DLN: 93493136091252

2020

OMB No. 1545-0047

# Form **990**

Department of the Treasury

## **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.

► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

Open to Public Inspection

		nue Service									
			alendar year, or tax year beging C Name of organization	nning 07-01-2020 , and endi	ing 06-30	0-2021	D. Francisco	:			
	ck if ap dress c	pplicable:	Wheaton College						ication number		
	me cha	-					36-2182	171			
	tial retu		Doing business as								
		/terminated return	Number and street (or P.O. hov if n	nail is not delivered to street address)	Room/sui	to	E Telephon	e number			
		n pending	501 College Avenue	ian is not delivered to screet address;	Roomysui	te	(630) 7!	52-5970			
				ntry, and ZIP or foreign postal code	1		(111)				
			Wheaton, IL 60187				<b>G</b> Gross red	eipts \$ 3	65,741,509		
			F Name and address of princip	al officer:		H(a) I	s this a group ret	urn for			
			Dr Philip G Ryken President 501 College Avenue			s	ubordinates?		□Yes <b>☑</b> No		
			Wheaton, IL 60187				re all subordinata ncluded?	es	☐ Yes ☐No		
<b>T</b> Ta:	x-exem	npt status:	<b>✓</b> 501(c)(3)	(insert no.) 4947(a)(1) or [	☐ 527		f "No," attach a li	st. (see			
J W	ebsite	e: www	w.wheaton.edu				Group exemption	•	•		
<b>K</b> Forr	n of org	ganization:	Corporation Trust Ass	ociation 🔲 Other 🕨		<b>L</b> Year of	formation: 1860	M State	of legal domicile: IL		
Pa	art I	Sumi	<b>mary</b> scribe the organization's mission o	er most significant activities:							
	l w	Vheaton C	College serves Jesus Christ and a	dvances his Kingdom through ex	cellence ir	n liberal a	rts and graduate	progran	ns that educate the		
Çe	<u> </u>	hole pers	son to build the church and benef	it society worldwide.							
Æ											
le l	-										
Activities & Governance			is box $ ightharpoonup \square$ if the organization di						ı		
<b>∞</b>			of voting members of the governi	- , , , , ,				3	17		
Se S	l		of independent voting members o		,			4	16		
Ĭ			nber of individuals employed in ca	, , ,	•			5	2,978		
PAC	l		nber of volunteers (estimate if ne	• •				6	73		
	l		elated business revenue from Par	, , ,				7a	-73,433		
	ь	Net unrel	ated business taxable income fro	m Form 990-T, line 39		<del></del>	,	7b	0		
	١.,	C+-:	dans and sympte (Dart VIII line 1 h	<b>\</b>			Prior Year	10.4	Current Year		
Ę	l		ions and grants (Part VIII, line 1h service revenue (Part VIII, line 2g		26,098,8 122,486,1		42,252,702 114,849,588				
Ravenue		_	ent income (Part VIII, column (A),		27,474,2		122,812,635				
æ	l		venue (Part VIII, column (A), lines	, , ,	•		794,4		861,435		
	l		enue—add lines 8 through 11 (mi	, , , , , , , , , , , , , , , , , , , ,	ne 12)		176,853,6		280,776,360		
	_		nd similar amounts paid (Part IX,		•		37,968,0		40,046,303		
	l		paid to or for members (Part IX, c	* **			,,-	0	(		
s	l		other compensation, employee b	* **		78,506,1	50	78,655,34			
ıse	l		nal fundraising fees (Part IX, colu				<u> </u>	0	, 5,555,5		
Expenses	ь-	Total fundr	raising expenses (Part IX, column (D),	line 25) ▶3,639,101							
Щ	17	Other exp	penses (Part IX, column (A), lines	11a-11d, 11f-24e)			45,556,9	41	44,917,259		
	18	Total exp	enses. Add lines 13–17 (must eq	ual Part IX, column (A), line 25)			162,031,1	67	163,618,905		
	19	Revenue	less expenses. Subtract line 18 fr	rom line 12			14,822,5	05	117,157,455		
₹ 6.8						Begin	ning of Current Y	ear	End of Year		
Net Assets or Fund Balances	]	Takal	ata (Dawl V. III 10)			-	022 202 2	60	1 105 305 616		
Ass HB	l		ets (Part X, line 16)		•		933,202,0		1,105,725,018		
ž,š	l		ilities (Part X, line 26)				171,755,9 761,446,0		178,713,717 927,011,301		
	rt II		ature Block	21 110111 111111 20	•		701,440,0	74	927,011,301		
			erjury, I declare that I have exam	nined this return, including accor	npanying	schedules	s and statements	, and to	the best of my		
	edge nowle		f, it is true, correct, and complete	e. Declaration of preparer (other	than offic	er) is bas	sed on all informa	ition of v	which preparer has		
ally K	HOWIE	uge.									
		*****					2022-05-16				
Sign		Signatu	ure of officer				Date				
Here	;		wick Rynbrandt VP for Finance & Opera r print name and title	ations							
		<b>       </b>	·	Droppror's signature		ato	1.	TIN			
Dai-	1		rint/Type preparer's name	Preparer's signature		ate	Check L if P	01321579	9		
Paid		r Fi	irm's name  CROWE LLP				self-employed Firm's EIN ► 35-	0921680			
	oare Onl	i.,									
USE	UIII	Y F	irm's address ► 225 West Wacker Driv	e Suite 2600			Phone no. (312) 8	399-7000			
			Chicago, IL 60606122	24					<u>_</u>		
Mav t	he IR	S discuss	this return with the preparer sho	wn above? (see instructions)				✓	res □No		

Form	n 990 (2020)					Page <b>2</b>
Pa	art III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to	any line in this Part III .		🗹
1	Briefly describe the o	rganization's mission:				
	aton College serves Jes on to build the church a			hrough excellence in libe	eral arts and graduate progra	ams that educate the whole
2	Did the organization	undertake any signific	ant program ser	vices during the year wh	nich were not listed on	
	the prior Form 990 o					. 🗌 Yes 🗹 No
	•	se new services on Sc				
3	Did the organization	cease conducting, or n	nake significant	changes in how it condu	icts, any program	
	services?					. 🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedu	le O.			
4	Section 501(c)(3) an		ons are required	to report the amount o	largest program services, as f grants and allocations to ot	
4a	(Code:	) (Expenses \$	96,458,827	including grants of \$	39,653,636 ) (Revenue \$	94,865,133 )
	See Additional Data					
4b	(Code:	) (Expenses \$	23,260,000	including grants of \$	0 ) (Revenue \$	191,437 )
	See Additional Data					
4c	(Code:	) (Expenses \$	12,373,000	including grants of \$	392,667 ) (Revenue \$	15,342,038 )
	See Additional Data					
	(Code:	) (Expenses \$	2,900,000	including grants of \$	0 ) (Revenue \$	5,229,650 )
		MMUNITY SCHOOL OF TH		IER SPORTS CAMPS. MINOR	PROGRAMS, APPLICATION FEES	, TUITION INSTALLMENT PLAN
	FEES, PARKING FINES, I ADVISED FUNDS. DONO DONOR TO RECOMMEND WITH THE DONOR'S REC	PARKING PERMITS AND LI PR-ADVISED FUND CONTR DISTRIBUTIONS TO COL COMMENDATION, THEY AF	IBUTIONS RECEIVE LEGE PROGRAMS ( RE SUBJECT TO APF	ED ARE ACCOUNTED FOR AS OR OTHER CHARITABLE ORG	S OTHER INVESTMENTS. DONOR- GANIZATIONS. ALTHOUGH THE C CHARITY SELECTION COMMITTER	
4d	FEES, PARKING FINES, I ADVISED FUNDS. DONO DONOR TO RECOMMENI WITH THE DONOR'S REC DISTRIBUTE A MAXIMUI	PARKING PERMITS AND LI PR-ADVISED FUND CONTR DISTRIBUTIONS TO COL COMMENDATION, THEY AF	IBUTIONS RECEIVE LEGE PROGRAMS ( RE SUBJECT TO APF DR-ADVISED FUND	ED ARE ACCOUNTED FOR AS OR OTHER CHARITABLE ORG PROVAL BY THE COLLEGE'S	S OTHER INVESTMENTS. DONOR- GANIZATIONS. ALTHOUGH THE C CHARITY SELECTION COMMITTER	ADVISED FUNDS ALLOW FOR THE OLLEGE GENERALLY COMPLIES
4d	FEES, PARKING FINES, I ADVISED FUNDS. DONO DONOR TO RECOMMENI WITH THE DONOR'S REC DISTRIBUTE A MAXIMUI	PARKING PERMITS AND LI R-ADVISED FUND CONTR DISTRIBUTIONS TO COL COMMENDATION, THEY A M OF 75% - 90% OF DONG CES (Describe in Sched	IBUTIONS RECEIVE LEGE PROGRAMS ( RE SUBJECT TO APF DR-ADVISED FUND	ED ARE ACCOUNTED FOR AS DR OTHER CHARITABLE ORC PROVAL BY THE COLLEGE'S CONTRIBUTIONS TO UNRE	S OTHER INVESTMENTS. DONOR- GANIZATIONS. ALTHOUGH THE C CHARITY SELECTION COMMITTER	ADVISED FUNDS ALLOW FOR THE OLLEGE GENERALLY COMPLIES

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

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Par	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J </i>	23	Yes	
	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L,</i> Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L,</i> Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $\$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	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
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	• ;		<u>✓</u>
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   4,320		Yes	No
	Enter the number reported in box 3 or Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
-	(gambling) winnings to prize winners?	1c	Yes	

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	Enter the number of employees reported on Form W-3, Transmittal of Wage and	1		
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule $O$	3b	Yes	
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►IS, UK	4a	Yes	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		N.a
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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?	15		No
16	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?  If "Yes," complete Form 4720, Schedule O.	16		No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to	lines
Se	ction 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  17			
	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 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		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?	<b>8</b> b	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			
114	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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		No
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 taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
	<del>-</del>	16b		
Se 17	ction C. Disclosure  List the states with which a copy of this Form 990 is required to be filed▶			
1/	CA , CO , AK , MI , SC , WA			
18	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)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  Carlos Garcia 501 College Avenue Wheaton, IL 60187 (630) 752-5970			

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII . . .

