DLN: 93493105003130 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 06-01-2018 , and ending 05-31-2019 D Employer identification number C Name of organization RINGLING COLLEGE OF ART AND DESIGN INC B Check if applicable ☐ Address change 59-0637903 \square Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 2700 NORTH TAMIAMI TRAIL ☐ Amended return ☐ Application pending (941) 351-5100 City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL $\,$ 34234 $\,$ G Gross receipts \$ 111,551,735 Name and address of principal officer H(a) Is this a group return for LARRY R THOMPSON □Yes **☑**No subordinates? 2700 NORTH TAMIAMI TRAIL H(b) Are all subordinates SARASOTA, FL 34234 ☐ Yes ☐No included? I Tax-exempt status □ 527 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW RINGLING EDU **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleL Year of formation 1931 M State of legal domicile FL Summary 1 Briefly describe the organization's mission or most significant activities RINGLING COLLEGE OF ART AND DESIGN IS A SMALL, PRIVATE COLLEGE OFFERING PROGRAMS LEADING TO DEGREES THAT PREPARE STUDENTS TO BE DISCERNING VISUAL THINKERS AND ETHICAL PRACTITIONERS IN THEIR CHOSEN AREA OF ART AND DESIGN RINGLING'S CURRICULUM BALANCES THE TEACHING OF TECHNICAL KNOWLEDGE AND SKILLS WITH THE DEVELOPMENT OF CRITICAL, CONCEPTUAL, AND CREATIVE ABILITIES AND SUPPORTS COURSES THAT PROVIDE HISTORICAL, MULTICULTURAL, GLOBAL, AND FUTURE PERSPECTIVES IN ADDITION TO ITS DEGREE PROGRAM, RINGLING COLLEGE OFFERS COURSES, LECTURES, EXHIBITIONS, AND OTHER Activities & Governance ART-RELATED SERVICES TO THE LOCAL AND REGIONAL COMMUNITY THROUGH ITS GALLERY, LIBRARY, CONTINUING EDUCATION, AND COMMUNITY SERVICE PROGRAMS Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 40 4 38 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 1,039 Total number of volunteers (estimate if necessary) . . . 6 395 7a -94,226 Total unrelated business revenue from Part VIII, column (C), line 12 ${f b}$ Net unrelated business taxable income from Form 990-T, line 34 -95,076 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 18,408,214 16,874,251 9 Program service revenue (Part VIII, line 2g) . 77,944,559 86,470,558 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,501,790 2,642,265 -132,687 -216,284 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 105,770,790 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 97,721,876 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 15,982,572 18,117,856 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 31,778,080 34,513,549 16a Professional fundraising fees (Part IX, column (A), line 11e) . 140,609 81,656 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶2,812,532 35,817,459 38,190,212 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 83,718,720 90,903,273 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 14,003,156 14,867,517 19 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) . 325,120,576 333,137,303 21 Total liabilities (Part X, line 26) . 157,006,106 151,253,041 Net assets or fund balances Subtract line 21 from line 20 . 168,114,470 181,884,262 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-04-14 Signature of officer Sign Here ARRY R THOMPSON PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Date Check \square if P00748038 Paid self-employed Firm's EIN ► 56-0574444 Preparer Use Only Firm's address ► 401 EAST JACKSON ST SUITE 1200 Phone no (813) 251-1010 TAMPA, FL 33602 May the IRS discuss this return with the preparer shown above? (see instructions) . ✓ Yes □ No For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2018)

Form	990 (2018)					Page 2						
Pa	rt III Statemen	nt of Program Servi	ce Accomplis	hments								
	——— Check if Sch	nedule O contains a resp	onse or note to	any line in this Part III		🗹						
1	Briefly describe the	organization's mission		·								
SEE :	SCHEDULE O											
_												
2	Did the organizatio											
	the prior Form 990	or 990-EZ?				🗌 Yes 🗹 No						
	•	hese new services on Sc										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	services?	services?										
	If "Yes," describe th	hese changes on Schedu	ıle O									
4	Section 501(c)(3) a		ons are required	I to report the amount	largest program services, as mea of grants and allocations to others							
	(Code) (Expenses \$	66,300,263	including grants of \$	17,764,679) (Revenue \$	70,775,527)						
	See Additional Data		· 									
4b	(Code) (Expenses \$	11,650,280	ıncludıng grants of \$	274,564) (Revenue \$	13,757,045)						
	See Additional Data											
4c	(Code) (Expenses \$	2,995,532	ıncludıng grants of \$	78,613) (Revenue \$	1,937,986)						
	See Additional Data											
4d	Other program ser	vices (Describe in Sched	lule O)									
	(Expenses \$	inc	luding grants of	\$) (Revenue \$)						
4e	Total program se	rvice expenses >	80,946,0	75								
						Form 990 (2018)						

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Vac 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 Yes 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? 5 No 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? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No 7 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? Yes 8 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 Yes 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 👺 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 No 11d ın Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? **12**b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Yes 14a Did the organization maintain an office, employees, or agents outside of the United States? . 14a 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 14b Yes valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV 🖠 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Yes 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Yes Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, Yes column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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Par	Checklist of Required Schedules (continued)			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes Yes	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		No
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	• ;		
1-	Enter the number reported in Rev 3 of Form 1006 Enter -0- if not applicable 1.15 1.2.3.10		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2,319 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
U	Enter the number of Forms W-ZO included in line to Enter -0- if not applicable ID U			

1c

d If "Yes," indicate the number of Forms 8282 filed during the year 7d | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e

No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter

11a

13b

13c

14a

14b

15

No

No

Form **990** (2018)

b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a

a Gross income from members or shareholders .

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13a Enter the amount of reserves the organization is required to maintain by the states in

Ollin	990 (2018)						Page o				
Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schec Check if Schedule O contains a response or note to any line in this Part VI	dule O	See instructi	ons	·		lines				
Section A. Governing Body and Management											
						Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		40							
	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		38							
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?				2		No				
3	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? .										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .										
5	Did the organization become aware during the year of a significant diversion of the organization	nizatio	n's assets?	. [5		No				
6	Did the organization have members or stockholders?			[6		No				

Ь	Enter the number of voting members included in line 1a, above, who are independent	4.	20				
		1b	38				
2	Did any officer, director, trustee, or key employee have a family relationship or a busines officer, director, trustee, or key employee?	ss rela • •	tionship with any other	2		No	
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other parts.			3		No	
4	Did the organization make any significant changes to its governing documents since the	prior F	form 990 was filed? .	4		No	
5	Did the organization become aware during the year of a significant diversion of the organ	nizatioi	n's assets?	5		No	
6	Did the organization have members or stockholders?			6		No	
7a	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?						
b	Are any governance decisions of the organization reserved to (or subject to approval by) persons other than the governing body?		pers, stockholders, or	7 b		No	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	a The governing body?						
Ь	Each committee with authority to act on behalf of the governing body?			8 b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who organization's mailing address? If "Yes," provide the names and addresses in Schedule C			9		No	
Se	ction B. Policies (This Section B requests information about policies not requ	ıred b	y the Internal Revenue	. Code	∍.)		
					Yes	No	
10a	Did the organization have local chapters, branches, or affiliates 7			10a		No	
b	If "Yes," did the organization have written policies and procedures governing the activitie and branches to ensure their operations are consistent with the organization's exempt purely $\frac{1}{2}$			10b			
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b							
12a	12a Did the organization have a written conflict of interest policy? If "No," go to line 13						
_							

Ь	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?	8b	Yes							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No						
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		No						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No						
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes							
14	Did the organization have a written document retention and destruction policy?	14	Yes							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Yes							
b	Other officers or key employees of the organization	15b	Yes							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			'						

16a Nο in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt 16b List the States with which a copy of this Form 990 is required to be filed▶ Section 6104 requires an organization to make its Form 1023 (or 1024-A 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) 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

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation Section C. Disclosure State the name, address, and telephone number of the person who possesses the organization's books and records MONICA WAID 2700 N TAMIAMI TRAIL SARASOTA, FL 34234 (941) 359-7514

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

1040 HULL ST STE 100 BALTIMORE, MD 21230

compensation from the organization ▶ 21

(B)

Page 8

	(A) Name and Title	Average hours per week (list any hours for related	than o	one b	ox, i an of tor/t	ot che unles fficer trust		son	compe fror organiz	ortable Reportable compensation from related azation (W-29-MISC)			w-	Estimated amount of other compensation from the organization and		
		organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2,100	J 11130	-)	2,1033 11130		relat organiza	ed	
See /	Addıtıonal Data Table															
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				-	\vdash	\vdash	<u> </u>	\vdash					-			
	Sub-Total						 						T			
	Total (add lines 1b and 1c)	•					▶		2,2	253,168			0		236,453	
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rece	eived moi	re than	\$10	00,000				
3	Did the organization list any former line 1a? If "Yes," complete Schedule												3	Yes	No	
4	For any individual listed on line 1a, is organization and related organization	s the sum of repons	ortable (comp	ensa	ation	n and c	other	compens	sation 1	from				No	
5	Did any person listed on line 1a recei	ive or accrue cor	 mpensal	tion f	rom	• any	unrela	· •	organizat	tion or	ındı	vidual for	4	Yes		
	services rendered to the organization		lete Sch	iedule	: J fo	r su	ıch per	rson		• •	•		5		No	
Se	ection B. Independent Contract Complete this table for your five high		d inden	ender	nt cc	ontr:	actors	that	received	more t	han	\$100,000 of cor	mper	nsation		
	from the organization Report compe	nsation for the c										ı's tax year	pc.		<u> </u>	
		(A) and business addre	ess									(B) option of services		Comper	nsation	
	S A SMITH CONSTRUCTION LAKEWOOD RANCH BLVD N									CONSTR	RUCT	ION SERVICES		23	,450,447	
SARAS	SOTA, FL 34240 WESSEL CONSTRUCTION CORP									CONSTR	RUCT	ION SERVICES		3	,318,766	
	FRUITVILLE RD 303 SOTA, FL 34240															
	TWELLS DINING SERVICES									DINING	SER	VICES		2	,595,960	
CHAR	YORKMONT RD LOTTE, NC 28217															
	ODIAL MAINTENANCE INC TOWER LANE STE A-7					_				CUSTO	DIAL	SERVICES		1	,321,194	
SARAS	SOTA, FL 34240 SSAINTGROSS INCORPORATED									DESIGN	SER	VICES		1	,001,259	
	TO THE STORE STATE OF THE STATE									2231014	. JLIV			1 .	,	

