# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u>A</u>	For the	2017 cale	ndar year, or tax year beginnin	g 06/01	, 2017, a	nd ending	05/	31	, 20 18	
В	Check if a	pplicable:	C Name of organization GUSTAVI	US ADOLPHUS CO	LLEGE			D Employ	er identification n	umber
	Address o	hange	Doing business as						41-0695524	
	Name cha	ange	Number and street (or P.O. box if r	mail is not delivered to	street address)	Room/sulte		E Telepho	ne number	-
	Initial retu	rn .	800 West College Avenue				1		507-933-8000	
	Final return	/terminated	City or town, state or province, cou	untry, and ZIP or foreig	n postal code					
	Amended	return	Saint Peter, MN, 56082					G Gross re	eceints \$	278,902,244
	Applicatio	n pending	F Name and address of principal office	cer: Curtis J Kow	aleski		7		subordinates? Ves	
		,	800 West College Avenue, Sai						s Included? Yes	_
1	Tax-exem	nt status:	✓ 501(c)(3) ☐ 501(c)		prompt of the second	527			ee instructions)	
J	Website:		w.gustavus.edu	) Thistitio	) LL 4947(a)(1) (1	L 321	1			
			Corporation Trust Assoc	lation Other >	I Voo	r of formation	H(c) Group (			0.001
	art I	Summ		autor C Outor P	Litea	u oi ioriiatioi	1862	I M State	of legal domicile:	MN
			escribe the organization's mis	sion or most signi	ficant activities:	Overton		0-11		
0	' '	for fulfillin	a live of leaders lived and	sion of most signi	ncant activities:	Gustavu	is Adolphus	College	prepares its st	udents
Activities & Governance			ng lives of leadership and servi		d to the core val	ues of exc	ellence, con	nmunity,	justice, service	, and
Ĕ			ed on Schedule O, Statement 1		3534560000000000000000000000000000000000					
ove	2 (	Jumber 1	is box ▶☐ if the organization	alscontinued its					its net assets.	
Ō			of voting members of the gov					3		30
S			of independent voting member					4		25
ĵį.			nber of individuals employed			-		5		2,968
cţ;			nber of volunteers (estimate it					6		1,084
ď			elated business revenue from					7a		481,222
_	b N	let unrel	ated business taxable income	e from Form 990-7	Γ, line 34			7b		-760,289
							Prior Yea	ar	Current Ye	ear
ē			ions and grants (Part VIII, line	30,	947,211	33	3,245,780			
Revenue	9 F	rogram	service revenue (Part VIII, line	119,	270,001	120	0,948,395			
ě	10 li	nvestme	nt income (Part VIII, column (	5.	567,948		,769,491			
ш			enue (Part VIII, column (A), lir		72,481		91,268			
			enue—add lines 8 through 11 (			ne 12)	155.	857,641	172	2,054,934
	13 0	arants ar	nd similar amounts paid (Part	IX, column (A), lin	es 1-3)	8 8		732,738		,565,281
	14 E	Benefits p	paid to or for members (Part I	X. column (A). line	4)	2 2	02,	0		n
(ç)			other compensation, employee	40	037,131	50	0,217,122			
Expenses	16a P	rofessio	nal fundraising fees (Part IX,	70,	94,883					
be	ЬΤ	otal fund	draising expenses (Part IX, co	lumn (D), line 25)	3.43	2 0/1		34,003	Windship in the	192,289
ũ			penses (Part IX, column (A), lir			2,041	24	205.004	TOTAL PROPERTY.	. 500.000
			enses. Add lines 13-17 (musi			· · ·		305,994		2,528,966
			less expenses. Subtract line					170,746		,503,658
- 82	.0	10101100	iodo experises: eubliact inte	TO HOTH MINE 12 .	• • • • •		ginning of Cur	686,895		1,551,276
Net Assets or Fund Balances	20 T	otal acc	ets (Part X, line 16)			De:			End of Ye	
Asse Bal	21 T				* * * * *			429,296		),247,418
Net	22 N		ilities (Part X, line 26)					487,876		3,559,208
	rt II		s or fund balances. Subtract ure Block	line 21 from line 2		• • •	305,	941,420	336	6,688,210
true	er penaltie . correct. a	es of perjur	y, I declare that I have examined this etc. Declaration of preparer (other tha	return, including acco	mpanying schedules	and stateme	ents, and to the	e best of n	ny knowledge and	l bellef, it is
	,	/	the state of the s	To the second of a	ii ii iiomaaan or wiiic	n brebarer n	as any knowle	oge.	//	
Ci~	_	Clana	sus J. How	reesu				4/	1/19	
Sig		Signa	ture of officer				Date	•		
Hei	e		tis J Kowaleski, CFO VP of Fina	ance and Treasure	r					
			or print name and title					ies		
Pai	id	Print/Typ	e preparer's name	Preparer's signature		Date		Check [	T If PTIN	
	parer							self-emp		
	e Only	Firm's na	ame ►				Flrm'	s EIN ▶		
		Firm's ac					Phon			
May	the IRS	discuss	this return with the preparer	shown above? (se	ee instructions)				Yes	s ☐ No
	D	L.D. 1								