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

	for related							/W 2/1000	(1) 2/1000	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										
-										
										Form <b>990</b> (2020)

Part VII Section A. Officers, Direct	ors, Trustees	, Key I	Empl	loye	es,	and	High	hest Compensate	ed Employees	(cont	inued)	Page 8
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related	Position than on is b	on (do	(C) o not ox, u n off or/ti	che inles icer rust	eck moss persection and a	ore son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	ו	(F) Estima amount o compens from i organizati	ated of other sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W-2/1099- MISC)		relati relati organiza	ed
See Additional Data Table				H						+		
				H						$\top$		
										$\top$		
										$\top$		
1b Sub-Total				•		•						<b></b> _
d Total (add lines 1b and 1c)			<u></u>			•		2,903,497		0		882,048
Total number of individuals (including of reportable compensation from the			e liste	ed al	ove	e) who	rece	eived more than \$1	.00,000			
											Yes	No
3 Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>			ee, ke	ey er •	mplo •	oyee,	or hi	ghest compensated	l employee on	3		No
4 For any individual listed on line 1a, is organization and related organizations individual									n the	4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									ividual for	5	165	No
Section B. Independent Contract											1	
1 Complete this table for your five higher from the organization. Report comper										npens	sation	
Name a	(A) nd business addre	ess						Desc	(B) cription of services		(C Compen	
BON APPETIT 421 CHASE STREET								FOOD SERV	•			,171,381
WHEATON, IL 60187 MA MORTENSON CO								CONSTRUC	TION SERVICES		5	,060,199
25 NORTHWEST POINT BLVD SUITE 100 ELK GROVE VILLAGE, IL 60007												
POWER CONSTRUCTION CONSTRUCTION SERVICES									1	,027,992		
8750 W Bryn Mawr Ave Chicago, IL 60631  MED ASSOCIATES LLC												
MEP ASSOCIATES LLC 1111 DEMING WAY								ENGINEERI	NG CONSULTANTS			436,887
MADISON, WI 53717 KINSALE CONTRACTING GROUP								CONSTRUC	TION SERVICES			308,443
648 BLACKHAWK DR								2511511100				200,110
WESTMONT, IL 60559  2 Total number of independent contractor		not lim	ited t	o the	ose	listed	abov	ve) who received m	ore than \$100,00	00 of		
compensation from the organization > 1	.0										Form <b>99</b> 6	<b>0</b> (2020)
												- (-020)

		(2020)	-67							Page <b>9</b>
Part	VII	<del></del>			espo	nse or note to any	line in this Part VIII			🗆
		Check ii Selies	uuic	o contains a re	<u> </u>	inse of mote to unity	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a	Federated campaig	gns	1a	1	0		revenue		312 - 314
ons, Gifts, Grants Similar Amounts	b	Membership dues		. 11:		0				
S. C.	С	Fundraising events	s.	. 10	:	0				
ifts, ar A	d	Related organizati		10		543,702				
s, G	e	Government grants (			:	4,748,604				
e ii		All other contributions and similar amounts above  Noncash contributions			<u> </u>	36,960,396				
atribu 4 Oth	g	lines 1a - 1f:\$	S IIICI	1g		4,688,538				
Contand	h	<b>Total.</b> Add lines 1a	a-1f			•	42,252,702			
						Business Code	05.547.570	05.513.530		
a:	2	Tuition & Fees				611600	95,517,579	95,517,579		
Program Service Revenue	ł	Auxiliary Revenue				611600	15,342,038	15,342,038		
vice P	(	Public Service Revenu	ues			541800	737,931	737,931		
m Ser		Minor Program Rever	nues			611600	3,060,603	3,060,603		
Progra	•	Student Insurance				900099	191,437	191,437		
_		All other program				111.010.500	0	0	0	0
	╙	Investment income				114,849,588 aterest and other	1			
		similar amounts) .	•			•	8,006,19	0 (	-91,149	
		Income from invest Royalties				nd proceeds	23,85	`	0	23,857
		Royaldes I I I	_	(i) Real		(ii) Personal	, 	1		,
	ے ا	a Gross rents	6a		102	. , ,	1			
		Less: rental	Ua	41	,192		+			
		expenses	<b>6b</b> 0			_				
	С	Rental income or (loss)	6с	41	,192		o			
	١,	<b>d</b> Net rental income	or	(loss)			41,19	2		41,192
				(i) Securitie	!S	(ii) Other	4			
	7a	Gross amount from sales of assets other than inventory	7a	197,910	,000	1,861,58	6			
	b	Less: cost or other basis and sales expenses	7b	84,725	,260	239,88	9			
		Gain or (loss)	7c							
		<b>d</b> Net gain or (loss) <b>a</b> Gross income from fu		_	•	· · · •	114,806,43	7		114,806,437
Other Revenue	0.	(not including \$ contributions reporte See Part IV, line 18	d on	of line 1c).	8a					
Re		<b>b</b> Less: direct expen	ises		8b		-			
her	١,	c Net income or (los	ss) fi	rom fundraising	eve	ents 🕨	<b>_</b>			
	9a	Gross income from See <b>Part</b> IV, line 19	gam	ing activities.	9a					
		<b>b</b> Less: direct expen	ises		9b		-			
	١,	c Net income or (los	ss) fi	rom gaming ac	tiviti:	es 🕨	<u> </u>			
	10	aGross sales of inve returns and allowa	ento	_						
		<b>b</b> Less: cost of good		L L	10a 10b		_			
		C Net income or (los				ory ►				
		Miscellaneo	us R			Business Code				
	1:	<b>La</b> Trust Company Fo	ees			56100	0 796,38	6 778,670	17,716	0
		b			$\dashv$					
	,	c			$\dashv$					
		<b>d</b> All other revenue <b>e Total.</b> Add lines 1			L	•		0 0	) C	0
		2 Total revenue. S			•		796,38	6		
		- rotar revenue. 5	ee II	iiou actions .	_	• • • •	280,776,36	0 115,628,258	-73,433	122,968,833 Form <b>990</b> (2020)

	(2020)				Page 10
P	art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must c	omplete all columns	All other organization	ns must complete colu	mn (A)
	Check if Schedule O contains a response or note to an		_	ns must complete colu	ПП (A).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,359,434	2,359,434	general expenses	одрешеее
2	Grants and other assistance to domestic individuals. See Part IV, line 22	37,686,869	37,686,869		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,871,684	939,919	1,622,319	309,446
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	366,873	158,755	208,118	0
7	Other salaries and wages	57,848,547	48,229,619	7,528,761	2,090,167
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,721,044	2,365,400	223,936	131,708
9	Other employee benefits	10,786,335	9,376,548	887,693	522,094
10	Payroll taxes	4,060,860	3,530,101	334,200	196,559
11	Fees for services (non-employees):				
	a Management	0	0		
	b Legal	252,799	5,635	247,164	
	Accounting	263,129	0	263,129	
	d Lobbying	200,123	Ů	203,123	
	· ·				
	e Professional fundraising services. See Part IV, line 17	489,700	0	489,700	
	Investment management fees				20 142
	3 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,657,651	6,160,248	3,469,261	28,142
12	Advertising and promotion	1,030,028	414,768	456,685	158,575
	Office expenses	3,233,053	1,686,640	1,481,283	65,130
14	Information technology	2,139,239	585,265	1,553,974	
15	Royalties				
16	Occupancy	6,736,199	6,248,590	429,744	57,865
17	Travel	482,153	462,316	6,251	13,586
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	173,329	172,320	1,009	
20	Interest	2,419,005	0	2,419,005	
21	Payments to affiliates	0	0	0	
22	Depreciation, depletion, and amortization	12,766,746	11,296,913	1,469,833	
23	Insurance	1,401,035	482,943	918,092	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a PRINTING AND PUBLICATIONS	540,440	311,365	201,047	28,028
	b TRAINING	500,496	410,455	74,982	15,059
	c Special Projects	456,560	231,720	224,840	0
	d DUES & MEMBERSHIPS	365,202	210,572	143,414	11,216
	e All other expenses	2,010,495	1,665,432	333,537	11,526
25	Total functional expenses. Add lines 1 through 24e	163,618,905	134,991,827	24,987,977	3,639,101
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).				
	Check here F Li ii following 50F 30°2 (A3C 350°720).				

Assets

11

12

13

14

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16

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21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Page **11** 

1,819,054

70,003

5.749.220

2,975,193

231,888,788

744,425,655

61.171.007

2,190,630

7,699,559

12,791,900

4.196.541

49.500.000

112,225,276

178.713.717

368,979,609

558,031,692

927,011,301

1,105,725,018

Form 990 (2020)

1,105,725,018

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

	Deginning or year		Lift of year
1 Cash-non-interest-bearing		1	
2 Savings and temporary cash investments	28,334,205	2	37,492,348
3 Pledges and grants receivable, net	4,542,644	3	10,243,561

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under

Notes and loans receivable, net . . . .

Inventories for sale or use . . . . Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Investments—other securities. See Part IV, line 11 . . .

**Total assets.** Add lines 1 through 15 (must equal line 33) .

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

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

Organizations that follow FASB ASC 958, check here <a> \square</a> and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

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

Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \end{and} \)

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

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11 .

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

442,909,936

211,021,148

10a

10b

235,825,244

598,498,652

45.080.103

2,777,355

6,101,218

933,202,060

14,840,306

2.764.545

42,000,000

112,151,135

171.755.986

312,327,102

449,118,972

761,446,074

933,202,060

10c

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12

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16

17

18

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33

2.565.042

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

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

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

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

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

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

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2b

2c

3a

3b

Yes

Yes

Yes

Yes Form 990 (2020)

Separate basis

consolidated basis, or both:

Audit Act and OMB Circular A-133?

☐ Separate basis

Consolidated basis

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

Consolidated basis

### **Additional Data**

**Software ID: 20011424** Software Version: 2020v4.0

**EIN:** 36-2182171

Name: Wheaton College

Doctoral degrees. There are approximately 3,000 students enrolled at the College.

Form 990 (2020) Form 990, Part III, Line 4a:

EDUCATION AND INSTRUCTION - The College offers undergraduate degrees in 44 areas of major study including 6 in the Conservatory; 16 Master of Arts degrees and 3

#### Form 990, Part III, Line 4b: STUDENT SERVICES - PROGRAMS ARE PROVIDED FOR THE ENRICHMENT OF THE STUDENTS TO ALLOW THEM TO EXPERIENCE LIFE AS A CHRISTIAN COMMUNITY. WHEATON COLLEGE ATHLETICS SPONSORS 21 SPORTS FOR MALE AND FEMALE STUDENT ATHLETES.