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

(C)

(D)

(E)

Part	VIII			resp	onse or note to any	line in th	nis Part VIII				🗆
						(,	A) revenue	Rela exe fun	B) ted or empt ction enue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
0	1 a	a Federated campaig	ns	1a			I	100	cride		312 314
ants	ļ	b Membership dues	[1 b	14,605						
و در	•	c Fundraising events		1 c	482,651						
ffs, ≓A	•	d Related organizatio	ons	1 d							
<u>ت</u> ق	•	e Government grants (co	ontributions)	1e	399,911						
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, and similar amounts no above	ot included	1f	15,977,084						
ت <u>ن</u> 0 تت	'	g Noncash contribution in lines 1a - 1f \$	ons included	1,	230,914						
ತಿ ಕ		h Total. Add lines 1a	-1f		•	:	16,874,251				
ı,					Business	Code					
PL		TUITION & FEES				900099		75,527	70,775		
₹ •	Ь	AUXILIARY SERVICES				900099		57,045	13,757		
Service Revenue	С	COMMUNITY OUTREACH	1			900099	1,93	37,986	1,937	7,986	
Ser	d	l 									
an	е	. ————		-							
Program	f	All other program se	rvice revenue		06.4	170 550					
Δ.	g	Total. Add lines 2a-2	2f		▶	170,558					
		Investment income (ii similar amounts)		nds,	interest, and other		2,098,807				2,098,807
		Income from investme		· ipt b	ond proceeds						, ,
			(ı) Real		(II) Personal						
	6a	Gross rents	45	3,504							
	ь	Less rental expenses		2,881	+	1					
		5									
	C	Rental income or (loss)	4:	5,623							
	d	Net rental income o	r (loss)			1	45,623				45,623
			(ı) Securitie	s	(II) Other						
	7a	Gross amount from sales of assets other than inventory	5,549	9,232							
	b	Less cost or other basis and sales expenses	4,561	1,721	444,053	3					
		Gain or (loss)		7,511	-444,053	3					
		Net gain or (loss)			•	ļ	543,458				543,458
Other Revenue	8a	Gross income from for (not including \$ contributions reported See Part IV, line 18	482,651 of ed on line 1c)		408,277						
Re	ь	Less direct expense	s	b	709,298	1					
er	C	: Net income or (loss)	from fundraisir	ıg ev	vents		-301,021			-94,226	-206,795
= 0	9a	Gross income from g See Part IV, line 19		5							
		,		а	4,655						
		Less direct expense		b]					
		Net income or (loss)		ctıvıt	ties >	,	-2,902				-2,902
	10a	aGross sales of invent returns and allowand		a	97,451						
	ь	Less cost of goods s	sold	b	55,435	1					
	c	Net income or (loss)	from sales of ir	ıven	tory ►		42,016				42,016
		Miscellaneous	Revenue		Business Code						
	11	.a									
	_										
	b	•									
						1					
	C										
		All other revenue				-					
		Total. Add lines 11a									
	12	! Total revenue. See	Instructions .		· · · · •		105,770,790		86,470,558	-94,226	2,520,207
											Form 990 (2018)

22 Depreciation, depletion, and amortization .

expenses on Schedule O) a STUDENT RELATED EXPENSE

e All other expenses

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 .

b c d

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	109,361	109,361		
Grants and other assistance to domestic individuals. See Part IV, line 22.	17,988,762	17,988,762		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	19,733	19,733		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,474,325		1,474,325	
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	25,293,582	22,274,694	1,695,391	1,323,497
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	841,322	737,728	52,889	50,705
9 Other employee benefits	5,029,679	4,213,105	623,924	192,650
10 Payroll taxes	1,874,641	1,594,209	189,252	91,180
11 Fees for services (non-employees)				
a Management				
b Legal	85,987		85,987	
c Accounting	102,420		102,420	
d Lobbying	38,400		38,400	
e Professional fundraising services See Part IV, line 17	81,656			81,656
f Investment management fees	102,402		102,402	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,988,739	8,178,769	282,552	527,418
12 Advertising and promotion	1,046,275	746,325	178,574	121,376
13 Office expenses	2,548,253	1,730,765	691,890	125,598
14 Information technology	1,511,578	1,324,984	123,047	63,547
15 Royalties				
16 Occupancy	4,131,797	3,886,866	195,053	49,878
17 Travel	886,127	821,563	28,379	36,185
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	450,327	322,364	83,016	44,947
20 Interest	4,510,114	3,941,819	568,295	
21 Payments to affiliates				

12,566,947

633,136

406,854

180,856

90,903,273

11,934,760

621,456

406,854

91,958

80,946,075

532,608

8,742

87,520

7,144,666

99,579

2,938

1,378

2,812,532

Form **990** (2018)

Forn	1 990	(2018)					Page 11
P	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments .		[64,717,960	2	28,049,741
	3	Pledges and grants receivable, net		. [15,283,738	3	16,787,168
	4	Accounts receivable, net		[127,773	4	228,804
Assets	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L	nployees Complete		5		
		section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	(c)(3)(B), and f section 501(c)(9) structions) Complete		6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use		8			
	9	Prepaid expenses and deferred charges			2,024,245	9	2,485,005
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	337,360,427			
	ь	Less accumulated depreciation	10 b	112,092,133	183,069,302	10 c	225,268,294
	11	Investments—publicly traded securities .		53,319,461	11	52,191,773	
	12	Investments—other securities See Part IV, line	11 .		16,210	12	14,733
	13	Investments—program-related See Part IV, line	11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			6,561,887	15	8,111,785
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	325,120,576	16	333,137,303
	17	Accounts payable and accrued expenses			16,447,179	17	14,047,388
	18	Grants payable				18	
	19	Deferred revenue			1,110,929	19	1,319,260
	20	Tax-exempt bond liabilities			125,645,858	20	122,839,293
Š	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D	726,995	21	435,830
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee					
<u> </u>		persons Complete Part II of Schedule L $$.				22	
	23	Secured mortgages and notes payable to unrela	ited thi	rd parties	6,500,000	23	6,157,895
	24	Unsecured notes and loans payable to unrelated	d third p	parties		24	
	25	Other liabilities (including federal income tax, p. and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		to related third parties,	6,575,145	25	6,453,375
	26	Total liabilities. Add lines 17 through 25			157,006,106	26	151,253,041
_ <		Organizations that follow SEAS 117 (ASC 9	58) cl	ack here > V and			

		Other assets See Fair IV, inte 11	1 3,001,007]
	16	Total assets.Add lines 1 through 15 (must equal line 34)	325,120,576	16	333,
	17	Accounts payable and accrued expenses	16,447,179	17	14,
	18	Grants payable		18	
	19	Deferred revenue	1,110,929	19	1,
	20	Tax-exempt bond liabilities	125,645,858	20	122,
ý	21	Escrow or custodial account liability Complete Part IV of Schedule D	726,995	21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
iab		persons Complete Part II of Schedule L		22	
	22	Secured mortgages and notes navable to unrelated third parties	6 500 000	22	6

complete lines 27 through 29, and lines 33 and 34. 96,886,559 Unrestricted net assets 27

109,456,223 27 28 Temporarily restricted net assets . 44,586,058 28

Net Assets or Fund Balance 43,483,549 28,944,490 Permanently restricted net assets 26,641,853 29 29

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

30

31

32

33

34

168,114,470

325,120,576

181,884,262

333,137,303 Form **990** (2018)

Capital stock or trust principal, or current funds

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

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

30

31

32

33

34

3a

3b

Yes

Yes (2018)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 59-0637903

Name: RINGLING COLLEGE OF ART AND DESIGN INC.

Form 990 (2018)

Form 990, Part III, Line 4a:

TUITION AND FEES RINGLING COLLEGE OF ART AND DESIGN PROVIDES INSTRUCTION IN VISUAL ARTS EDUCATION TO OVER 1.400 STUDENTS IN FULLY ACCREDITED FOUR-YEAR DEGREE PROGRAMS LEADING TO BEA AND BA DEGREES

Form 990, Part III, Line 4b: AUXILIARY RINGLING COLLEGE OF ART AND DESIGN OPERATES VARIOUS AUXILIARY ENTERPRISES INCLUDING DINING SERVICES, HOUSING, AND BOOKSTORE SERVICES IN SUPPORT OF A RESIDENTIAL COMMUNITY WHICH SUPPORTS STUDENT DEVELOPMENT AND FOR THE CONVENIENCE OF ITS STUDENTS, FACULTY AND STAFF

Form 990, Part III, Line 4c: COMMUNITY OUTREACH RINGLING COLLEGE OF ART AND DESIGN PROVIDES VISUAL AND LIBERAL ARTS INSTRUCTION FOR THE COMMUNITY THROUGH VARIOUS PROGRAMS ON A NON-CREDIT BASIS

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation

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

	any hours	and	. a dır	ectc	r/trد	rustee)) !	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	101	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEAN MARTIN CHAIR	1 00	×		x				0	0	0	
GEORGE MILES VICE CHAIR	1 00	X		х				0	0	0	
MICHAEL KLEIN	1 00	×		х				0	0	0	
TREASURER	<u> </u>	—— ′	Ш'	⊥_′	\perp	Щ'	\bigsqcup'				
ROSEMARY OBERNDORE	1 00	1 '	1 '	1 '		1 '	['		1		

