-1S NOT INC LUDED ON FINANCIAL STATEMENTS -91,892 LOSS ON EXTINGUISHMENT OF DEBT -280,833 LOSS ON UN LINE 9 COLLECTIBLE PLEDGES -2.677.500

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493131044098 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity **(b)** Primary activity (c) Legal domicile (state (d) (e) Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	s Complete if the organ	nization answered "	Yes" on Form 990,	Part IV, line 34 be	cause it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity			(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) cor enti	512(b) introlled ity?
(1)WEST WARD STREET DEVELOPMENT CORPORATION 200 WEST WARD STREET SPRINGFIELD, OH 45501 82-3768946	SUPPORT WITTENBERG UNIVERSITY'S LONG-TERM FACILITY NEEDS	ОН	501(C)(3)	LINE 12B, II	N/A	Yes	No No
							_
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat No 50135	iY		Schedule R (Form	990) 20	016

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(H Disprop alloca	n) rtionate tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging ner?	(k) Percentag ownershi
			-					Yes	No		Yes	No	
			1 1		1		1	l			1	1 1	
IV Identification of Related Organia because it had one or more related						zation ansv	vered "Yes	" on Fo	orm 9	90, Part IV,	line	34	
		a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e)	vered "Yes (f) Share of total income	Share	(g) of end- year assets	(1	ı) ntage	Se (1	(i) ection 512 3) control entity?
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	(c) .egal	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	control
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related ditional Data Table (a) Name, address, and EIN of	organizations treated as	a corporati	on or trus (c) Legal Imicile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?

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		Yes	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?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
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

J	Lease of facilities, equipment, or other assets to related organization(s)	-'	+	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	c .	No
I	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)	1n	n	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1 n	a T	No
0	Sharing of paid employees with related organization(s)	10	,	No
р	Reimbursement paid to related organization(s) for expenses	1 p	,—	No
q	Reimbursement paid by related organization(s) for expenses	1 q	1	No
r	Other transfer of cash or property to related organization(s)	1r	-	No
		100	. —	No

|1s | 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Name of related organization (b) Transaction type (a-s) (d) Method of determining amount involved (c) Amount involved

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

1													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		<u></u>	(k) Percentage ownership
			514)	Yes	No	!		Yes	No		Yes	No	
										Schedul	e R (Form	1 990	D) 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 (1) 1929 FIELDHOUSE LLC

250 BILL EDWARDS DRIVE

(1) CHARITABLE REMAINDER TRUST (1)

(2) CHARITABLE REMAINDER TRUST (1)

(3) CHARITABLE REMAINDER TRUSTS (2)

(4) CHARITABLE REMAINDER TRUST (1)

(5) CHARITABLE REMAINDER TRUSTS (4)

(6) CHARITABLE REMAINDER TRUSTS (2)

(7) CHARITABLE REMAINDER TRUST (1)

SPRINGFIELD, OH 45501

47-4525153

Software ID: **Software Version:**

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Name: THE BOARD OF DIRECTORS OF

	INan	ne: INE BOARD	OF DIRECTORS OF	Г						
WITTENBERG COLLEGE										
Form 990, Schedule R, Part IV - Ident	ification of Related O	rganizations Ta	xable as a Corpo	ration or Trust						
(5)	/6\	(0)	(4)	l (a)	/£\	/ (~)	(6)			

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	l		
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-of-	Percentage	l		
related organization		domicile	entity	(C corp, S corp,	ıncome	year	ownership	l		
		(state or foreign		or trust)		assets		L		

N/A

N/A

N/A

N/A

N/A

IN/A

N/A

IN/A

(i) Section 512 (b)(13)controlled

entity? Yes

100 000 %

No

No

No

No

No

No

No

No

No

ili 990, Scheddie R, Fait IV - Idelii	inication of Aciatea O	rgamzadons ra	kabic as a corpo	iation of flust	
(a)	(b)	(c)	(d)	(e)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share
related organization		domicile	entity	(C corp, S corp,	ın
		(state or foreign		or trust)	