### Form 990, Part III, Line 4c: AUXILIARY ENTERPRISES - THE COLLEGE PROVIDES ROOM AND BOARD FOR ITS STUDENTS.

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

organization and related organizations

194,064

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

	any hours	'	direct	or/ti	ruste	ee)		organization (W-	organizations (W- 2/1099-
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)
Andrea D Scott	2.0	х		x				0	
Vice Chair/Trustee	0.0	l		<b> </b> ^				9	
James Goetz	2.0	l							
Chair/Trustee	1.0	X		X				0	
Kathryn H Vaselkiv	2.0								

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363,618

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and Independent Contractors

Secretary/Trustee

President/Trustee

Barbara W Anderson

Trustee-elected May 2021

Former Secretary/Trustee

Philip G Ryken

Charles Pollard

Dale Wong

Darrell Bock

David K Gieser

**Emery Lindsay** 

Trustee

Trustee

Trustee

Trustee

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

Officer

Institutional

Truste

Key employee

Individual trustee or director

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Highest compensated employee

Former

2/1099-MISC)

266,444

(W- 2/1099-

MISC)

0

organization and

related

organizations

46,387

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

	any hours for related organizations below dotted line)
Gregory Jao	2.0
Trustee-elected May 2021	0.0
Gregory Waybright	2.0
Trustee until August 2020	1.0

and Independent Contractors

Jeffrey Meyer

John Augustine

Kurt Keilhacker

Mary Schaller Trustee

Philip G Hubbard

Steven Preston

Shundrawn A Thomas

Trustee until October 2020

J Chadwick Rynbrandt

VP for Finance & Operations, Treasurer

Trustee

Trustee

Trustee

Trustee

Trustee

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

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147,041

174,655

177,465

156,469

181,729

159,930

organization and related organizations

13,641

49,011

44,674

98,262

16,405

47,626

76,125

34,222

31,945

25,280

0

0

0

0

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

	any hours		direct			ee)	1	organization (W-	organizations	ĺ
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	
Karen Lee	40.0			x				104,245	0	Г
Provost-started August 2020	0.0							104,243	0	L
Kirk D Farney	40.0			x				232,342	0	
VP for Advancement & Alumni Relations	0.0									L
Margaret Diddams	40.0									
Provost Until July 2020	0.0			X				146,467	0	
Paul Chelsen	40.0									Γ
				X				170,256	0	1

0.0

40.0

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40.0

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and Independent Contractors

Vice President - Student Development

Chief Enrollment Management Officer

Director of Facilities until March 2021

Chief Intercultural Engagement Officer until June

Sheila Caldwell

Silvio Vazquez

Kenneth Larson

Scott Okesson

Wendy Woodward

Carlos Garcia

Controller

CICSO until June 2021

Investment Manager

2021

(C) (A) (B) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation

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

and Independent Contractors

Michael Wilder

Randy Norbeck

Dean of Music & Communications

Director of Construction & Maintenance

	week (list any hours		oth a direct			and a	ì	from the organization (W-	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
EDWARD STETZER	0.0					x		181,547	0	67,844
DEAN & EXEC DIR WCBGC	40.0					^		101,547		07,044
Jamie Aten	40.0					l			_	
Professor/Exec Director of HDI	0.0					X		147,091	0	40,339

EDWARD STETZER	0.0						
				Х	181,547	0	67
DEAN & EXEC DIR WCBGC	40.0						
Jamie Aten	40.0						
Sum Fitter				Х	147,091	0	40
Professor/Exec Director of HDI	ا ۱ ۱						

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147,129

147,069

38,261

57,962

40.0

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SCI	HED	ULE A	- Dublic (	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99			ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2020
		f the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam		nie Service he organiza	tion				Employer identific	<u> </u>
		eye					36-2182171	
	rt I		for Public Charity Statu				See instructions.	
	rganız		a private foundation because	•	•		(A)(!)	
1		•	onvention of churches, or as					
2	<b>✓</b>		scribed in <b>section 170(b)(</b>		,	, ,		
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	ation operated for the benefit (iv). (Complete Part II.)	-				bed in <b>section 170</b>
6		A federal, s	tate, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).	
7			ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in
8		A communi	ty trust described in <b>section</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. Se					ege or university or a
10		from activit investment	ation that normally receives: dies related to its exempt fun income and unrelated busin dee section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See <b>section 509</b>	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	lescribed in <b>section 5</b>	09(a)(1) or se	ction 509(a)(2	). See <b>section 509(</b> a	
a		organizatio	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ppoint or elect a majo				
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ation vested in the sar				
С		Type III f	unctionally integrated. A s organization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization received Type III non-functionally	ved a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter				-		<u> </u>	
g	Provi	de the follow	ing information about the su	pported organization(	r '			
	(i) N	(ii) Name of supported organization  (iii) EIN  (iii) Type of organization (described on lines 1-10 above (see instructions))  (iv) Is the organization in your governing do			(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No		
Tota			tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.

_	If the organization failed	to qualify unde	er the tests listed	below, please	complete Part I	II.)	
	Section A. Public Support  Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	27,339,674	35,101,633	40,814,476	26,098,804	. ,	171,607,289
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	o	0	0	0	0	0
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	27,339,674	35,101,633	40,814,476	26,098,804	42,252,702	171,607,289 4,260,339
5	<b>Public support.</b> Subtract line 5 from line 4.						167,346,950
5	Section B. Total Support			'			
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	, , , ,	27,339,674	35,101,633	40,814,476	26,098,804	42,252,702	171,607,289
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,832,073	9,053,607	11,295,072	12,013,308	8,071,247	49,265,307
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	or loss from the sale of capital assets (Explain in Part VI.).	1,474,364	1,410,312	1,070,794	735,307	796,386	5,487,163
11	<b>Total support.</b> Add lines 7 through 10						226,359,759
	Cross reseints from related activities	ota (aga instructi				140	500 010 001

	this box and step here	ine organization s	11130, 3000
13	First 5 years. If the Form 990 is for t	the organization's	first seco
12	Gross receipts from related activities,	etc. (see instruction	ons)
11	<b>Total support.</b> Add lines 7 through 10		
	assets (Explain in Part VI.)		

Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) . . . . . . . . . .

16a 33 1/3% support test-2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

h 33 1/3% support test-2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 

15 Public support percentage for 2019 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . .

ond, third, fourth, or fifth tax year as a section 501(c)(3) organization, check

73.93 %

70.77 %

14

15

Schedule A (Form 990 or 990-EZ) 2020

Page 2

Section C. Computation of Public Support Percentage

Р	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	quality under	the tests listed	pelow, please co	omplete Part II.	)	
Se	ection A. Public Support						1
	Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are						
•	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
3	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
	ection B. Total Support		1	1	Γ	Π	1
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on	I					
	securities loans, rents, royalties and	I					
	income from similar sources.						
b	Unrelated business taxable income	I					
	(less section 511 taxes) from businesses acquired after June 30,	I					
	1975.	I					
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,	I					
	whether or not the business is	I					
12	regularly carried on.		-				1
12	Other income. Do not include gain or loss from the sale of capital assets	1					
	(Explain in Part VI.)	1					
13							
	11, and 12.).		<u> </u>	1.6 11 601 1		F04( )(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	-			•	. , , ,	· —
	check this box and <b>stop here</b>					<u></u>	<u>▶⊔</u>
	ection C. Computation of Public S			(6)			
15	Public support percentage for 2020 (lin					15	
16	Public support percentage from 2019 S					16	
	ection D. Computation of Investi				.,		
17	Investment income percentage for 202	•	.,	•	• •	17	
18	Investment income percentage from 2	<b>019</b> Schedule A,	Part III, line 17 .			18	
19a	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more thar	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and s	stop here. The o	rganization qualifi	es as a publicly su	ipported organiza	tion	. ▶□
	33 1/3% support tests—2019. If the						
	not more than 33 1/3%, check this box	and <b>stop here.</b>	The organization	qualifies as a publ	icly supported org	anization	. ▶ □
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	▶ 🗆

Page 4

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,					
	describe the designation. If historic and continuing relationship, explain.	1				
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described					
	in section 509(a)(1) or (2).	2				
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and					
	3c below.					
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.					
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					

	III Section 303(a)(1) or (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and				
	3c below.	3a			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the				
	determination.				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				

	the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination.			
С	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.			
	If tes, explain in <b>Part v1</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.			
	Checked Box 12a of 12b III Falt I, answer lines 4b and 4c below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
5	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the			

C						
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or					
	supervised by or in connection with its supported organizations.					
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the					
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).					

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b 5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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

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

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

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

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

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

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

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

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

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

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

the organization had excess business holdings).

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

provide detail in Part VI.

answer line 10b below.

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
		e organization accepted a gift or contribution from any of the following persons?			
а		on who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the hing body of a supported organization?	11a		
b	A fami	ily member of a person described in 11a above?	11b		
		o controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in <b>Part</b>	11c		
_	VI.	B. Type I Supporting Organizations			
	ection	b. Type I Supporting Organizations		Yes	No
1	appoir descrit activit remov	e officers, directors, trustees, or membership of one or more supported organizations have the power to regularly be or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," be in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's ies. If the organization had more than one supported organization, describe how the powers to appoint and/or be directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that		_		
	operat <i>carried</i>	ted, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit dout the purposes of the supported organization(s) that operated, supervised or controlled the supporting ization.	2		
_					
5	ection	C. Type II Supporting Organizations		Yes	No
1	Were:	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of		163	110
-	each d	of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the rting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection	D. All Type III Supporting Organizations			
				Yes	No
1	tax ye Form 9	e organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ar, (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			
	docum	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 <b>Part VI</b> how the organization ained a close and continuous working relationship with the supported organization(s).			
_			2		
3	voice i	ison of the relationship described in line 2 above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at all times the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection	E. Type III Functionally-Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons):		
	a 🗌	The organization satisfied the Activities Test. Complete line 2 below.			
	b 🗆	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c 🗌	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activit	ies Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
	suppor o <b>rgan</b> respor	bstantially all of the organization's activities during the tax year directly further the exempt purposes of the rted organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported lizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was sive to those supported organizations, and how the organization determined that these activities constituted	2-		
		entially all of its activities.  e activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the	2a		
	organi <i>organi</i>	zation's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the zation's position that its supported organization(s) would have engaged in these activities but for the organization's ement.	2b		
3		of Supported Organizations. Answer lines 3a and 3b below.	20		
	a Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of pported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .	3a		
		e organization exercise a substantial degree of direction over the policies, programs and activities of each of its red organizations? <i>If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.</i>	3b		
			30		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors

(explain in detail in Part VI): 2

Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).

Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 7 Recoveries of prior-year distributions

8

Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

Income tax imposed in prior year

instructions)

temporary reduction (see instructions)

5

7

Enter greater of line 2 or line 3 4

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

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

1 2 3

3

4

5

6

7

8

4

5

6

Schedule A (Form 990 or 990-F7) 2020

Current Year

_1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.			7	
3 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions			8	
9 Distributable amount for 2020 from Section C, line 6	9 Distributable amount for 2020 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	Underdistributions		ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions if any for years prior to 2020				

8 Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions			8		
9 Distributable amount for 2020 fr	rom Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10		
Section E - Distribution (see instruction		(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from	om Section C, line 6				
2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions.					
3 Excess distributions carryover, if	any, to 2020:				
a From 2015			·		
<b>b</b> From 2016					

(see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020:			
a From 2015			
<b>b</b> From 2016			
c From 2017			
<b>d</b> From 2018			
e From 2019			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see			

See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
<b>b</b> From 2016		
c From 2017		
<b>d</b> From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2020 distributable amount		
<ul> <li>Carryover from 2015 not applied (see instructions)</li> </ul>		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2020 distributable amount		

f Total of lines 3a through e		
<b>g</b> Applied to underdistributions of prior years		
<b>h</b> Applied to 2020 distributable amount		
<ul> <li>Carryover from 2015 not applied (see instructions)</li> </ul>		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
<b>\$</b>		
<ul> <li>a Applied to underdistributions of prior years</li> </ul>		
<b>b</b> Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to		

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. 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 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. . . . . **b** Excess from 2017. . . . . c Excess from 2018. . . . .

e Excess from 2020. . . . .