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VICE CHAIR
MICHAEL KLEIN
TREASURER
ROSEMARY OBERNDORF
SECRETARY

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RAVINDRANATH AKHOURY

TRUSTEE

TRUSTEE

TRUSTEE

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TRUSTEE

ALI M BAHAJ

ROBERT BARTNER

RICHARD BASCH

ALEX BEAVERS JR

ELAINE CROUSE

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

any hours

and a director/trustee)

organization

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organizations

from the

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

	ally flours				'	Organization	Organizacions	arganization and			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MAURICE CUNNIFFE TRUSTEE	1 00	×						0	0	0	
ARIANE DART TRUSTEE	1 00	х						0	0	0	
LINDA DICKINSON TRUSTEE	1 00	х						0	0	0	
DEAN EISNER TRUSTEE	1 00	×						0	0	0	
1AMES ERICSON	1 00										

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DEAN EISNER
TRUSTEE
JAMES ERICSON
TRUSTEE

HERMAN FRANKEL

LARRY GARBERDING

STEVE HUTCHINSON

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TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

WILLIAM ISAAC

TERI HANSEN

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) from the

organization

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organizations

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

'	1 611, 110413				· 1	(14, 3,4,000		monn and		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	101	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
EDWARD H JENNINGS TRUSTEE	1 00	×						0	0	0
CHERYL LOEFFLER TRUSTEE	1 00	×						0	0	0
FLORA MAJOR TRUSTEE	1 00							o	0	0
RUSSELL MANK TRUSTEE	1 00	X						0	0	0

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RUSSELL MANK
TRUSTEE
NANCY MARKLE
TRUSTEE

FRANK MARTUCCI

MARY ANN MEYER

JONATHAN MITCHELL

JOEL MORGANROTH

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TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

KARL NEWKIRK

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation

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

	any hours	and	a dır	ecto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ISABEL NORTON TRUSTEE	1 00	×						0	0	0
BRANDON OLDENBURG TRUSTEE	1 00	×						0	0	0
SUSAN PALMER TRUSTEE	1 00	х						0	0	0

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TROSTEL			
BRANDON OLDENBURG	1 00	X	
TRUSTEE		^	
SUSAN PALMER	1 00	х	
TRUSTEE		^	
CAROL PHILLIPS	1 00		
		X	1

and Independent Contractors

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

SAMUEL SAMELSON

JANET B SCHMIDT

WILLIE M STANFIELD

STEVEN B STEIN

DALE STROHL

PETER WEILL

.....

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

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

and Independent Contractors

DR MAHMOUD PEGAH

VP FOR ADVANCEMENT

STACEY CORLEY

DR TAMMY WALSH

JEFFREY SCHWARTZ

DIRECTOR OF INSTITUTIONAL TECHNOLOGY

ASSOCIATE VP FOR ACADEMIC AFFAIRS

VP FOR STUDENT LIFE/DEAN OF STUDENTS

	any hours	l a dır	recto	or/tr	ustee)	organization (W- 2/1099-	organizations (W- 2/1099- MISC)	from the organization and related organizations
	for related organizations below dotted line)	Institutional Trustee	10	key employee	Highest compensated employee	Former	MISC)		
DR LARRY R THOMPSON PRESIDENT	40 00		х				669,114	0	44,644
DR TRACY A WAGNER VP FOR FINANCE & ADMINISTRATION	40 00		x				225,702	0	32,855
CHRISTINE C DEGEORGE VP FOR HUMAN & ORGANIZATIONAL DEV	40 00			×			211,485	0	27,903
DR PETER A MCALLISTER	40 00								

21,653

15,882

20,427

27,843

18,889

26,357

210,699

197,842

174,931

152,010

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CHRISTINE C DEGEORGE VP FOR HUMAN & ORGANIZATIONAL DEV	40 00		×		211,485	
DR PETER A MCALLISTER VP FOR ACADEMIC AFFAIRS	40 00		×		193,573	
DAVID H JACKSON	40 00			×	162,732	
ASSOCIATE VP FOR ACADEMIC AFFAIRS						

40 00

40 00

40 00

40 00

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SCHEDU Form 990 (90EZ)	or	Con	Public on plete if the o	a section	2018 Open to Public					
epartment of the ternal Revenue ame of the	Service	ion		<u>www.sigov</u> , rorms	7 <u>77</u> 101 the late			Inspection Employer identification number		
INGLING COLL	EGE OF ART	AND DESIGN I	NC				59-0637903			
				us (All organization						
_		•		e it is (For lines 1 thro	•	,				
ш	·		•	ssociation of churches			(A)(i).			
	school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))				
	hospital o	r a cooperati	ve hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).			
□ r	iame, city,	and state	•	ed in conjunction with	·					
	-	tion operated iv). (Comple		t of a college or univer	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170		
		- ' '	•	governmental unit de	scribed in secti o	on 170(b)(1)(A	ı)(v).			
			mally receives [vi). (Complete	a substantial part of it Part II)	s support from a	a governmental u	nıt or from the gener	al public described in		
3 🗆 🖰	communit	y trust descr	ıbed ın sectio ı	170(b)(1)(A)(vi)	(Complete Part I	Π)				
				escribed in 170(b)(1) ee instructions Enter				lege or university or		
f I	rom activit nvestment	es related to income and	ıts exempt fur unrelated busır	(1) more than 331/3% actions—subject to certiess taxable income (learning)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross		
	•			d exclusively to test for	r public safety S	See section 509	(a)(4).			
r	nore public	ly supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a			
	ype I. A s organization	upporting or i(s) the powe	ganızatıon oper	ated, supervised, or co	ontrolled by its s	supported organiz	zation(s), typically by			
□ r	nanagemer	nt of the supp		ervised or controlled in ation vested in the sand C.						
				supporting organization				ated with, its		
	ype III no unctionally	on-function integrated	ally integrate The organizatio	ions) You must com d. A supporting organi n generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgai			
			•	ved a written determir	•		pe I, Type II, Type II	I functionally		
_	-		on-functionally organizations	integrated supporting	organization	,	_			
		_		ipported organization(T		
	me of supp rganization	upported (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions))			(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)				
					Yes	No				
tal										
otal	uk Dodust	ion Act Not	ico coo the T	 nstructions for	I Cat No 1128!	<u> </u>	 Schedule A (Form 9	00 ex 000 E7) 301		

Sch	nedule A (Form 990 or 990-EZ) 2018						Page 2
F	Support Schedule for (b)(1)(A)(ix) (Complete only if you che III. If the organization for	necked the box o	n line 5, 7, 8, or	9 of Part I or if	the organizatio	n failed to quali	
_	Section A. Public Support	<u> q,</u>			<u> </u>		
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(6) 2013	(0) 2010	(d) 2017	(e) 2010	(1) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	16,832,493	11,987,621	15,048,698	18,408,214	16,874,251	79,151,277
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	16,832,493	11,987,621	15,048,698	18,408,214	16,874,251	79,151,277
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						7,475,568
	line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						71,675,709
	Section B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
7	(or fiscal year beginning in) Amounts from line 4	16,832,493	11,987,621	15,048,698	18,408,214	16,874,251	79,151,277
8		10,032,433	11,507,021	13,040,030	10,400,214	10,074,231	75,151,277
•	dividends, payments received on						
	securities loans, rents, royalties	1,856,891	1,631,081	1,306,309	1,730,708	2,147,311	8,672,300
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						87,823,577
12	Gross receipts from related activities,	etc (see instructio	ns)	'	<u>'</u>	12	354,005,529
13	First five years. If the Form 990 is for	or the organization	's first, second, thii	d, fourth, or fifth	tax year as a sect	ion 501(c)(3) orga	anization,
	check this box and stop here					▶□]
•	Section C. Computation of Publi						
14	Public support percentage for 2018 (li	ne 6, column (f) di	vided by line 11, co	olumn (f))		14	81 610 %
15	Public support percentage for 2017 So	hedule A, Part II, l	ine 14			15	82 700 %
16	a 33 1/3% support test—2018. If the	e organization did r	ot check the box o	n line 13, and line	e 14 is 33 1/3% or	more, check this	box
ı	and stop here. The organization qual b 33 1/3% support test—2017. If the		• •		nd line 15 is 33 1/	3% or more, chec	▶ ☑ k this
	box and stop here. The organization	_				,	▶ □
17	a 10%-facts-and-circumstances tes				≘ 13, 16a, or 16b,	and line 14	·
-	is 10% or more, and if the organization	on meets the "facts	-and-cırcumstance	s" test, check this	box and stop her	·e. Explain	
	in Part VI how the organization meets	the facts-and-circ	cumstances" test	ne organization q	ualifies as a public	ry supported	. □
ı	organization b 10%-facts-and-circumstances te	st—2017. If the or	ganızatıon dıd not	check a box on lir	ne 13, 16a, 16b, o	r 17a, and line	▶⊔

Schedule A (Form 990 or 990-EZ) 2018

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.50.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year		I	I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	3	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
17	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•			••	18	
	331/3% support tests—2018. If the		•	on line 14, and lin	ne 15 is more than		ne 17 is not
							► □
	more than 33 1/3%, check this box and s 33 1/3% support tests—2017. If the						
b	· · · · · · · · · · · · · · · · · · ·	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anızatıon	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 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 Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b 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 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 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 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c 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 5a

amendment to the organizing document) 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? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