_	0 (2017) Page 2
ırt	Statement of Program Service Accomplishments  Chack if Schoolule O contains a response or note to any line in this Part III
	Check it Schedule O contains a response of note to any line in the fact in
	Briefly describe the organization's mission: Gustavus Adolphus College is a church-related, residential liberal arts college firmly rooted in its Swedish and Lutheran heritage.
	Gustavus Adolphus College is a church-related, residential liberal arts college firmly rooted in its dwedish and European Related The College offers students of high aspiration and promise a liberal arts education of recognized excellence provided by faculty
	The College offers students of high aspiration and profiles a liberal arts education of recognized executions of persons from diverse who embody the highest standards of teaching and scholarship. The College aspires to be a community of persons from diverse
	(Continued on Schedule O, Statement 2)
2	Did the organization undertake any significant program services during the year which were not listed on the
•	prior Form 990 or 990-EZ?
	If "Ves " describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured to
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other
	the total expenses, and revenue, if any, for each program service reported.
la	(Code: ) (Expenses \$ 94,698,535 including grants of \$ 54,565,281 ) (Revenue \$ 97,593,895 )
	Instruction and Academic Support: Gustavus offers 72 majors in 25 academic departments and 12 interdisciplinary programs, with
	a student-faculty ratio of 11:1. Total FTE enrollment for academic year 2017-2018 was 2,201, with 520 students graduating in June
	2018.
	4
4 L	(Code: ) (Expenses \$ 14,525,965 including grants of \$ 0) (Revenue \$ 0)
4b	(Code: ) (Expenses \$ 14,525,965 including grants of \$ 0 ) (Nevertible \$ 5 ) Student Services: Gustavus sponsors 23 varsity athletics teams and more than 39 intramural activities and club sports, along with
	more than 120 student organizations. Approximately 99% of students are involved in at least one extracurricular activity. Other
	student services include admission, community-based service learning, career development, peer mentoring, Office of the
	Chaplains, diversity center, financial assistance, health services, registrar, campus activities and residential life programs.
	Chaptains, diversity certer, financial assistance, notatives rises and secretary control of the
	***************************************
_	(Code: ) (Expenses \$ 14,561,955 including grants of \$ 0 ) (Revenue \$ 22,583,506 )
4c	Auxiliary Services: As a residential college, Gustavus is committed to residence hall living as a vital complement to its academic
4c	program, Approximately 97% of students live in College-owned residences and eat in the College's Dining Service. During Fall
4c	about the state of
4c	2017, 2067 students lived in College-owned residences. The College bookstore provides textbooks and other educational supplies
4c	2017, 2067 students lived in College-owned residences. The College bookstore provides textbooks and other educational supplies for students. Other items for sale include: clothing embossed with the College's insignia, books and miscellaneous novelty items.
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 4d
 Other program services (Describe in Schedule O.)
 See Schedule O.
 Statement 3

 (Expenses \$ 4,438,655 including grants of \$ 0 ) (Revenue \$

 4e
 Total program service expenses ▶ 128,225,110

 0)

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	<b>√</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<b>✓</b>	
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	ا ۾ ا		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		<u> </u>
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	1	
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? If			,
_	"Yes," complete Schedule D, Part I	6		<b>√</b>
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	_		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	7		<b>√</b>
•	complete Schedule D, Part III	8	✓	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	Ŭ	•	
	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	✓	
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	✓	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		,	
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b	<b>√</b>	
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e	✓	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40 -	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	<b>√</b>	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	40.	,	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a	<b>v</b>	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<b>√</b>	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		,	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>√</b>	
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		<b>✓</b>
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		1
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		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	•	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓	
	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	✓	
		For	990	(2017)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  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	20b		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	21	1	_
02	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22	<u> </u>	
23	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		,	
	through 24d and complete Schedule K. If "No," go to line 25a	24a	<u> </u>	1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓ ✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	<b>✓</b>	
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):		72.5X	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a	✓	
	Schedule L, Part IV	28b	<b>√</b>	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	✓	
04	conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		<b>V</b>
31	Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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	1	
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	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
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	1	