3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2020 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Part VI Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V. Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions). Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation Schedule A. Part II. Line 10 DESCRIPTION - NET INCOME FROM FUNDRAISING EVENTS, COLUMN A - -17123.0, COLUMN B - 0.0, COL Other Income UMN C - 0.0, COLUMN D - 0.0, COLUMN E - 0.0, COLUMN F - -17123.0; DESCRIPTION - NET GAIN F ROM SALE OF INVENTORY, COLUMN A - 830379.0, COLUMN B - 737027.0, COLUMN C - 422687.0, COLU MN D - 0.0. COLUMN E - 0.0. COLUMN F - 1990093.0: DESCRIPTION - TRUST COMPANY FEES, COLUMN A - 661108.0, COLUMN B - 673285.0, COLUMN C - 648107.0, COLUMN D - 735307.0, COLUMN E - 7

96386.0, COLUMN F - 3514193.0;

**SCHEDULE D** 

DLN: 93493136091252

OMB No. 1545-0047

### **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.

Department of the Treasury

(Form 990)

tern	al Revenue Service	► Go to <u>www.irs.gov/For</u>	m990 for instructions and the latest infor	mation. Inspection
Name of the organization Employer identification number				
Wh€	eaton College			36-2182171
Pa	art I Organi	zations Maintaining Donor Adv	ised Funds or Other Similar Funds o	l
	Comple	ete if the organization answered "Y		
			(a) Donor advised funds	(b) Funds and other accounts
•		end of year	20	(
2	55 5	of contributions to (during year)	415,623	(
•	Aggregate value	of grants from (during year)	3,245,857	(
ŀ	Aggregate value	at end of year	10,450,566	(
•			ors in writing that the assets held in donor adv xclusive legal control?	
i	charitable purpo	oses and not for the benefit of the done	lonor advisors in writing that grant funds can l or or donor advisor, or for any other purpose c	
Pa		vation Easements.		
		ete if the organization answered "Y		
•		onservation easements held by the org		
	☐ Preservation	on of land for public use (e.g., recreation	on or education) $\square$ Preservation of an	historically important land area
	☐ Protection	of natural habitat	☐ Preservation of a c	ertified historic structure
	☐ Preservation	on of open space		
2		2a through 2d if the organization held a e last day of the tax year.	a qualified conservation contribution in the form	m of a conservation  Held at the End of the Year
а	Total number of	conservation easements		2a
b	Total acreage re	estricted by conservation easements .		2b
c	Number of conse	ervation easements on a certified histo	ric structure included in (a)	2c
d	Number of conse structure listed i	ervation easements included in (c) acquin the National Register	uired after 7/25/06, and not on a historic	2d
3	Number of cons tax year ►	servation easements modified, transferr	red, released, extinguished, or terminated by t	he organization during the
Ļ	Number of state	es where property subject to conservati	on easement is located 🕨	
•		ization have a written policy regarding nt of the conservation easements it hold	the periodic monitoring, inspection, handling ods?	of violations,
<b>,</b>	Staff and volunt	teer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcing co	
,	Amount of expe	enses incurred in monitoring, inspecting	, handling of violations, and enforcing conserv	ration easements during the year
3	Does each cons		) above satisfy the requirements of section 17	70(h)(4)(B)(i)
)			servation easements in its revenue and expen e footnote to the organization's financial state	se statement, and
ar	the organization	n's accounting for conservation easeme		
	Comple	te if the organization answered "Y	es" on Form 990, Part IV, line 8.	
.a	historical treasu		SC 958, not to report in its revenue statemen blic exhibition, education, or research in furthe nents that describes these items.	
b	historical treasu		SC 958, to report in its revenue statement an blic exhibition, education, or research in furthe	
(	-	-		▶\$ 0
				<u> </u>
<u>(</u>	If the organizati	ion received or held works of art, histor	rical treasures, or other similar assets for finar	
а	-	nts required to be reported under FASB ed on Form 990. Part VIII, line 1	ASC 958 relating to these items:	<b>▶</b> \$
a b		·		·
	, works michaeld			

**d** Equipment .

scne	edule D (Form 990) 2020								Page 2
Par	t IIII Organizations Mainta	ining Collections o	of Art, Histor	ical Tr	easures, o	Other	Similar Assets	(continue	1)
3	Using the organization's acquisitio items (check all that apply):	n, accession, and other	·	any of t	he following t	hat are a	significant use of i	ts collection	on
а	✓ Public exhibition		d	<b>✓</b>	Loan or exch	ange prog	rams		
b	Scholarly research		е		Other				
С	✓ Preservation for future gene	erations							
4	Provide a description of the organi Part XIII.	ization's collections and	explain how th	ey furth	er the organiz	ation's ex	empt purpose in		
5	During the year, did the organizat assets to be sold to raise funds rat						_	es ☑	No
Pai	rt IV Escrow and Custodial Complete if the organize X, line 21.		" on Form 990	), Part	IV, line 9, o	r reporte	d an amount on	Form 99	0, Part
1a	Is the organization an agent, trust included on Form 990, Part X?							es 🗆	No
b	If "Yes," explain the arrangement	in Part XIII and comple	ete the following	table:			Amount		
c	Beginning balance	'	-			1c			
d	Additions during the year					<b>1</b> d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an an	nount on Form 990, Par	t X, line 21, for	escrow	or custodial a	ccount lia	bility? 🗆 Y	es 🗆	No
b	If "Yes," explain the arrangement								
Pa	rt V Endowment Funds.				'				
	Complete if the organize	ation answered "Yes							
		(a) Currer		Prior year		ears back	(d) Three years back	+	years back
	Beginning of year balance		,044,000	503,365,		39,131,000	446,376,000		88,033,000
	Contributions	453	,367,000	5,549, 15,689,		.0,973,999 24,264,000	7,709,000 57,009,000		4,647,000 76,988,000
	Net investment earnings, gains, and	103363	·				, ,		
	Grants or scholarships	22	,466,000	21,288	000 2	20,207,000	18,405,000		17,865,000
	Other expenditures for facilities and programs		,388,000	1,272,	000	796,000	3,558,000		5,427,000
f	Administrative expenses		0		0	0	С		0
g	End of year balance	647	,433,000	502,044	000 50	3,365,999	489,131,000	4	46,376,000
2	Provide the estimated percentage	of the current year end	l balance (line 1	g, colun	nn (a)) held a	s:			
а	Board designated or quasi-endowr	ment ▶ 24.63 %							
b	Permanent endowment ► 75.	37 %							
c	Term endowment ► 0 %	*******							
	The percentages on lines 2a, 2b, a	and 2c should equal 100	0%.						
3a	organization by:	the possession of the o	organization tha	t are he	ld and admin	istered foi	_	Ye	
	(i) Unrelated organizations						<u> </u>	Ba(i)	No
<b>L</b>	. ,						3	a(ii)	No
ь 4	If "Yes" on 3a(ii), are the related of Describe in Part XIII the intended							3b	
	rt VI Land, Buildings, and		ii 3 endowinelit	ianas.					
e e	Complete if the organization		" on Form 990	), Part	IV, line 11a.	See For	m 990, Part X. li	ne 10.	
		a) Cost or other basis (investment)	(b) Cost or other	<u> </u>	<del></del>		epreciation	(d) Book v	alue
12	Land			17,90	5.997				17,906,997
	Buildings			334,55	<u> </u>		154,539,094		180,020,322
	Leasehold improvements				5 282	•	1 007 045		1 498 237

46,663,211

41,275,030

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

7,196,680

25,266,552

39,466,531

16,008,478

Complete if the organization answered "Yes" on	Form 990, Part IV, li	<u>ne 11b.See Form 990</u>	, Part X, line 12.
(a) Description of security or category	(b) Book value		hod of valuation:
(including name of security)		Cost or end-	of-year market value
L) Financial derivatives			
3) Other			
A) Partnership Investments	61,171,007		С
0)			
-1			
<u>=</u> )			
=)			
G)			
-)			
H)			
)			
,			
	<b>▶</b> 61,171,007		
art VIII Investments—Program Related.	Form 000 Part IV li	no 11c Soo Form 000	Dort V line 12
Complete if the organization answered 'Yes' on  (a) Description of investment	FORM 990, Part IV, II	(b) Book value	
(a) Description of investment		(b) Book value	Cost or end-of-year market
			value
L)			
2)			
3)			
1)		1	
7)			
5)			
5)			
7)			
'1			
3)			
9)			
10)			
otal. (Column (b) must equal Form 990, Part X, col.(B) line 13.)			
Part IX Other Assets.		- 1	
Complete if the organization answered 'Yes' on	Form 990, Part IV, lir	ie 11d. See Form 990, I	
(a) Description	on		(b) Book value
1)			
2)			
3)			
4)			
5)			
5)			
7)			
7)			
8)			
9)			
<del>?</del> )			
10)			
otal. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			
Part X Other Liabilities.	<u> </u>		· •
Complete if the organization answered 'Yes' on	Form 990, Part IV, lir	ie 11e or 11f.See Fori	m 990, Part X, line 25.
. (a) Description of	liability		(b) Book
L) Federal income taxes			value 0
OBLIGATIONS UNDER ANNUITIES, SPLIT-INTRST AGREEMENTS	, OTHER TRST BENEFICE	ARIES	92,470,576
) INTEREST RATE SWAP AGREEMENT			5,420,388
) ASSET RETIREMENT OBLIGATION			2,878,525
) REFUNDABLE U.S. GOVERNMENT GRANTS FOR STUDENT LOANS	 5		2,318,051
POST-RETIREMENT BENEFITS OBLIGATION			9,137,736
5)			
			<del></del>
7)			
8)			
01			
9)			
otal. (Column (b) must equal Form 990, Part X, col.(B) line 25.)			<b>▶</b> 112,225,276
Liability for uncertain tax positions. In Part XIII, provide the text	of the feetnets to the or	itila financial etc	

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2020

1

4c

5

2e

3

4c

5

37,686,869

37,686,869

Page 4

48,407,772

243,089,491

37,686,869

280,776,360

125,932,036

125,932,036

37,686,869

163.618.905

Schedule D (Form 990) 2020

4b

2a 2b

2c

2d

4a

4b

Explanation

2c Recoveries of prior year grants . . . . . . d Other (Describe in Part XIII.) 2d -12.811.758

e 2e Subtract line 2e from line 1 . . . . . . . . . . . 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Investment expenses not included on Form 990, Part VIII, line 7b . 4a

b

Add lines **4a** and **4b** . . . . . . C 5

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

Part XII

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

Total expenses and losses per audited financial statements . . . . . .