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

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

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

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

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

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

P	art IV	Supporting Organizations (continued)			
				Yes	No
11	. Has tl	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ning body of a supported organization?	11a		
b	A fam	ully member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
		B. Type I Supporting Organizations			
		/1 11 3 3		Yes	No
1	elect VI ho organ truste	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part in the supported organization of activities of the inverted organization of activities of the invation had more than one supported organization, describe how the powers to appoint and/or remove directors or the invation had more than one supported organizations and what conditions or restrictions, if any, applied to such its supported organizations and what conditions or restrictions, if any, applied to such its supported organizations.			
_	Б. 4 44	ne organization operate for the benefit of any supported organization other than the supported organization(s) that	1		
2	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				
_	costion	C. Type II Supporting Organizations			
	ection	c. Type 11 Supporting Organizations		Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the		163	140
	suppo	orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	Section	D. All Type III Supporting Organizations			
				Yes	No
1	tax ye Form	ne organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ear, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing nents in effect on the date of notification, to the extent not previously provided?			
			1		
2	(s) or	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization rained a close and continuous working relationship with the supported organization(s)			
			2		
3	organ	ason of the relationship described in (2), did the organization's supported organizations have a significant voice in the lization's investment policies and in directing the use of the organization's income or assets at all times during the tax If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
9	Section	E. Type III Functionally-Integrated Supporting Organizations		l	
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ons)		
	a 🖂	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 (see	ınstru	ctions)	
2	Activi	ties Test Answer (a) and (b) below.		Yes	No
	suppo orgai respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was nsive to those supported organizations, and how the organization determined that these activities constituted antially all of its activities	2a		
	organ <i>organ</i>	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of the ization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the ization's position that its supported organization(s) would have engaged in these activities but for the organization's rement	21		
3		t of Supported Organizations Answer (a) and (b) below.	2b		
د	a Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	b Did th	reported organizations? Provide details in Part VI. The organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	suppo	orted organizations? If "Yes." describe in Part VI. the role played by the organization in this regard		ı ——	

Sche	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		

•	income or for management, conservation, or maintenance of property held for production of income (see instructions)			
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		
ē	Average monthly value of securities	1a		
Ŀ	Average monthly cash balances	1 b		
	: Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	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			

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

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Additional Data

Software ID:

Software Version:

EIN: 59-0637903

Name: RINGLING COLLEGE OF ART AND DESIGN INC

Schedule A (Form 990 or 990-EZ) 2018	Page
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any addition instructions)	Part IV, Section C, line 1, ion B, line 1e, Part V

Instructions)

Facts And Circumstances Test

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493105003130

Open to Public Inspection

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

5

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Go to www.irs.gov/Form990 for instructions and the latest information.

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2

ь	Total lobbying expenditures to influence a legislative		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and	d 1d)	
f	Lobbying nontaxable amount Enter the amount fron columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
	Not over \$500,000	20% of the amount on line 1e	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
			 •
g	Grassroots nontaxable amount (enter 25% of line 1f)	
h	Subtract line 1g from line 1a If zero or less, enter -()-	

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

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

Grassroots lobbying expenditures

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a	,)	\perp	(b)	
activi		Yes	No		Amou	ınt
1	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					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	7		
c	Media advertisements?		No	┨		
d	Mailings to members, legislators, or the public?		No	+		
e	Publications, or published or broadcast statements?		No	+		
f	Grants to other organizations for lobbying purposes?		No	+		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	+		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	+		
i	Other activities?	Yes	\vdash	+		43,979
j	Total Add lines 1c through 1i	$\overline{}$	$\overline{}$	+		43,979
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912	$\overline{}$	\vdash	\dashv		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ĺ			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ĺ	\vdash		
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	i(5), o	r secti	on		
	501(c)(6).					
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	<u> </u>	Щ.
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	<u> </u>	Щ.
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	<u> </u>	Ĺ
Par	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				;01(c)(6)
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).					
а	Current year	2a	<u> </u>			
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	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	<u> </u>			
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information					
	ovide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), tructions), and Part ll-B, line 1 Also, complete this part for any additional information	Part II-	A, lines	1 and	d 2 (s∈	:е
	Return Reference Explanation			_		
PART	THE COLLEGE IS A MEMBER OF AN ASSOCIATION OF INDEPENDENT COLLEGE ACTIVITIES ARE RELATED TO THE CONTINUATION OF FLORIDA EFFECTIVE ASSOCIATION OF FLORIDA EFFECTIVE E	CCESS	TO STUE	DENT	Γ	NC A

BRANCH, AND ANY OTHER LOCAL GOVERNMENT AGENCIES

EDUCATION WHICH BENEFITS FLORIDA STUDENTS AT PRIVATE COLLEGES THE COLLEGE ALSO RETAINS A CONSULTING FIRM FOR REPRESENTATION AS NEEDED BEFORE THE FLORIDA LEGISLATURE, EXECUTIVE

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

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.

Open to Public

DLN: 93493105003130 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

8

Assets included in Form 990, Part X

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

▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Cat No 52283D

Schedule D (Form 990) 2018

 ${f d}$ Equipment .

	Overvientiene Mainteining Col		listavias I T		Oth (:::la			Page Z
	t III Organizations Maintaining Col						•		
3	Using the organization's acquisition, accession items (check all that apply)	ı, and other records,		the follow	ving that are a	significant use	of its colle	ction	
а	✓ Public exhibition		d 🔽	Loan or	exchange prog	rams			
b	Scholarly research		e 🗌	Other					
С	Preservation for future generations								
4	Provide a description of the organization's coll Part XIII	ections and explain	how they furtl	ner the or	ganızatıon's ex	empt purpose	ın		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to						Yes	□ N	0
Pa	rt IV Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990, Part	IV, line	9, or reporte				
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	an or other intermed	ıary for contrı	butions oi	r other assets r		Yes	☑ N	0
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table			Amo	unt		_
c	Beginning balance				1c				_
d	Additions during the year				1d				_
е	Distributions during the year				1e				_
f	Ending balance				1f				_
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for escrow	or custo	dial account lia	bility? 🔽	Yes	□ N	— о
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	kplanation has	been pro	ovided in Part X	m 🛭	7		
Pa	nrt V Endowment Funds. Complete if	the organization a	answered "Y	es" on F	orm 990, Par	t IV, line 10.			
		(a)Current year	(b) Prior yea	r (c)	Two years back	(d)Three years	oack (e)F	our year	rs back
1 a	Beginning of year balance	53,129,338	47,488	3,859	42,091,138	45,846	,003	43,	107,326
b	Contributions	2,332,285	4,587		2,038,759		,041		785,934
С	Net investment earnings, gains, and losses	1,030,381	2,909	9,744	4,626,200	-2,707	,933	1,:	305,293
d	Grants or scholarships	1,680,775	1,606	5,450	1,101,881	1,380	,175	1,	136,125
е	Other expenditures for facilities and programs	290,925	250	,000	165,357	219	,798		216,425
f	Administrative expenses								
g	End of year balance	54,520,304	53,129	9,338	47,488,859	42,091	,138	45,8	846,003
2	Provide the estimated percentage of the curre	nt year end balance	(line 1g, colu	mn (a)) h	eld as				
а	Board designated or quasi-endowment >	37 460 %							
b	Permanent endowment ► 53 090 %								
c	Temporarily restricted endowment ▶ 9 4.	50 %							
	The percentages on lines 2a, 2b, and 2c shou	•							
3а	Are there endowment funds not in the posses organization by	sion of the organizat	ion that are h	eld and a	dministered for	the	ı	Yes	No
	(i) unrelated organizations						3a(i)	Yes	
	(ii) related organizations						3a(ii)		No
b	If "Yes" on 3a(II), are the related organization		on Schedule R	?			3b	\neg	
4	Describe in Part XIII the intended uses of the	organization's endo	vment funds						-
Pa	rt VI Land, Buildings, and Equipmer Complete if the organization answ		m 990 Part	TV line	11a See For	m 990 Part	X line 10)	
	Description of property (a) Cost or oth (investme	er basıs (b) Cost	or other basis (c) Accumulated d			ok valu	e
	Land	2,260,000	42,26	09,587				44	1,469,587
	Buildings		· · ·	34,067		72,174,199			5,109,868
	Leasehold improvements		•	56,449		371,605			494,844
	Equipment			73,742		38,073,561		50	,700,181

34,966,582

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

33,493,814

225,268,294

1,472,768

Part VII In	m 990) 2018 Ivestments—Other Securities. Complete if the or	ganızat	ion ansv	vered "Yes" on Form 990, i	Page 3 Part IV, line 11b.
	ee Form 990, Part X, line 12. (a) Description of security or category		(b)	(c) Method of	· valuation
	(including name of security)		Book value	Cost or end-of-yea	ar market value
 Financial de Closely-held Other 	erivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
	nvestments—Program Related. Complete if the organization answered 'Yes' on Form	990, P	art IV, l	ne 11c. See Form 990, Par	t X, line 13.
	(a) Description of investment		ook value		· valuation
(1)				3355 31 311 31 75	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
) must equal Form 990, Part X, col (B) line 13)				
Part IX O	ther Assets. Complete if the organization answered 'Yes (a) Description	' on For	m 990, Pa	art IV, line 11d See Form 990,	Part X, line 15 (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 15) ther Liabilities. Complete if the organization answer			orm 990 Part IV line 11e c	▶ 07.11f
Se	ee Form 990, Part X, line 25.				
1. (1) Federal inco	(a) Description of liability me taxes		(D)	look value	
ANNUITY PAYAE				1,112,130	
STUDENT DEPO CAPITAL LEASE				617,545 4,723,700	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		\dashv			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		6,453,375	
	incertain tax positions In Part XIII, provide the text of the ability for uncertain tax positions under FIN 48 (ASC 740)			rganization's financial statemer	

Part XI

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2018

Page 4

-18,633,510

106,887,612

-1,116,822

105,770,790

74,484,310

1,458,931

73,025,379

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 а Net unrealized gains (losses) on investments d

e

3 4 b

Add lines **4a** and **4b** c

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

5

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

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Add lines **4a** and **4b**

Supplemental Information

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d . .