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

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:

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

Supplemental Information

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

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

Donated services and use of facilities . .

Prior year adjustments . . . . .

Subtract line 2e from line 1 . . . .

Other losses . . . . . .

Add lines 2a through 2d .

Return Reference

Other (Describe in Part XIII.) . . .

chedule D (Form 990) 2020	Page <b>5</b>
Part XIII Supplemental Inform	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2020

#### **Additional Data**

**Software ID:** 20011424 **Software Version:** 2020v4.0 **EIN:** 36-2182171

Name: Wheaton College

### Supplemental Information

Supplemental Information	
Return Reference	Explanation
Schedule D, Part II CONSERVATION EASEMENTS	Wheaton College owns 21 acres of land subject to a conservation easement held by Northwood s Land Trust, Inc. (an unrelated tax-exempt charitable organization). Northwoods Land Trus t, Inc. acquired the conservation easement in 2005 from private landowners, subject to an agreement that permitted the use of the land as an outpost camping site by HoneyRock/Wheat on College. The subject property was subsequently contributed to Wheaton College by the pr

ivate landowners in 2010.

Supplemental Information		
Return Reference	Explanation	
Schedule D, Part III, Line 4 Collections of art - description of collections	WHEATON COLLEGE HAS PIECES OF ART AND ARTIFACTS, VARIOUS LITERARY COLLECTIONS, ORIGINAL MA NUSCRIPTS, PRIVATE PAPERS, AND RARE BOOKS OF SEVERAL AUTHORS. WHEATON COLLEGE'S COLLECTION OF BOOKS AND EXHIBITS ARE DEDICATED TO THE MESSAGE AND HISTORY OF EVANGELISM IN AMERICA. THE BOOKS AND EXHIBITS PROVIDE RESOURCES FOR RESEARCH AND STUDY. THE MARION E. WADE CENTER PROMOTES CULTURAL ENGAGEMENT AND SPIRITUAL FORMATION BY OFFERING A COLLECTION OF RESOURCE S AVAILABLE NOWHERE ELSE IN THE WORLD. WE EMPHASIZE THE ONGOING RELEVANCE OF SEVEN BRITISH CHRISTIAN AUTHORS WHO PROVIDE A DISTINCTIVE BLEND OF INTELLECT, IMAGINATION, AND FAITH: C. S. LEWIS, J.R.R. TOLKIEN, DOROTHY L. SAYERS, GEORGE MACDONALD, G.K. CHESTERTON, OWEN BARF IELD, AND CHARLES WILLIAMS. THE WADE CENTER IMPLEMENTS THESE GOALS BY: * ASSISTING SCHOLAR S IN THEIR STUDY OF UNIQUE MATERIALS BY AND ABOUT THESE SEVEN AUTHORS IN ORDER TO GENERATE NEW UNDERSTANDINGS; * SHARING INSIGHTS WITH A BROADER AUDIENCE THROUGH OUR NUMEROUS PROGR  AMS AND PUBLICATIONS; * SUPPORTING ARTISTIC WORKS INSPIRED BY OUR AUTHORS; * WELCOMING VIS ITORS TO OUR MUSEUM. THE WADE CENTER IS OPEN TO THE GENERAL PUBLIC AS WELL AS THE WHEATON COLLEGE COMMUNITY. THERE IS NO ADMISSION FEE. THE ARCHAEOLOGY MUSEUM CONTAINS MORE THAN 14,000 ARTIFACTS EXCAVATED BY JOSEPH P. FREE, WHO SERVED AS PROFESSOR OF ARCHAEOLOGY AT WHEA TON COLLEGE FROM 1953-1964. THE EXCAVATION SITE WAS THE ANCIENT CITY OF DOTHAN LOCATED JUS T TEN KILOMETERS FROM MODERN-DAY JENIN IN PALESTINE. THE MUSEUM IS OPEN TO THE PUBLIC AND IS LOCATED ON THE FIFTH FLOOR OF THE BILLY GRAHAM CENTER ARCHIVES ARE A MAJOR RESEARCH COL LECTION OF UNPUBLISHED MATERIALS RELATING TO NORTH AMERICAN, PROTESTANT, NON-DENOMINATIONA L EVANGELISM AND GLOBAL MISSIONS EFFORTS. THE WHEATON COLLEGE BILLY GRAHAM CENTER ARCHIVES ARE A MAJOR RESEARCH COL LECTION OF UNPUBLISHED MATERIALS RELATING TO NORTH AMERICAN, PROTESTANT, NON-DENOMINATIONA L EVANGELISM AND GLOBAL MISSIONS EFFORTS. THE WHEATON COLLEGE BILLY GRAHAM CENTER ARCHIVES ARE LOCATED ON THE THIRD F	

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	The intended use of the Endowment Funds are for Student Scholarships and Student Loans and for Operations.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The College and the Wheaton College Billy Graham Center have received determination letter s from the Internal Revenue Service indicating they are tax-exempt organizations described in Section 501(c)(3) of the Internal Revenue Code (the Code). Accordingly, they are gener ally exempt from income taxes pursuant to Section 501(a) of the Code, except for taxes per taining to unrelated business income. The College believes it has taken no uncertain tax n

ositions as of June 30, 2021 or 2020.

Supplemental Information	
Return Reference	Explanation
Other revenues in audited	CHANGE IN THE VALUE OF ANNUITIES10753945 CHANGE IN THE VALUE OF THE BOND SWAP - 191325 6 POSTRETIREMENT BENEFIT CHANGES279198 DONOR ADVISED FUNDS OTHER2359434 DONOR ADVISED FUNDS TO WHEATON COLLEGE1332437

\_ \_ \_

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Scholarships - 37686869

s

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Scholarships - 37686869

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE E** (Form 990 or 990-

**Schools** 

▶ Complete if the organization answered "Yes" on Form 990,

OMB No. 1545-0047

DLN: 93493136091252

**Open to Public** 

Department of the Treasury Namel & the cospanization

EZ)

Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990EZ for the latest information.

Inspection **Employer identification number** 

eai	ton College 36-2182171			
'a	rt I			
			YES	ľ
	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	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
;	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at		res	
	all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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	V	
			Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	$\vdash$
D	Precords 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	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?				
а	Does the organization discriminate by race in any way with respect to:  Students' rights or privileges?	5a		
b	Admissions policies?	5b		
c	Employment of faculty or administrative staff?	5c		
d	Scholarships or other financial assistance?	5d		
	e Educational policies?	5e		
	Use of facilities?	5f		
g		5g		
h	Other extracurricular activities?	5h		
	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		
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.	7	Yes	
_	rwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990			1

Schedule E (Form 990 or 990EZ) (2020)	Page <b>2</b>
Part II Supplemental Information. Provide the explany 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 RACIALLY NONDISCRIMINATORY POLICY	The College's non-discrimination policy is stated on the College's website, required training for all students and employees, and all recruitment brochures and literature.
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	Wheaton College students receive federal financial assistance in accordance with Title IV of the Education Amendments of 1972. During the tax year ending 6/30/2021, the College received Higher Education Emergency Relief Funds (HEERF) under the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) 2021 and American Rescue Plan Act (ARPA) 2021 from the U.S. Department of Education, Office of Postsecondary Education as a result of the Coronavirus Aid, Relief, and Economic Security (CARES) Act.

Schedule E (Form 990 or 990-EZ) (2020)

SCHEDULE F	State	ement of A	Activities (	Outside the Uni	ited States	OMB No. 1545-0047
(Form 990)  Department of the Treasury Internal Revenue Service	► Comp	lete if the organiz		ine 14b, 15, or 16.	2020 Open to Public Inspection	
Name of the organization					Employer id	entification number
Wheaton College					36-2182171	
	<b>nformation</b> Part IV, line		Outside the l	<b>Jnited States.</b> Comple	ete if the organization	answered "Yes" on
_	the grantees'	eligibility for th	ie grants or assi	substantiate the amoun stance, and the selection	<del>-</del>	☐ Yes ☐ No
2 For grantmakers outside the United		Part V the orga	anization's proce	edures for monitoring the	use of its grants and	other assistance
3 Activites per Region	n. (The followi	ng Part I, line 3 t	table can be dupl	icated if additional space is	needed.)	
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in the region	
Central America and Caribbean	the	0	0	Investments		18,129,927
<b>3a</b> Sub-total <b>b</b> Total from continuat	ion sheets to	0				18,129,927
Part I		1 0	) <u> </u>	1		18,129,927

Cat. No. 50082W Schedule F (Form 990) 2020

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

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . 

90, Part IV, line 16	swered "Yes" on Form 9	tne organization ans	ea States. Complete if				
				eded.	<u>tional space is ne</u>	duplicated if addit	Part III can be d
<b>(h)</b> Method of valuation (book, FMV, appraisal, other	(g) Description of noncash assistance	(f) Amount of noncash assistance	(e) Manner of cash disbursement	(d) Amount of cash grant	(c) Number of recipients	(b) Region	Type of grant or assistance

Sched		Page <b>4</b>	
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>✓</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	□Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	<b>⊻</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	<b>✓</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	Yes	<b>✓</b> No

Page	amounts of investments vs.		
uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting metho expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide			
Explanation	ReturnReference		

Schedule F (Form 990) 2019

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I (Form 990)

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

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

OMB No. 1545-0047

DLN: 93493136091252

Open to Public

Treasury Internal Revenue Service	► Go to <u>www.irs.gov/Form990</u> for the latest information.							
Name of the organization						Employer identifi	cation number	
Wheaton College						36-2182171		
Part I General Inform	nation on Grants	and Assistance				•		
1 Does the organization ma the selection criteria used					for the grants or assistant	ce, and		
<ul><li>Describe in Part IV the org</li></ul>							☑ Yes ☐ No	
Part III Grants and Other	Assistance to Don	nestic Organizations a	and Domestic Governme		rganization answered "Yes'	on Form 990, Part IV, line	21, for any recipient	
		· ·	ditional space is needed.	Tana a			T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) See Additional Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
		<del>-</del>					46	
For Paperwork Reduction Act Noti				Cat. No. 5005			nedule I (Form 990) 2020	

(5) Tuition Discounts

SCHOLARSHIPS - Undergraduate - Merit

SCHOLARSHIPS - Undergraduate - Need

(1)

Based

Based

(5)

(6)

(7)

Part IV

Return Reference

Schedule I, Part III, Column (b) Estimated Number Of Recipients

Schedule I. Part III. Column (b) Estimated Number Of Recipients Schedule I, Part III, Column (b)

Estimated Number Of Recipients Schedule I. Part III. Column (b)

Estimated Number Of Recipients Schedule I, Part III, Column (b)

Estimated Number Of Recipients Schedule I, Part I, Line 2

PROCEDURES FOR MONITORING

Procedures for monitoring use of

USE OF GRANT FUNDS

Schedule I, Part I, Line 2

grant funds.

Schedule I (Form 990) 2020

Page 2

Schedule I (Form 990) 2020

(b) Number of

recipients

1021

Part III can be duplicated if additional space is needed.

**Explanation** 

the College.

1281

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

SCHOLARSHIPS - Undergraduate - Need Based: Student number of Actual Distribution

SCHOLARSHIPS - Graduate - Merit Based : Student number of Actual Distribution

SCHOLARSHIPS - Graduate - Need Based : Student number of Actual Distribution

Tuition Discounts: Student number of Actual Distribution

832,476 389,624 622,454

(c) Amount of

cash grant

10.877.467

24,964,848

identifying the mission of the organization and the purpose of the grant, and review of the organization's Form 990, if applicable.

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Book Book Book SCHOLARSHIPS - Undergraduate - Merit Based: Student number of Actual Distribution

For contributions under \$1,000,000, Wheaton College will generally retain 25%; for contributions of over \$1,000,000, Wheaton College will generally retain 10%. The remaining portion of each donor's contribution is available for distribution to other public charities at the donor's recommendation, subject to the approval of the

Grants and scholarships are awarded to students who apply for financial assistance at Wheaton College, Grant recipients are based on financial need. Scholarships and

other assistance is merit-based. All funds are used for tuition and books and living expenses at Wheaton College. This process is monitored by the Financial Aid Office at

Wheaton College Charity Selection Committee. The Committee must review and approve all recommendations. Such review includes: verifying exempt status,

Book

## **Additional Data**

African Enterprises

PO Box 28190 Spokane, WA 99228 Bible Centered Ministries

International 201 Granite Rd Lancaster, PA 17601

**Software ID:** 20011424 **Software Version:** 2020v4.0 **EIN:** 36-2182171 Name: Wheaton College

95-2275044

23-6000176

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation

(a) Name and address of	(D) LIN	(c) INC Section	(u) Amount of Cash	(e) Amount of non-	(1) Method of Valuation	1
organization		if applicable	grant	cash	(book, FMV, appraisal,	l
or government				assistance	other)	l
						1
						ı

17,192

20,000

(a) Name and address of	(b) FIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valua
organization		if applicable	grant	cash	(book, FMV, apprais
or government				assistance	other)

501(c)(3)

501(c)(3)

Sovernments.		
) Method of valuation	(g) Description of	(h) Purpose of grant

non-cash assistance

or assistance

General Fund

mission support

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Bible Fellowship Church 23-1472482 501(c)(3) 50.000 Imission support

Central America

Theological Seminary

17.192

1011 Brookside Rd Allentown, PA 18106

8625 LaPrada Dr

Dallas, TX 75228

23-1472482

47-1105011

501(c)(3)

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Camp of the Woods deerfoot 59-6001191 501(c)(3) 50.000 \$20k Tapawingo;\$30 General Fund lodge PO Box 250

Speculator, NY 60637 Cedar Grove Christian 47-2954063 501(c)(3) 25.000 General Fund Academy

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

6445 Bingham St Philadelphia, PA 19111

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CEO Forum 20-2012491 501(c)(3) 15.000l General Fund 4431 Long Prairie Rd

4431 Long Prairie Rd
Flower Mound, TX 75028

Child Evangelism Fellowship of 38-6091187 501(c)(3) 150,000 mission support
Bucks County

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

PO Box 489 Dublin, PA 18917

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Christian Missionary Technical 22-2493498 501(c)(3) 40.000 mission support

Services 1119 N Boundary Rd Bernville, PA 19506					
Christian Missions in Many Lands	13-2688413	501(c)(3)	12,000		mission support

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

PO Box 13

Spring Lake, NJ 07762

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

College Church in Wheaton 332 E Seminary Wheaton, IL 60187	36-2203929	501(c)(3)	18,300		\$1K Pioneer Club;\$7.3K General Fund;\$10k Foundation Fund

Cornerstone Community 23-3057681 501(c)(3) 150,000

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

Philadelphia, PA 19134

\$10k mission Church support:\$140k General 3167 Frankford Ave Fund

(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, non-cash assistance organization grant cash or assistance assistance other) or government

Covenant Church of Naples	59-1098689	501(c)(3)	200,000		\$50k Capital
6926 Trail Blvd					Campaign;\$15 General
Naples, FL 34108					Fund;\$135k Missions

Deerfoot Lodge 14-6017995 501(c)(3) 260,000 General Fund

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

PO Box 228

Speculator, NY 12164

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) El Shaddai Ministries 31-1633120 501(c)(3) 50.000 Florida church plant International (ESMI) 2121 SW 3rd Ave Emmanuel Hospital Association 36-4245509 501(c)(3) 20.000 General Fund

Miami, FL 33129 (USA)

215 N Arlington Heights Rd Arlington Heights, IL 60004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government **ESMI** 31-1633120 501(c)(3) 30.000 \$30k Haiti Church Plant: \$45k ministry support

2121 SW 3rd Ave Miami, FL 33129 Friends of Israel Gospel 23-1365331 501(c)(3) 42.981

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

Bellmawr, NJ 08099

General Fund Ministry PO Box 908

(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 assistance other) or government ral Fund

mission support

InerAct Ministries 31000 SE Kelso Rd	92-6004561	501(c)(3)	17,192		General
Boring, OR 97009					

25,000

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

501(c)(3)

23-1381400

InFaith

145 John Robert Dr Exton, PA 19341

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

Intervarsity Christian	36-2171714	501(c)(3)	14,300		mission support
Fellowship					
PO Box 7895					
Madison, WI 53707					

McLean Presbyterian Church 54-0957095 501(c)(3) 30.000 General Fund

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

1020 Balls Hill Rd McLean, VA 22101

(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 assistance other) or government Mission Aviation Fellowship 95-1920983 501(c)(3) 25.000l General Fund

General Fund

17.192

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

501(c)(3)

PO Box 47 Nampa, ID 83653 Operation Mobilization

PO Box 444 Tyrone, GA 30290

22-2513811

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Outreach Community Ministry 23-7265066 501(c)(3) 19.500 General Fund 373 S Schmale Rd

General Fund

20,000

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

501(c)(3)

Carol Stream, IL 60188
Redeemer City to City

1166 Avenue of the Americas New York, NY 10036 38-3773431

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

Reformed University Fellowship	58-1713181	501(c)(3)	28,500		\$10k UC Irvine,
(or Ministries)					\$18,500 mission
PO Box 890004					support
Charlette NC 20200					l ''

\$37,500 Alaska;

\$112,500 Disaster Relief

Charlotte, NC 28289 Samaritan's Purse 58-1437002 501(c)(3) 156.000 \$6k General Fund:

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

PO Box 3000

Boone, NC 28607

(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 assistance other) or government SAT-7 Christian Satellite TV 23-2964829 501(c)(3) 40.000 General Fund PO Box 2770 Easton, MD 21601

General Fund

82.712

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

501(c)(3)

Slavic Gospel Assn

6151 Commonwealth Dr Loves Park, IL 611116987 36-2428314

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Condey Breakfrot Bearing 22 1252550 E01/-1/21 40 0001 General Fund

Philadelphia, PA 19105 Sunshine Enterprises	36-2317631	501(c)(3)	20,000		General Fund
Mission PO Box 297					
Suriday Dreakiast Rescue	23-1352556	201(c)(2)	40,000		General Fullu

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

503 E 61st St Chicago, IL 60637

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government The Gideon's Int'l 36-2270051 501(c)(3) 17,192 Faith Fund

PO Box 140800 Nashville, TN 37214					
The Legacy Foundation at Shell Point	80-0002415	501(c)(3)	17,000		Vision 2020-Larsen Health Ctr

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

15010 Shell Point Blvd Ft Myers, FL 33908

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government The Orchard Evangelical Free 36-2855668 501(c)(3) 20.000 \$10k Building

Fund

Trans World Padio	22-1690564	501(a)(3)	150 000		¢75k Woman of
1330 N Douglas Ave Arlington Heights, IL 60004					Fund
Church		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Fund;\$10k General

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

Carv, NC 27512

|\$75k Women of Trans World Radio 22-1690564 201(C)(3) 150,000 PO Box 8700 Hope:\$75k General

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 54-1455112 501(c)(3) 10.000 General Fund Trinity Christian School of Fairfax 11204 Braddock Rd

General Fund

Fairfax, VA 22030

40.000

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

501(c)(3)

Trinity International University

2065 Half Day Rd Deerfield, IL 60015 36-2216176

(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 assistance other) or government Turning Point for God 33-0095805 501(c)(3) 20.000 General Fund PO Box 3838

General Fund

20,000

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

501(c)(3)

San Diego, CA 92163 Unlocking the Bible

1301 S Grove Ave Barrington, IL 60010 36-4377881

(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 assistance other) or government 03-0530126 501(c)(3) 50.000 General Fund Valley Christian School 2364 Huntingdon Pike

Huntingdon Valley, PA 19006

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

Bartlesville, OK 74005

Voice of the Martyrs 73-1395057 501(c)(3) 150,000 General Fund PO Box 443

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Wheaton Bible Church 36-2233546 501(c)(3) 21.200 \$1,200 missions fest 27W500 North Ave giving project; \$20k West Chicago, IL 60185 General Fund

General Fund

50,000

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

501(c)(3)

Whosoever Gospel

PO Box 48308 Philadelphia, PA 19144 23-1352579

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

\$42,981 General Fund;

\$20k mission support

World Ministries	22-3710868	501(c)(3)	25,000		mission support
PO Box 491656					
Leesburg, FL 34749					

62.981

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

501(c)(3)