Return Reference

Part XII 1

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

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

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

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

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

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

-1.219.224

102,402

239,707

444,053

775,171

102,402

17.775.492

2e

3

4c

5

-1,001,338

-17.871.879

239.707

4c

2e

3

17,877,894 90.903.273

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 59-0637903

Name: RINGLING COLLEGE OF ART AND DESIGN INC

Explanation

Supplemental Information

Return Reference

PART III, LINE 1A	THE COLLEGE'S POLICY IS TO CAPITALIZE DONATED WORKS OF ART AT FAIR VALUE AND PURCHASED WOR KS OF ART AT COST IF NOT PRESERVED AND HELD FOR PUBLIC EXHIBITION OR IF INTENDED TO BE SOL D WITHOUT PROCEEDS USED FOR PURCHASES OF WORKS OF ART OF THE \$8,111,785 AND \$6,561,887 PR ESENTED IN OTHER NON-CURRENT ASSETS ON THE STATEMENTS OF FINANCIAL POSITION, \$6,065,308 AN D \$5,028,058 AS OF MAY 31, 2019 AND 2018, RESPECTIVELY, ARE DONATED WORKS OF ART WHICH ARE BEING HELD WITH THE INTENT OF RESALE AND DO NOT MEET THE DEFINITION OF A COLLECTION THE COLLEGE'S COLLECTIONS INCLUDE WORKS OF ART THAT ARE MAINTAINED IN THE COLLEGE'S GALLERIES AND LIBRARY AND LOANED TO ON-CAMPUS DEPARTMENTS AND LOCAL ENTITIES THESE COLLECTIONS ARE PROTECTED AND PRESERVED FOR PUBLIC EXHIBITION, EDUCATION AND RESEARCH EACH OF THE ITEMS I S CATALOGED, PRESERVED AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSI NG THEIR CONDITION ARE PERFORMED PERIODICALLY THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE COLLEGE'S INCECTION ITEMS ARE RECORDED AS ASSETS IN THE STATEMENTS OF FINANCIAL POSITION PURCHASE'S OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN NET ASSETS WITHOUT DONOR RESTRICTIONS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR IN NET ASSETS WITH DONOR RESTRICTIONS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS

Supplemental Information	
Return Reference	Explanation
PART III, LINE 4	THE COLLEGE'S COLLECTIONS INCLUDE PAINTINGS, PRINTS AND SCULPTURE REFLECTING A MYRIAD OF A RTISTIC STYLES DONATED BY INDIVIDUALS TO THE COLLEGE FOR SELECTIVE PUBLIC DISPLAY THE COLLECTION SERVES AS AN IMPORTANT CULTURAL RESOURCE FOR OUR STUDENTS, FACULTY, STAFF AND COMMUNITY SERVING TO EDUCATE AND INSPIRE THE COLLEGE'S COLLECTIONS INCLUDE WORKS OF ART THAT ARE MAINTAINED IN THE COLLEGE'S GALLERIES AND LIBRARY AND LOANED TO ON-CAMPUS DEPARTMENTS AND LOCAL ENTITIES THESE COLLECTIONS ARE PROTECTED AND PRESERVED AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED PERIODICALLY

- - -

Supplemental Information	
Return Reference	Explanation
PART IV, LINE 2B	FUNDS HELD IN CUSTODY FOR OTHERS PRIMARILY RELATES TO STUDENT ORGANIZATIONS

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	ENDOWMENT FUNDS ARE USED TO SUPPORT STUDENT SCHOLARSHIPS, ACADEMIC PROGRAMS AND INSTITUTIONAL SUPPORT

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Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	A RULING FROM THE U S TREASURY DEPARTMENT, DATED MAY 19, 1938, STATES THAT RINGLING SCHOO L OF ART AND DESIGN IS EXEMPT FROM FEDERAL INCOME TAX UNDER THE PROVISIONS OF 101(6) OF THE REVENUE ACT OF 1936, WHICH IS NOW 501(C)(3) OF THE 1986 CODE HOWEVER, THE COLLEGE'S UNR ELATED BUSINESS INCOME IS SUBJECT TO INCOME TAX AT CORPORATE RATES THE COLLEGE'S POLICY IS TO RECORD A LIABILITY FOR ANY BENEFICIAL TAX POSITION, EXCLUDING ANY RELATED INTEREST AND PENALTIES, WHEN IT IS MORE LIKELY THAN NOT THE POSITION TAKEN BY MANAGEMENT WITH RESPECT TO A TRANSACTION OR CLASS OF TRANSACTIONS WILL BE OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION MANAGEMENT BELIEVES THERE ARE NO SUCH POSITIONS AS OF MAY 31, 2019 AND MAY 31, 2018 AND, ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED

Supplemental Information

Supplemental Information Return Reference Explanation PART XI, LINE 2D - OTHER SCHOLARSHIP ALLOWANCE SHOWN NET OF REVENUE ON FINANCIALS -17,422,315 AUXILIARY ALLOWANCE

ADJUSTMENTS (SCHOLARSHIPS) -274,564 CSSP & ART CENTER (SCHOLARSHIPS) -78,613 CHANGE IN VALUE OF GIFT ED ARTWORK -2,900 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -93.487

Supplemental Information Return Reference Explanation PART XI, LINE 4B - OTHER RENTAL EXPENSES -2,881 FUNDRAISING EVENT EXPENSES -709,298 GAMING ACTIVITIES EXPENSES -7 557 COST OF GOODS SOLD -55.435 LOSS ON EQUIPMENT -444.053 I ADJUSTMENTS

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER RENTAL EXPENSES 2,881 FUNDRAISING EVENT EXPENSES 709,298 GAMING ACTIVITIES EXPENSES 7,557 COST OF GOODS SOLD 55,435 LADJUSTMENTS

Supplemental Information Return Reference Explanation PART XII, LINE 4B - OTHER SCHOLARSHIP ALLOWANCE SHOWN NET OF REVENUE ON FINANCIALS 17,422,315 AUXILIARY ALLOWANCE (ADJUSTMENTS SCHOLARSHIPS) 274.564 CSSP & ART CENTER (SCHOLARSHIPS) 78.613

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493105003130 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 ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 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 5c c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No 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) (2018)

Schedule E (Form 990 or 990EZ) (2018)	Page 2
Part II Supplemental Information. Provide the expla any other additional information (see instructions)	anations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide
Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	THE POLICY IS PUBLISHED ON THE COLLEGE'S WEBSITE FOR PROSPECTIVE STUDENT APPLICANTS
SCHEDULE E, PART I, LINE 6	FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENTAL AGENCY IS DISTRIBUTED TO STUDENTS USING FEDERALLY APPROVED FINANCIAL NEED ANALYSIS CRITERIA

Schedule F (Form 990 or 990-F7) (2018)

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493105						93493105003130		
SCHEDULE F (Form 990)	State	ement of	Activities (Outside the United States OMB No 1545-004				
(1 51111 555)	·	•	► Attach t	'es" to Form 990, Part IV, I o Form 990.		•	2018	
Department of the Treasury Internal Revenue Service	•	Go to www.irs	gov/Form990 for II.	nstructions and the latest ii	nformation	•	Open to Public Inspection	
Name of the organization RINGLING COLLEGE OF AR	RT AND DESIG	INC				Employer iden 59-0637903	tification number	
	nformation Part IV, line		s Outside the U	Inited States. Comple	ete if the	organızatıon a	nswered "Yes" to	
_	he grantees'	eligibility for t		substantiate the amount stance, and the selection	_		☑ Yes □ No	
2 For grantmakers outside the United		Part V the org	janization's proce	dures for monitoring the	use of its	s grants and oth	ner assistance	
3 Activites per Region	(The followin	ng Part I, line 3	table can be dupli	cated if additional space is	needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	ity listed in (d) is a service, describe cific type of e(s) in region	(f) Total expenditures for and investments in region	
See Add'l Data								
3a Sub-total b Total from continuation	on sheets to		0 0				397,454 58,939	
Part I c Totals (add lines 3a	and 3b)		0 0				456,393	
For Paperwork Reduction A	Act Notice see	the Instruction	ns for Form 990	Cat	No 50082	ΣW Schedul	le F (Form 990) 2018	

Page **3**

Part IIII Grants and O	ther Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.
Part III can be	duplicated if addition	onal space is i	needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV,

(a) Type of grant or assistance	e (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)
STUDY ABROAD TUITION	EUROPE	1	10,425	CHECK			
PASS-THROUGH GRANT	EUROPE	3	7,763	CHECK			
PASS-THROUGH GRANT	SOUTH AMERICA	1	1,545	CHECK			

	_	_,5 .5		

Schedule F (Form 990) 2018

Sche	dule F (Form 990) 2018		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, don't file with Form 990)		
	Instructions for Forms 3320 and 3320 A, don't me with Form 330)	☐ 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)		
	Corporations (see Instructions for Form 54/1)	\square 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, don't file with Form 990)	□Yes	☑ No
	3713, don't me with Form 330)	∟ Yes	™ 1/10

Schedule F (Foi	rm 990) 2018 Page 5
P ai m	upplemental Information rovide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; mounts 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 my additional information (see instructions).
990 Schedul	le F, Supplemental Information
Return Reference	Explanation

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I. LINE 3	EXPENDITURES ARE RECORDED ON AN ACCRUAL BASIS

Additional Data

CENTRAL AMERICA AND THE

CARIBBEAN

Software ID: Software Version:

EIN: 59-0637903

Name: RINGLING COLLEGE OF ART AND DESIGN INC

Form 990 Schedule	F Part I - Activities	s 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
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	RECRUITING	3,966

0 PROGRAM SERVICES

STUDY ABROAD

331

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES RECRUITING 89.996 EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES ISEMINARS & 353 CONFERENCES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EUROPE (INCLUDING ICELAND O FUNDRAISING 267,580 AND GREENLAND) EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICES **IGRANTMAKING** 7.763 AND GREENLAND)

Form 990 Schedule F Part	orm 990 Schedule F Part I - Activities Outside The United States												
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region								
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	RECRUITING	24,965								
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	RESEARCH	2,500								

<u>Form 990 Schedule F Part</u>	t I - Activities	Outside The U	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
EUROPE (INCLUDING ICELAND AND GREENLAND)	AND 0 PROGRAM SERVICES SEMINARS & CONFERENCES		5,302		
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDY ABROAD	502

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EUROPE (INCLUDING ICELAND 0 IGRANTS TO RECIPIENTS 10.425 AND GREENLAND) LOCATED IN REGION MIDDLE EAST AND NORTH 0 PROGRAM SERVICES IRECRUITING 1.217 AFRICA

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) NORTH AMERICA 0 PROGRAM SERVICES ISEMINARS & 20.561 CONFERENCES RUSSIA AND NEIGHBORING 0 PROGRAM SERVICES IRECRUITING 656 STATES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICES GRANTMAKING 1.545 SOUTH AMERICA SOUTH AMERICA 0 PROGRAM SERVICES RECRUITING 8,858

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of fundraising, program region agents in services, grants to service(s) in region region recipients located in the region) SOUTH ASIA 0 IPROGRAM SERVICES RECRUITING 9.873

DLN: 93493105003130

OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

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.