95-1831097

Wycliffe Bible Translators

PO Box 628200

Orlando, FL 32862

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 93493	13609:	1252
Schedule J (Form 990)  Department of the Treasury Internal Revenue Service		Compensation Information			OMB N	o. 1545-	0047
		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.				2020	
						Open to Public Inspection	
Nar	me of the organiza	Iation		Emp	loyer identification		
Whe	eaton College			36-2	182171		
Pa	rt I Questi	ons Regarding Compensa	ntion				
					_	Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class	s or charter travel	$oxed{oldsymbol{ olimits}}$	Housing allowance or residence for perso	nal use		
		companions	님	Payments for business use of personal re			
		nification and gross-up payment	ts 📙	Health or social club dues or initiation fee			
	LI Discretion	nary spending account	Ц	Personal services (e.g., maid, chauffeur,	cner)		
b				follow a written policy regarding payment ve? If "No," complete Part III to explain	or <b>1</b>	Yes	
2				or allowing expenses incurred by all r, regarding the items checked on Line 1a	,	Yes	
	unectors, truste	es, officers, including the CEO/	Executive Directo	r, regarding the items checked on time far			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the						
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.						
	✓ Compensa			Maile			
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study			
		of other organizations	<b>7</b>	Approval by the board or compensation of	committee		
		-	_				
4		During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:					
а	Receive a severance payment or change-of-control payment?				. 4	a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					)	No
С							No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any						
	compensation contingent on the revenues of:						
а	The organization	n?			5:	3	No
b					5	)	No
	,	5a or 5b, describe in Part III.					
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:						
а	-	n?			6:		No
b	· ···, · · · · · · · · · · · · · · · ·					)	No
_	If "Yes," on line 6a or 6b, describe in Part III.						
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III						No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III						No
9				presumption procedure described in Regu			INO
For F	Panerwork Redu	uction Act Notice, see the Ins	structions for Fo	orm 990. Cat. No. 50053	T Schedule J (Fo		2020

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.  Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	( <b>D)</b> Nontaxable benefits	(E) Total of columns	(F) Compensation in
	co	(i) Base ompensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								

Schedule J (Form 990) 2020	hedule J (Form 990) 2020				
Part III Supplemental Inform	Part III Supplemental Information				
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.				
Return Reference	Explanation				
Schedule J, Part I, Line 1a Tax indemnification and gross-up payments	The College provided tax gross up payments related to educational benefits provided to one officer. Such benefits were included in taxable income for the recipient.				
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	The President of the College receives a housing allowance that is excluded from taxable income pursuant to IRC ŧ107.				

Schedule 1 (Form 990) 2020

**Software ID:** 20011424

**Software Version:** 2020v4.0

**EIN:** 36-2182171

Name: Wheaton College

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

	: J,		irectors, Trustees, K		· · · · · · · · · · · · · · · · · · ·			
(A) Name and Title			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)(i)-(D)	column (B) reported as deferred on prior Form 990
1Philip G Ryken	(i)	362,428	0	1,190	35,389	158,675	557,682	0
President/Trustee	(ii)	0	0	0	0	0	0	0
1J Chadwick Rynbrandt	(i)	237,517	2,000	26,927	18,468	27,919	312,831	0
VP for Finance & Operations, Treasurer	(ii)	0	0	0	0	0	0	0
2Silvio Vazquez	(i)	171,633	2,000	1,022	19,873	27,753	222,281	0
Chief Enrollment Management Officer	(ii)	0	0	0	0	0	0	0
<b>3</b> Sheila Caldwell	(i)	144,769	2,000	272	16,115	290	163,446	0
Chief Intercultural Engagement Officer until June 2021	(ii)	0	0	0	0	0	0	0
<b>4</b> Paul Chelsen	(i)	167,737	2,000	519	19,405	78,857	268,518	0
Vice President - Student Development	(ii)	0	0	0	0	0	0	0
<b>5</b> Margaret Diddams	(i)	145,622	0	845	20,734	23,940	191,141	0
Provost Until July 2020	(ii)	0	0	0	0	0	0	0
<b>6</b> Kirk D Farney	(i)	228,140	2,000	2,202	26,281	22,730	281,353	0
VP for Advancement & Alumni Relations	(ii)	0	0	0	0	0	0	0
<b>7</b> Scott Okesson	(i)	154,569	1,000	900	10,584	23,638	190,691	0
Director of Facilities until March 2021	(ii)	0	0	0	0	0	0	0
8Kenneth Larson	(i)	176,330	o	1,135	12,666	63,459	253,590	0
Investment Manager	(ii)	0	0	0	0	0	0	0
<b>9</b> Wendy Woodward	(i)	179,125	2,000	604	12,750	19,195	213,674	0
CICSO until June 2021	(ii)	0	0	0	0	0	0	0
10Michael Wilder	(i)	144,531	0	2,598	10,343	27,918	185,390	0
Dean of Music & Communications	(ii)	0	0	0	0	0	0	0
11Jamie Aten	(i)	146,884	0	207	10,623	29,716	187,430	0
Professor/Exec Director of HDI	(ii)	0	0	0	0	0	0	0
12Carlos Garcia	(i)	146,544	0	13,386	10,289	14,991	185,210	0
Controller	(ii)	0	0	0	0	0	0	0
13Randy Norbeck	(i)	142,237	4,000	832	10,154	47,808	205,031	0
Director of Construction & Maintenance	(ii)	0	o	0	   o	0	0	0
14EDWARD STETZER	(i)	175,285	0	6,262	12,666	55,178	249,391	0
DEAN & EXEC DIR WCBGC	(ii)	0	0	0	0	0	0	0

efile GRAPHIC print - DO NOT PROCESS As F				ed Data - DLN: 9349313609125						1252			
Schedule L		Trans	action	s with In	tereste	d Person	ıs			0	MB No.	1545-	0047
(Form 990 or 99	a ==x	lete if the organi	zation an	swered "Yes'	on Form 99	90, Part IV, li	nes 2	5a, 2	25b, 20	6,	2020		
		27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.  ▶ Attach to Form 990 or Form 990-EZ.							<sup>5,</sup> 2020				
Department of the Treasury natural Revenue Service								Open to Public Inspection					
Name of the or	ganization						En	nplo	yer ide	entific	ation n	ımbe	r
Wheaton College							36	-218	2171				
Part I Exc	ess Benefit Tra	ansactions (sec	tion 501(c	)(3), section 5	01(c)(4), and	section 501(c				ns only	).		
		zation answered "											
1 (	a) Name of disqua	alified person	<b>(b)</b> R		•	lified person ar	nd (	` '	escript		(d)	Corre	ected?
				01	rganization			tr	ansacti	ion	Ye	s	No
							-						
							-						
2 Enter the a	amount of tax incu	urred by the organ	ization ma	nagers or disq	ualified perso	ons during the	year u	nder	sectio	n	·		
							•			\$			
3 Enter the a	amount or tax, if a	any, on line 2, abo	ve, reimbu	irsed by the or	ganization .		•			\$			
Part II Lo	ans to and/or	From Interes	ted Pers	ons.									
		anization answered			Part V, line 3	8a, or Form 99	0, Par	t IV,	line 26	5; or if	the orga	anizat	ion
re (a) Name of		on Form 990, Par			(e) Original	(f) Balance	(a)	Tn		h)		\//~i++	-on
interested	with	loan		nization?	principal	due	(g) defa		Appro				
person	organization	tion	-		amount		bo		boar	ard or			
		-	То	- Evam	-		Yes	No	Yes	No	Yes		lo
(1)	President	Home	10	From	210,000	70,003	_	No	Yes	NO	Yes	IN	10
Philip G Ryken	resident	Mortgage/		^	210,000	, ,,,,,,		110	163		'63		
		Home											
		Improvements									$\vdash$		
Total .					\$	70,003							
Part III Gr	ants or Assista	ance Benefitin	g Intere	sted Person	ıs.								
		ganization answ											
(a) Name of inte	erested person (	(b) Relationship be	etween	(c) Amount of	f assistance	( <b>d)</b> Type o	of assis	stanc	:e	<b>(e)</b> Pu	rpose o	assis	tance
	"	nterested person a organization											
(1)				8,300	scholarship			fii	nancial	aid			
					•								
	duction Act Notice	, see the Instructic	ns for Forn	n 990 or 990-Ez		scholarship		Sch			aid	990	

Complete if the organization a	answered "Yes" on Forr	n 990, Part IV, line 28a	a, 28b, or 28c.		ļ
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organiz reven	f ation's
				Yes	No
	Key employee/ Investment manager		Sister Karen Belling is the Director of Student Financial Services at Wheaton College		No
	Key employee/ Investment manager	,	Spouse Laurel Larson is the CMCA coordinator for the Wheaton College Billy Graham Center for Evangelism.		No
(3) Philip Hubbard	Trustee		Son-in-law Adam Wood is an Assistant Professor in Philosophy at Wheaton College.		No
(4) Philip Ryken	President		Brother-in-law Jeffrey Beaird is a network/systems engineer at Wheaton College.		No
(5) Stephen Preston	Trustee	,	Daughter Madeleine Preston is the Associate Director for Reunions in the Alumni and Parent Engagement Office.		No

**Explanation** 

Schedule L (Form 990 or 990-EZ) 2020

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

Part V

**Supplemental Information** 

**Return Reference** 

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493136091252 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶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 **Employer identification number** Name of the organization Wheaton College 36-2182171 Part I Types of Property (a) (b) (c) (d) 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 1g 1 Art—Works of art . . Χ 3,650 Market value 2 Art—Historical treasures **3** Art—Fractional interests Χ 407 Replacement cost 4 Books and publications 5 Clothing and household goods . . . . . Cars and other vehicles Χ 1 9,612 Market value Χ 5,000 Market value **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 126 1,827,298 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, Χ 1,856,712 Market value or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . 14 Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Χ 740,000 Market value Real estate—Other . . . 2 18 Collectibles . . . . Χ 12,700 Replacement cost **19** Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 185,250 Replacement cost 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ See Additional Data 26 Other ▶ ( \_\_\_\_\_\_) Other ▶ ( \_\_\_\_\_\_) 27 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 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 isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2020) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2020)	Page <b>2</b>
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Books and publications - Number of contributions Securities - Publicly traded - Number of contributions Other - Horses to Honey Rock - Number of contributions Other - Musical Instruments - Number of contributions Other - Archival Materials - Number of contributions Real estate - Commercial - Number of contributions Art - Works of art - Number of contributions Other - Sports equipment NUMBER OF CONTRIBUTIONS Collectibles - Number of contributions Securities - Partnership, LLC, or trust interests - Number of contributions Other - FOOD FOR EVENT NUMBER OF CONTRIBUTIONS Other - musical supplies, other than instruments number of contributions
	Schedule M (Form 990) (2020)

#### **Additional Data**

musical supplies, other than instruments

**Software ID: 20011424** Software Version: 2020v4.0 **EIN:** 36-2182171 Name: Wheaton College Part I, Lines 25-28 (a) (b) (c) (d) 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 1g Other ▶ ( Χ 8,800 Market value Horses to Honey Rock ) Other ▶ ( Χ 35,533 Cost Musical Instruments ) 200 Cost Other ▶ ( Χ Archival Materials ) 2,020 Replacement cost Other ▶ ( Χ Sports equipment ) 356 Cost Other ▶ ( Х FOOD FOR EVENT ) 1,000 Replacement cost Other ▶ ( Χ

efile GRAPH	IC print - DO NOT PROCESS	DLN	93493136091252
SCHEDUL (Form 990 or EZ)	Complete to provide information for responses to specific Form 990 or 990-EZ or to provide any additional info	questions on rmation.	OMB No. 1545-0047  2020 Open to Public Inspection
Ntamel Bf theਾਨਿਰ Wheaton College	aMeation	<b>Employer ident</b> 36-2182171	ification number
990 Schedul	e O, Supplemental Information		
Return Reference	Explanation		
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 2,900,000 including grants of \$ 0)(Revenue \$ 5,229,650) ARTIST SE MUNITY SCHOOL OF THE ARTS AND SUMMER SPORTS CAMPS. MINOR PROON INSTALLMENT PLAN FEES, PARKING FINES, PARKING PERMITS AND LIE LICITS A VARIETY OF CONTRIBUTIONS FOR ITS PROGRAMS INCLUDING DOWNSED FUND CONTRIBUTIONS RECEIVED ARE ACCOUNTED FOR AS OTHER NDS ALLOW FOR THE DONOR TO RECOMMEND DISTRIBUTIONS TO COLLE ORGANIZATIONS. ALTHOUGH THE COLLEGE GENERALLY COMPLIES WITH HEY ARE SUBJECT TO APPROVAL BY THE COLLEGE'S CHARITY SELECTION LICY IS TO DISTRIBUTE A MAXIMUM OF 75% - 90% OF DONOR-ADVISED FUND THIRD PARTIES.	OGRAMS, APPLICATION BRARY FINES. THE COL DNOR-ADVISED FUNDS. R INVESTMENTS. DONO GE PROGRAMS OR OTI THE DONOR'S RECOMI N COMMITTEE. THE CO	LEGE SO DONOR-AD R-ADVISED FU HER CHARITABLE MENDATION, T LLEGE'S PO

Return Reference	Explanation
Form 990, Part VI, Line 14 Document Retention and Destruction Policy	Wheaton College does not have a formal document retention and destruction policy in place at this time. Departments within the organization have their own document retention and de struction policies, but the organization plans to implement an organization wide policy in the near future.

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The Executive Committee shall consist of not less than seven elected Trustees, a majority of whom shall constitute a quorum, and as ex-officio members the Chairman of the Board, Vi ce Chairman of the Board and the President. The Chairman of the Board shall also be the Chairman of the Executive Committee and in his/her absence, the Vice Chairman shall sit in h is/her place. The Executive Committee shall have and may exercise all of the authority of the Board of Trustees during the interim between regular meetings of the Board provided th at such committee shall not have the authority of the Board of Trustees in reference to (I) amending, altering, or repealing their Bylaws; (ii) electing, appointing, or removing an y Trustee; (iii) amending the Charter; (iv) adopting a plan of merger or consolidation wit h another corporation; (v) authorizing the sale, lease, exchange, or mortgage of all or su bstantially all of the property and assets of the Corporation; (vi) authorizing the volunt ary dissolution of the Corporation.

Return Reference	Explanation
Form 990, Part VI, Line 4 Significant changes to organizational documents	In February 2021, the Board of Trustees approved comprehensive changes to the Board's byla ws, policies, and committee charters. These amendments were the result of a nearly year-lo ng strategic planning process focused on enhancing the effectiveness of committees and the time they are able to devote to the most important issues facing the College. Notably, a single Governance, Nominating, and Compensation Committee replaced two, formerly separate committees - the Compensation Committee and the Governance and Nominating Committee - which shall be responsible for reviewing the performance and compensation of the President. The e Governance, Nominating, and Compensation Committee is also tasked with oversight of compensation matters and employee benefits plans at the College and performs the duties of the Board where required under the College's employee benefit plans.

990 Schedule O, Supplemental Information

Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	After finalizing the Form 990 with the paid tax preparer, the Controller and the VP for Fi nance forward a copy of the Form 990 to all board members for their review prior to filing the return with the IRS.

Evalenation

990 Schedule O, Supplemental Information

Return Explanation

ng on the issue of which they have a conflict.

Reference	
Form 990,	Officers, trustees, key employees and other highest compensated employees are annually ask
Part VI, Line	ed to reveal any potential conflicts of interest. Each interested person is provided a que
12c Conflict	stionnaire electronically to be reviewed. The General Counsel reviews the questionnaires a
of interest	nd proposes an annual report to the Governance, Nomination and Compensation Committee of t
policy	he Board of Trustees. If a conflict exists, the Board member is asked to abstain from voti

Return Reference	Explanation	
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Governance, Nomination and Compensation Committee of the Board reviews and approves the President's compensation. The review includes outside compensation surveys, studies prepared by internal staff and an independent compensation consultant as well as Forms 990 of similar educational institutions. This process is undertaken annually and documented in the meeting minutes of the Governance, Nomination and Compensation Committee.	

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The Governance, Nomination and Compensation Committee also reviews and approves the compensation for the VP for Finance, the VP for Student Development, the Provost, the VP for Advancement, the Chief Enrollment Management Officer and the Chief Intercultural Engagement Officer. The reviews utilize compensation data from Forms 990 of similar educational institutions. This process is undertaken annually and is documented in the meeting minutes of the Governance, Nomination and Compensation Committee.

Return Reference	Explanation
Form 990, Part VI, Line 19 Required	The College's financial statements are available on our website. Governing documents and c onflict of interest policies are not required disclosures pursuant to Internal Revenue Cod e (IRC) Section 6104. These documents are not available to the public at this time.

documents available to

the public

D -4.....

balances

Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or	CHANGE IN THE VALUE OF ANNUITIES10753945; CHANGE IN THE VALUE OF THE BOND SWAP - 19132 56; POSTRETIREMENT BENEFIT CHANGES279198; DONOR ADVISED FUNDS OTHER2359434; DONOR ADVISED FUNDS TO WHEATON COLLEGE1332437;

Funlamation

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

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

#### **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information. 2020

DLN: 93493136091252

OMB No. 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2020

Internal	Re	venu	e Serv
Name	of	the	orga

(Form 990)

Department of the Treasury

**Employer identification number** nization Wheaton College 36-2182171 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) (b) (c) (d) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? No Yes (1) WHEATON COLLEGE BILLY GRAHAM CENTER RESEARCH ΙL 501(c)(3) Type I WHEATON COLLEGE Yes 501 COLLEGE AVENUE WHEATON, IL 60187 36-2982217 (2) WHEATON COLLEGE ALUMNI ASSOCIATION ALUMNI ASSOC ΙL 501(c)(3) Type II WHEATON COLLEGE No 501 COLLEGE AVENUE WHEATON, IL 60187 36-6127340

Cat. No. 50135Y

(a) Name, address, and El related organization	iN of n	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predor income( unrel exclude tax u section 51	minant related, ated, ed from inder is 512-	<b>(f)</b> Share of total incon		(I Disprop alloca		(i) Code V-UB amount in be 20 of Schedule K- (Form 1065	Gene ox man part	j) eral or aging tner?	Perce owne	
					31	7)			Yes	No		Yes	No	l	
														<u> </u>	
Part IV  Identification of Related Org because it had one or more rela  (a)  Name, address, and EIN of related organization		a corporation (		st during th		ear. ( Type of (C corp	e) of entity , S corp, rust)	(f) Share of total income	Share	(g) e of enc year assets	l-of- Per	(h) centage nership		(i) Section (b)(i) contro	n 512 13) olled
(1)WHEATON COLLEGE TRUST COMPANY NA	TRUST ADMINISTRATION	I		WHEATO	WHEATON		ation	1,179,43	4	3,708,	103 99.6	9.64 %		<b>Yes</b> Yes	No
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420				COLLEG	E					, ,					
(2)Charitable Remainder Trust	Trust	I	L	Wheator	Wheaton College		lege Trust							Yes	
501 COLLEGE AVENUE Wheaton, IL 60187															L
													$\neg$		
				1			1						- 1	1	

Schedule R (Form 990) 2020		Pa	ge <b>3</b>
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	12	a Yes	
<b>b</b> Gift, grant, or capital contribution to related organization(s)	11	5	No
c Gift, grant, or capital contribution from related organization(s)	<del> </del>	c Yes	
d Loans or loan guarantees to or for related organization(s)	10	d	No
e Loans or loan guarantees by related organization(s)	16	e	No
f Dividends from related organization(s)	11	f	No
g Sale of assets to related organization(s)	19	g	No
h Purchase of assets from related organization(s)	11	h	No
i Exchange of assets with related organization(s)	11	i	No
j Lease of facilities, equipment, or other assets to related organization(s)	15	j	No
k Lease of facilities, equipment, or other assets from related organization(s)	11	k	No
L. Performance of convices or membership or fundraising colicitations for related organization(s)	1		No

c Gift, grant, or capital contribution from related organization(s)	110	165									
d Loans or loan guarantees to or for related organization(s)											
e Loans or loan guarantees by related organization(s)	1e		No								
f Dividends from related organization(s)	<b>1</b> f		No								
g Sale of assets to related organization(s)	<b>1</b> g		No								
h Purchase of assets from related organization(s)											
i Exchange of assets with related organization(s)											
j Lease of facilities, equipment, or other assets to related organization(s)	<b>1</b> j	1	No								
k Lease of facilities, equipment, or other assets from related organization(s)	1k	-	No								
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No								
m. Performance of convices or membership or fundraicing colicitations by related organization(c)	1n	Yes									

f Dividends from related organization(s)	1f		No						
g Sale of assets to related organization(s)	<b>1</b> g		No						
h Purchase of assets from related organization(s)	1h		No						
i Exchange of assets with related organization(s)	1i		No						
j Lease of facilities, equipment, or other assets to related organization(s)	<b>1</b> j		No						
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No						
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No						
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes							
o Sharing of paid employees with related organization(s)	10	Yes							
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No						
q Reimbursement paid by related organization(s) for expenses	1q		No						

(b) Transaction

type (a-s)

Α

С

Amount involved

951,567

41,192

543,702

796,386

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

1r

1s

Schedule R (Form 990) 2020

(d)

Method of determining amount involved

Based on the Number of Trusts

Based on the Number of Trusts

General Leger

Based on Square Footage Plus Overhead

No

No

(a)
Name of related organization

(1)Wheaton College Trust Company NA

(2)Wheaton College Trust Company NA

(4)Wheaton College Trust Company NA

(3)Billy Graham Center

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

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

	was not a related organization. See instructions regarding exclusion for certain investment partnerships.												
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity		sections 512-		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partnerî	or g	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
									•	Schedul	e R (Form	990	0) 2020

chedule R (For	Page 5	5						
Part VII	Supplemental Information							
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).						
Return Reference		Explanation						