2018

Open to Public Inspection

ame of the organization INGLING COLLEGE OF ART AND DI		13 900/101	111990 101 11	iisti ucti	ons and the latest in		Employer ide	ntification number
INGLING COLLEGE OF ART AND DI	ESIGN INC						59-0637903	
Part I Fundraising Activi Form 990-EZ filers a	•	_			ered "Yes" on Fo	rm 990,	Part IV, line 1	7.
Indicate whether the organiza	tion raised funds thr	rough any	of the fo	llowing	g activities Check	all that a	pply	
a 🗹 Mail solicitations			e	\checkmark	Solicitation of non-	-governm	ent grants	
b 🗹 Internet and email solicita	tions		f	\checkmark	Solicitation of gove	ernment (grants	
c 🗹 Phone solicitations			g	✓	Special fundraising	events		
d 🗹 In-person solicitations								
2a Did the organization have a w or key employees listed in For							·	es 🗆 No
b If "Yes," list the ten highest particle to be compensated at least \$5	aid individuals or ent 5,000 by the organiz	tities (fun ation	draisers)	pursua	ant to agreements	under wl	nich the fundrais	er is
) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did sei have ody oi irol of outions?		Gross receipts rom activity	(or r fundra	mount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization
	GRANT WRITER	Yes	No					
KAREN EBER DAVIS CONSULTING 2707 GREENDALE DRIVE 101	GRANT WRITER		No		5,000		0	5,000
SARASOTA, FL 34232								
7251 OHMS LANE	STRATEGIC FUNDRAISING CONSULTANT		No		0		32,105	-32,105
C-SQUARED ENTERPRISES	STRATEGIC FUNDRAISING CONSULTANT		No		0		48,078	-48,078
otal			 		5,000		80,183	-75,183

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	rs?		☐ Yes	□No	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		a member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	inization's gaming/special events books and r	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		ganization 🕨 \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable d	istributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		uted to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explana	tions required by Part I, line 2b, column blicable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493105003130 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) 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 ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(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) 2018

Schedule I (Form 990) 2018	,					Page 2
		Domestic Individua onal space is needed	als. Complete if the orga	inization answered "Yes"	s" on Form 990, Part IV, line 22	
(a) Type of grant or		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS & GRAI	NTS	1440	17,892,899			
(2) CSSP & ART CENTER SO	CHOLARSHIPS	82	78,613			
(3) STUDENT AWARDS		24	17,250			
(3)				<u> </u>		
(4)	,					
(5)	1					
(6)	1					
(7)						
Part IV Suppleme	ental Informatic	on. Provide the info	ormation required in F	Part I, line 2; Part III	I, column (b); and any other ad	Iditional information.
Return Reference	Explanation	.on				
PART I, LINE 2	AID ARE QU	UALIFYING RECIPIENT	TS FEDERAL FINANCIAL A	. AID AND/OR ASSISTAN	NCE FROM GOVERNMENTAL AGENCIE	ROCEDURES TO ENSURE THAT THOSE RECEIVING IES IS DISTRIBUTED AND MONITORED IN

TAKEN PLACE

COLLEGE IS SELECTIVE IN WHICH ORGANIZATIONS IT SUPPORTS, MONITORING OF THE FUNDS IS NOT A PART OF THE AWARD PROCESS AFTER FUNDING HAS

Schedule I (Form 990) 2018

Additional Data

1605 MAIN STREET SUITE 612 SARASOTA, FL 34236 PINC CONFERENCES LLC

238 S LINKS AVE

SARASOTA, FL 34236

Software ID: Software Version:

46-5617978

EIN: 59-0637903

Name: RINGLING COLLEGE OF ART AND DESIGN INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

organization or government		ıf applıcable	grant	cash assistance	(book, FMV, appraisal, other)
AMERICAN JEWISH	13-5563393	501(C)(3)	10,000		

(h) Purpose of grant or assistance

GENERAL SUPPORT

SUPPORT LOCAL

CONFERENCE

SHOWCASING INNOVATIVE SPEAKERS

(a) Name and address of (b) EIN

(c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation

40,875

(q) Description of non-cash assistance

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-2726466 12.810 JETSON'S CREATIVE TREND SUPPORT 2741 NO OSPREY AVENUE RENOVATIONS FOR SARASOTA, FL 34234 HISTORY AND ART

STRENGTHEN THE ICOMMUNITY

GALLERY FOR ECONOMIC DEVELOPMENT 20-1133191 501(C)(6) 8,330 SUPPORT

NEWTOWN COMMUNITY ORGANIZATION THAT CORPORATION 1680 FRUITVILLE ROAD SUITE WORKS WITH

SARASOTA COUNTY TO 402

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SARASOTA, FL 34236

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

501(C)(3) 9.212 CAREERSOURCE SUNCOAST 59-2334811 GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1112 MANATEE AVE EAST BRADENTON, FL 34208

efil	e GRAPHIC pr	rint - DO NOT PROCESS A	s Filed Data	a -	DLN: 934	9310	5003	130
Sch	nedule J	Cor	npensati	ion Information	ОМ	1B No	1545-0	0047
(For	m 990)		Compensa	rustees, Key Employees, and Hig ated Employees rered "Yes" on Form 990, Part IV	hest	20	18	3
			▶ Attach	to Form 990. instructions and the latest inform			o Pul	
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/</u>	<u> </u>	instructions and the latest inform	пацоп.		ectio	
	me of the organiza	ation ART AND DESIGN INC			Employer identificat	ion nu	ımber	
KIIN	GLING COLLEGE OF	ART AND DESIGN INC			59-0637903			
Pa	rt I Questi	ons Regarding Compensation	on					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel	$\overline{\checkmark}$	Housing allowance or residence for	personal use			
	_	companions		Payments for business use of perso				
		nification and gross-up payments	✓	Health or social club dues or initiati				1
	☐ Discretion	nary spending account	¥	Personal services (e g , maid, chauf	teur, chet)			
b		xes in line 1a are checked, did the all of the expenses described above		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b		No
2				or allowing expenses incurred by all	. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/Exe	cutive Director	r, regarding the items checked in line	e la'			
3				ed to establish the compensation of the	ne			
		EO/Executive Director Check all the ed organization to establish compe		not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	√ Compens							
	_ '	ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensa	ition committee			
4	During the year	, did any person listed on Form 99	0, Part VII, Se	ction A, line 1a, with respect to the f				
	related organiza	ation						
a		ance payment or change-of-contro				4a		No
b	•	r receive payment from, a supplem	•	· ·		4b 4c	Yes	Na
С	•	r receive payment from, an equity of lines 4a-c, list the persons and p		nsation arrangement? plicable amounts for each item in Par	t III	40		No
	,	, , ,	• •					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section <i>i</i> ontingent on the revenues of		the organization pay or accrue any				
а	The organization	n [?]				5a		No
b	Any related orga					5b		No
	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A ontingent on the net earnings of	A, line 1a, did i	the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga					6 b		No
7	·	6a or 6b, describe in Part III	Λ line 1 = -1:1:	the avancantics seemed and a control of	al .			
7	payments not d	escribed in lines 5 and 6? If "Yes,"	describe in Pa		a	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No
9	If "Yes" on line : 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		110
For F	Paperwork Redu	iction Act Notice, see the Instri	uctions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	990)	2018

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

(A) Name and Title	,	(B) Breakdowr	n of W-2 and/or 1099-MISC	compensation '	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
(A) Name and Thie		(i) Base 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 LARRY R THOMPSON PRESIDENT	(i)	370,896	65,000	233,218	13,750	31,370	714,234	104,156	
	(ii)	0	0	0	0	0	0	0	
2 DR TRACY A WAGNER VP FOR FINANCE & ADMINISTRATION	(i)	187,294	0	38,408	15,400	18,277	259,379	0	
	(ii)	0	0	0	0	0	0	0	
3 CHRISTINE C DEGEORGE VP FOR HUMAN &	(i)	190,837	0	20,648	10,271	18,454	240,210	0	
ODCANIZATIONAL DEV	(ii)	0	0	0	0	0	0	0	
4 DR PETER A MCALLISTER VP FOR ACADEMIC AFFAIRS	(i)	182,626	0	10,947	9,793	12,679	216,045	0	
VF TON ACADEMIC ATTAINS	(ii)	0	0	0	0	0	0	0	
5 DAVID H JACKSON ASSOCIATE VP FOR	(i)		0	9,745	8,052	8,574	179,358	0	
ACADEMIC AFFAIRS	(ii)		0	0	0	0	0	0	
		187,953	0	22,746	10,529	10,720	231,948	0	
INSTITUTIONAL TECHNOLOGY	(ii)	0	0	0	0	0	0	0	
7 STACEY CORLEY VP FOR ADVANCEMENT	(i)	170,436		27,406	9,897	18,767	226,506	0	
	(ii)	0	0	0	0	0	0	0	
8 DR TAMMY WALSH VP FOR STUDENT LIFE/DEAN	(i)	166,932	. 0	7,999	1,687	17,962	194,580	0	
OF STUDENTS	(ii)	0	0	0	0	0	0	0	
9 JEFFREY SCHWARTZ ASSOCIATE VP FOR	(i)	143,409	0	8,601	8,413	18,689	179,112	0	
ACADEMIC AFFAIRC	(ii)	0	0	0	0	0	0	0	
	H								
	H		+				-		
	\vdash		+			<u> </u>		-	
	'	1		'		1	'		

Page 3

Schedule J (Form 990) 2018

COUNTRY CLUB AND SOCIAL CLUB DUES ON BEHALF OF DR. LARRY R. THOMPSON, PRESIDENT. PERSONAL USE IS NOT REIMBURSED, BUT THE PAYMENT FOR COUNTRY CLUB AND SOCIAL CLUB DUES IS TAXABLE TO THE EMPLOYEE AND IS REPORTED AS REPORTABLE COMPENSATION ON FORM 990, PAGE 7, PART VII. SECTION A, COLUMN D AND SCHEDULE J, PAGE 2, PART II, COLUMN B(III) THE ORGANIZATION PROVIDED A GROSS-UP PAYMENT TO LARRY R THOMPSON, PRESIDENT, FOR THE TAXES ON THE PORTION OF COUNTRY CLUB AND SOCIAL CLUB DUES ATTRIBUTABLE TO BUSINESS USE THE ORGANIZATION PAID FOR TAXABLE PHYSICIAN SERVICES ON BEHALF OF DR LARRY R THOMPSON, PRESIDENT, WHICH IS REPORTED AS REPORTABLE COMPENSATION ON FORM 990, PAGE 7, PART VII, SECTION A, COLUMN D AND SCHEDULE J, PAGE 2, PART II, COLUMN B(III) THE ORGANIZATION PAYS YACHT CLUB DUES ON BEHALF OF STACEY CORLEY, VICE PRESIDENT FOR ADVANCEMENT PERSONAL USE IS NOT REIMBURSED, BUT THE PAYMENT FOR YACHT CLUB DUES IS TAXABLE TO THE EMPLOYEE AND IS REPORTED AS REPORTABLE COMPENSATION ON FORM 990, PAGE 7, PART VII, SECTION A, COLUMN D AND SCHEDULE J, PAGE 2, PART II, COLUMN B(III) THE ORGANIZATION PROVIDED A GROSS-UP PAYMENT TO STACEY CORLEY, VICE PRESIDENT FOR ADVANCEMENT FOR THE TAXES ON THE PORTION OF YACHT CLUB DUES ATTRIBUTABLE TO BUSINESS USE. THE COLLEGE ALSO PAYS FOR CERTAIN TRAVEL EXPENSES FOR DR. THOMPSON'S SPOUSE WHEN IT SERVES THE NEEDS OF THE COLLEGE TO HAVE HIS SPOUSE PRESENT FOR VARIOUS COLLEGE FUNCTIONS. THIS IS TREATED AS NONTAXABLE SINCE HER ATTENDANCE IS REQUIRED FOR CERTAIN DONOR EVENTS. THESE ITEMS GO THROUGH BOARD APPROVAL TO ENSURE THAT A BUSINESS PURPOSE EXISTS.

Return Reference	Explanation
,	THE BOARD OF TRUSTEES EXECUTIVE COMMITTEE DETERMINED THAT THE COLLEGE WOULD PROVIDE THE HOUSING ALLOWANCE, GROSS-UP PAYMENTS, SOCIAL CLUB DUES, AND PHYSICIAN SERVICES FOR THE PRESIDENT (DESCRIBED ABOVE) AND THOSE BENEFITS ARE INCLUDED IN THE PRESIDENT'S APPOINTMENT LETTER FROM THE BOARD OF TRUSTEES THE BOARD OF TRUSTEES EXECUTIVE COMMITTEE DETERMINED THAT THE PRESIDENT COULD AUTHORIZE THE COLLEGE TO PROVIDE THE YACHT CLUB DUES FOR STACEY CORLEY, VICE PRESIDENT FOR ADVANCEMENT, AND THOSE BENEFITS ARE INCLUDED IN HER LETTER OF APPOINTMENT THE BOARD OF TRUSTEES EXECUTIVE COMMITTEE DETERMINED THAT PRESIDENT, DR LARRY R THOMPSON COULD AUTHORIZE THE COLLEGE TO PROVIDE A GROSS-UP PAYMENT TO STACEY CORLEY, VICE PRESIDENT FOR ADVANCEMENT FOR THE TAXES ON THE PORTION OF YACHT CLUB DUES ATTRIBUTABLE TO BUSINESS USE

Return Reference	Explanation
	THE BOARD OF TRUSTEES ESTABLISHED A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN DESCRIBED IN SECTION 457(F) OF THE IRS CODE FOR DR LARRY R THOMPSON, PRESIDENT, EFFECTIVE JUNE 1, 2012 WITH AN INITIAL VESTING AND DISTRIBUTION DATE OF MAY 31, 2015 AND A SUBSEQUENT VESTING DATE OF MAY 31, 2018 THE PLAN BALANCE AS OF MAY 31, 2018 WAS \$104,156, WHICH CONSISTED OF CONTRIBUTIONS EARNED OVER THREE YEARS OF SERVICE (JUNE 1, 2015 THROUGH MAY 31, 2018) ALREADY REPORTED AS DEFERRED COMPENSATION IN PRIOR FORMS 990 AND CREDITED TO DR THOMPSON ON MAY 31, 2018 THIS AMOUNT WAS REPORTED AS REPORTABLE COMPENSATION ON FORM 990, PAGE 7, PART VII, SECTION A, COLUMN D AND SCHEDULE J, PAGE 2, PART II, COLUMN B(III) AND COLUMN F THE PLAN TERMINATED ON MAY 31, 2018

Return Reference	Explanation
•	BASED ON THE PERFORMANCE OF THE INSTITUTION, THE BOARD OF TRUSTEES DETERMINED THAT DR LARRY R THOMPSON, PRESIDENT WOULD RECEIVE A BONUS OF \$65,000 THE BOARD OF TRUSTEES DETERMINES ANNUALLY WHETHER A BONUS IS TO BE PAID AND THE AMOUNT

Additional Data

PRESIDENT

DR TRACY A WAGNER

VP FOR FINANCE & ADMINISTRATION CHRISTINE C DEGEORGE

VP FOR HUMAN & ORGANIZATIONAL DEV

DAVID H JACKSON

ASSOCIATE VP FOR ACADEMIC AFFAIRS DR MAHMOUD PEGAH

VP FOR ADVANCEMENT

DR TAMMY WALSH

VP FOR STUDENT LIFE/DEAN OF STUDENTS

JEFFREY SCHWARTZ

ASSOCIATE VP FOR ACADEMIC AFFAIRS

DIRECTOR OF INSTITUTIONAL **TECHNOLOGY** STACEY CORLEY

DR PETER A MCALLISTER

VP FOR ACADEMIC AFFAIRS

(1)

(ı)

(1)

(1)

(11)

(1)

(u)

187,294

190,837

182,626

152,987

187,953

170,436

166,932

143,409

Software ID: **Software Version:**

EIN: 59-0637903

RINGLING COLLEGE OF ART AND DESIGN INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
	(i) Base Compensation	(ii)	/iii)	other deferred	benefits	(B)(ı)-(D)	column (B)		

13,750

15,400

10,271

9,793

8,052

10,529

9,897

1,687

8,413

31,370

18,277

18,454

12,679

8,574

10,720

18,767

17,962

18,689

714,234

259,379

240,210

216,045

179,358

231,948

226,506

194,580

179,112

104,156

Form 990, Schedule	J, Part II - Officers, D	nectors, musices, k	ey Employees, and r	ngnest compensate	u Employees			
(A) Name and Title	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
	(i) Base 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	
DR LARRY R THOMPSON	(1) 370,896	'	'	13.750	31.370	714.234	104.156	

233,218

38,408

20,648

10,947

9,745

22,746

27,406

7,999

8,601

DLN: 93493105003130 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule K Supplemental Information on Tax-Exempt Bonds (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Open to Public Department of the Treasury Inspection Internal Revenue Service ▶Go to www.irs.gov/Form990 for the latest information. Name of the organization Employer identification number RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 Part I **Bond Issues** (i) Pool (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On behalf of financing ıssuer Yes No Yes No Yes No REFUND SERIES 2010, FUND 2017 HIGHER EDUCATION FACILITIES 90-0058227 34073TKB2 11-01-2017 99,656,259 Χ Χ Χ FINANCING AUTHORITY PROJECT (LIBRARY, ETC.) HIGHER EDUCATION FACILITIES 90-0058227 13,370,000 CURRENTLY REFUND SERIES 2009 Χ Х 00000000 05-31-2019 Χ FINANCING AUTHORITY HIGHER EDUCATION FACILITIES 12.045.000 CURRENTLY REFUND SERIES 2014 Х 90-0058227 00000000 05-31-2019 Χ FINANCING AUTHORITY Part ${
m I\hspace{-.1em}I}$ **Proceeds** В C D Α 2 3 100,428,109 13,370,000 12,045,000 5 1,446,748 6 7 886,215 8 9 10 35,911,435 11 43,500,000 13,370,000 12,045,000 12 18,683,711 13 2006 2009 Yes Yes No Yes No No Yes No Were the bonds issued as part of a current refunding issue? Χ Χ Х 14 Were the bonds issued as part of an advance refunding issue? 15 Χ Х Х Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Χ **Private Business Use** Part Ⅲ Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property 1 Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed 2 Χ Χ Χ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50193E Schedule K (Form 990) 2018 6

8a

Part IV

b

C

Arbitrage

Page 2

D

D

Schedule K (Form 990) 2018

No

Yes

4 500 %

4 500 %

Х

Х

0 %

1 400 %

1 400 %

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Α

Yes

Х

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В

Yes

Χ

Χ

Χ

No

Χ

Χ

Χ

X

1 900 %

1 900 %

Χ

Х

Yes

Χ

Х

0 %

Χ

No

Χ

Χ

Χ

Х

C

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

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)

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

Rebate not due yet?

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?

Term of hedge Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

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

Has the organization or the governmental issuer entered into a qualified

nongovernmental person other than a 501(c)(3) organization since the bonds were

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

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

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

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

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

Return Reference

Schedule K (Form 990) 2018

(GIC)?

period?

Part VI

PART I, LINE B, ITEM E

		4
	Yes	No
Were gross proceeds invested in a guaranteed investment contract		V

Χ

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

DATE ISSUED ORIGINALLY ISSUED ON 12/01/2009, REISSUED FOR FEDERAL TAX PURPOSES ON 5/31/2019

Х

Yes

Х

В

No

Explanation

No

Х

Х

Yes

Х

R

No

Yes

C

No

Yes

Х

No

Yes

Page 3

No

D

D

No

Yes

Yes

Return Reference	Explanation
PART I, LINE C, ITEM E	DATE ISSUED ORIGINALLY ISSUED ON 06/04/2014, REISSUED FOR FEDERAL TAX PURPOSES ON 5/31/2019

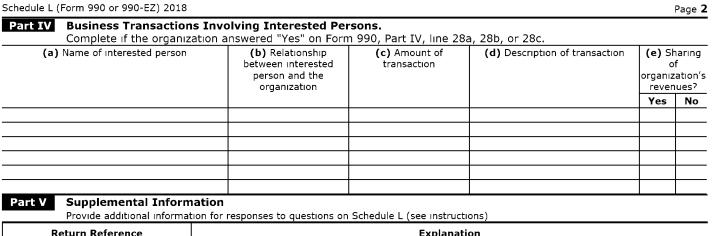
Return Reference	Explanation
PART II, LINE 3, COLUMN A	INCLUDES INVESTMENT EARNINGS

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P/

Return Reference	Explanation
PART II, LINE 11, COLUMNS A & B & C	PROCEEDS WERE SPENT TO CURRENTLY REFUND REFUNDED BONDS OR OTHER DEBT

	C print - DO No	OT PROCES	S AS FI	led Data -					DL	.N: 93	49310	500313	
Schedule L Form 990 or 990	0-EZ) ► Comple			ns with In				5a, 2	25b, 26		MB No 1	545-0047	
			28b, or 28	c, or Form 99 th to Form 99	0-EZ, Part V,	line 38a or 4		·	·		20	12	
		▶ Go t		gov/Form990			n.				40	10	
epartment of the Tre										9		Public ction	
ternal Revenue Servi Name of the org							Er	nplo	ver ide	ntifica	tion nu		
	E OF ART AND DESIG	INC						•	<u>-</u>				
Part I Exce	ss Benefit Tra	nsactions (section 501/	c)(3) section	501(c)(4) and	501(c)(29) o		0-063					
	lete if the organiza									ne 40b			
1 (a) Name of disqual	ıfıed person	(b)	Relationship be	•	ıfıed person aı	nd		escript		<u> </u>	Corrected	
					organization		-	tr	ansactı	on	Ye	s No	
							+						
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Cor rep (a) Name of	Complete if the organi reported an amount o				Form 990-EZ, Part V, line 38a 6, or 22 or from the (e) Original		(g)	, Part IV, line 26, or if t (g) In (h) default? Approved by board or committee?		(i)Wrıtten			
			То	From	1		Yes No				Yes	Yes No	
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Part IIII Gra	ints or Assista		_	ested Perso	ns.	line 27				1			
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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493105003130 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** RINGLING COLLEGE OF ART AND DESIGN INC 59-0637903 **Types of Property** (b) (c) (d) (a) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1,041,300 FMV/APPRAISAL 1 Art—Works of art . . Art-Historical treasures 3 Art—Fractional interests Books and publications Χ 29,860 FMV/APPRAISAL Clothing and household 2,259 FMV Χ goods Cars and other vehicles Boats and planes . . Intellectual property . . Χ 156,231 FMV Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . Other ▶ (Χ 1,264 FMV 25 ART SUPPLIES 26 Other ▶ (_ 28 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 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 No Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 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 Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Page 2 Schedule M (Form 990) (2018) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation THIRD PARTY AUCTION COMPANIES ARE HIRED TO LIQUIDATE ARTWORK DONATIONS PART I, LINE 32B Schedule M (Form 990) (2018)

efile GRAPH	IC prin	t - DO NOT PROCESS	As Filed Data -		DLN:	93493105003130
SCHEDULE O (Form 990 or 990- EZ) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.qov/Form990 for the latest information.					OMB No 1545-0047 2018 Open to Public Inspection	
Namel Brthe ofg RINGLING COLLEG	E OF ART	AND DESIGN INC			Employer identi 59-0637903	fication number
Return Reference	e O, Su	pplemental Information	1	Explanation		
FORM 990, PART III, LINE 1	O DEG IN THE OLL BO SIONAL LENCE IAL DE XTENS ON, OF EGREE D SER'	REES THAT PREPARE STU EIR CHOSEN AREA OF ART A DTH FULL- AND PART-TIME LS IN THE VISUAL ARTS THE EIN TEACHING AND FOSTEI VELOPMENT OF ITS STUDE BIVE CO-CURRICULAR STUE R WHEN APPROPRIATE, FO E PROGRAM, RINGLING CO	DENTS TO BE DISCI AND DESIGN RINGL STUDENTS FROM E HROUGH ITS POLICI RS THE AESTHETIC ENTS ACADEMIC PF DENT LIFE PROGRA R CONTINUED STUI LLEGE OFFERS COL REGIONAL COMMU	MARY MISSION IS TO PROVID ERNING VISUAL THINKERS ALING COLLEGE OF ART AND IDIVERSE BACKGROUNDS WHES AND PRACTICES, THE CO., INTELLECTUAL, PROFESSIOR OF AMBREVATE STUDENTS FOR DIES ON THE GRADUATE LEVURSES, LECTURES, EXHIBITINTY THROUGH ITS GALLERY	ND ETHICAL PRAG DESIGN STRIVES O INTEND TO BEG DLLEGE SUPPORT DNAL, PERSONAL, AREER SERVICES AN ART OR DESI JEL IN ADDITION ONS AND OTHER	CTITIONERS TO ENR COME PROFES S EXCEL , AND SOC , AND AN E GN PROFESSI TO ITS D ART-RELATE

Return Explanation

I FORM 990.	THE AUDIT COMMITTEE REVIEWS THE DRAFT REPORT WITH THE INDEPENDENT AUDIT FIRM AND COLLEGE S
1 01 1111 000,	THE ROOM COMMITTEE REVIEWS THE BIGHT THE WAS ENDERLY ROOM THROWN THE GOLD CO
PART VI.	TAFF PRIOR TO THE PUBLIC DISCLOSURE COPY BEING PROVIDED TO THE BOARD OF TRUSTEES. THIS MAI
FAINT VI,	TAFF FRIOR TO THE FUBLIC DISCLOSURE COFT BEING FROVIDED TO THE BOARD OF TRUSTEES. THIS MAI
CECTION B	NITAING THE DONORS DECLIFORS TO DEMAIN ANONYMOUS
SECTION B.	NTAINS THE DONORS' REQUESTS TO REMAIN ANONYMOUS
LUNIE 44B	
LINE 11B	

Return Explanation
Reference

FORM 990,	IN THE EVENT OF A POTENTIAL CONFLICT, THE TRUSTEE IN QUESTION WILL RECUSE THEMSELVES FROM
PART VI,	ANY DISCUSSION OR VOTE THE COLLEGE ANNUALLY PROVIDES A CONFLICT OF INTEREST POLICY AND FO
SECTION B,	RM TO ALL TRUSTEES AND KEY EMPLOYEES TO DISCLOSE ALL CONFLICTS OF INTEREST THESE RESPONSE
LINE 12C	S ARE REVIEWED TO DETERMINE IF THERE ARE ANY POTENTIAL ISSUES OR ITEMS FOR DISCLOSURE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT IS EVALUATED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES THE COMPENSATION COMMITTEE, A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE, IS RESPONSIBLE FOR THE ANNUAL EVALUATION AND FOR RECOMMENDATIONS CONCERNING COMPENSATION, PERSONNEL ACTIONS AND OTHER EMPLOYMENT ISSUES RELATED TO THE APPOINTMENT OF THE PRESIDENT THE COMPENSATION COMMITTEE CONDUCTS AN ANNUAL PERFORMANCE APPRAISAL, COLLECTS AND EVALUATES COMPARATIVE SALARY DATA FROM THE ASSOCIATION OF INDEPENDENT COLLEGES OF ART AND DESIGN (AICAD) AND 990 DATA, AND PROVIDES A RECOMMENDATION FOR THE PRESIDENT'S ANNUAL COMPENSATION TO THE EXECUTIVE COMMITTEE THE PROCESS REQUIRES THE MEMBERS OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES TO COMPLETE PERFORMANCE ASSESSMENT FORMS THE COMPENSATION COMMITTEE REVIEWS THE ASSESSMENT AND PREPARES A RECOMMENDATION FOR THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE REVIEWS THE DELIBERATIONS WITH THE BOARD OF TRUSTEES THE PRESIDENT EVALUATES AND DETERMINES THE COMPENSATION OF EACH SENIOR OFFICER USING AICAD DATA THE PRESIDENT REVIEWS THE COMPARATIVE DATA FOR EACH OF THE SENIOR OFFICERS WITH THE COMPENSATION COMMITTEE THE VICE PRESIDENT FOR FINANCE AND ADMINISTRATION, THE VICE PRESIDENT FOR ACADEMIC AFFAIRS, THE VICE PRESIDENT FOR HUMAN AND ORGANIZATIONAL DEVELOPMENT, THE VICE PRESIDENT FOR ADVANCEMENT, AND THE VICE PRESIDENT FOR STUDENT LIFE ARE SENIOR OFFICE RS EACH SENIOR OFFICER COMPLETES AN ANNUAL REPORT FOR THE PRESIDENT SREVIEW THE COLLEGE EVALUATES THE EFFECTIVENESS OF STAFF THROUGH THE PRESIDENT FOR BATA REVIEW AND DELIBERATIONS ANNUAL ASSESSMENT DOCUMENTS FOR THE PRESIDENT ARE ALSO MAINTAINED

Return Explanation
Reference

LINE 19

FORM 990, THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PART VI, PUBLIC UPON REQUEST SECTION C.

Return Explanation

Reference

FORM 990, PART XI, LINE 9

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -93,487 CHANGE IN VALUE OF GIFTED ARTWORK -2,900