	0 (2017)			Page 3
Part	Charlett Oakadala Oasatalaa a saasta ta			
	Check it Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   3335		50000	MAXUE
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		1015	, Was
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	io N		(D)
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	00	18-18	100 E
	Statements, filed for the calendar year ending with or within the year covered by this return 2968	ST D		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<b>\</b>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	400	ROW.	8 1/2
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓	
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	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country:		1000	Mes.
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	.483		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	THE RES	S Sh	18772
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	21101	N. H.	
	and services provided to the payor?	7a	✓	
b	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	1	
d	If "Yes," indicate the number of Forms 8282 filed during the year	2031	2,90	(39)
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the		and a	(J=8)/
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Walls	100	1565
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		_
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	Test	500	200
a b	Initiation fees and capital contributions included on Part VIII, line 12		360	Marie I
11	Section 501(c)(12) organizations. Enter:		(TE)	
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		No.	123
	against amounts due or received from them.)	Page 1		512
12a	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   12b	SUN	186	1023
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Qis	198
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	19.5	PER S	SIL
b	Enter the amount of reserves the organization is required to maintain by the states in which	100	STEEL STEEL	833
	the organization is licensed to issue qualified health plans	3253	17 50	115
С	Enter the amount of reserves on hand	1198	(PAS	ar.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ons.				
Section	on A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30	2/03						
	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	yes i						
	committee, explain in Schedule O.	resign.						
_	Enter the number of voting members included in line 1a, above, who are independent .    1b 25  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	13.11	S. L.	center				
2	any other officer, director, trustee, or key employee?	2	1	012 W				
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1				
6	Did the organization have members or stockholders?	6		<b>/</b>				
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	/					
L.	Are any governance decisions of the organization reserved to (or subject to approval by) members,	10	•	_				
b	stockholders, or persons other than the governing body?	7b		<b>1</b>				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1000						
_	the year by the following:							
а	The governing body?	8a	1					
b	Each committee with authority to act on behalf of the governing body?	8b	✓					
9								
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9						
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	Yes	No				
100	Did the organization have local chapters, branches, or affiliates?	10a		1				
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		<u> </u>				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		<b>√</b>				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Dett!	Systell	18876				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<b>√</b>					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<b>√</b>					
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	<b>√</b>					
13	Did the organization have a written whistleblower policy?	13	1					
14	Did the organization have a written document retention and destruction policy?	14	1					
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?		1	TOWN				
į.	The organization's CEO, Executive Director, or top management official	15a	FART	1				
a b	Other officers or key employees of the organization	15b		1				
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	PAN PAN	J418	100				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	HEY!		(18 gr				
	with a taxable entity during the year?	16a		1				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	45.5		1 500				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	SOUTH STATES					
Secti	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► KY, MA, MD, MI, MN, NH, SC, WA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	า 501	c)(3)s	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)	oro-t	nell-					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	bolic	y, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords						
20	State the name, address, and telephone number of the person who possesses the organization's books and re- Curtis J Kowaleski, (507)933-7499							

Dogo	-
raye	

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organ		9	V-4115-		C)	101				
(A) Name and Title	(B) Average hours per week (list any	officer and a director/trustee)						(D) Reportable compensation from	(E)  Reportable compensation from related	<b>(F)</b> Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Jon V Anderson	2									
Director	0	1						0	0	0
Scott P Anderson	2									
Director	0	1						0	0	0
Catherine Asta	2									
Director	0	1						0	0	0
Tracy L Bahl	2									
Director	0	1						0	0	0
Grayce Belvedere-Young	2									
Director/Vice Chair	0	1						0	0	0
Suzanne F Boda	2									
Director	0	✓						0	0	0
Daniel G Currell	2									
Director	0	1						0	0	0
Edward J Drenttel	2									
Director	0	✓						0	0	c
Bruce A Edwards	2									
Director	0	1						0	0	o
James H Gale	2									
Director	0	1						0	0	o
John O Hallberg	2									
Director	0	1						0	0	0
Susanne B Heim	2									
Director	0	1						0	0	0
George G Hicks	2									
Director	0	✓						0	o	0
Linda G Huett	2									
Director	0	✓						0	0	0

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

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, ice Individua	unles er and	Pos ieck is pe	rson	e that both or/trust Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Peter C Johnson	2									
Director	0	1						0	0	0
Linda B Keefe	2									
Director	0	✓						0	0	0
Talmadge E King Jr	2									
Director	0	1						0	0	
Paul R Koch	2									
Director/Vice Chair	0	✓						0	0	0
Jan Lindman	2									
Director	0	✓						0	0	
Janice M Michaletz	2									
Director	0	✓						0	0	
Thomas J Mielke	2									
Director	0	✓						0	0	
Marcia L Page	2									
Director	0	✓						0	0	
Craig A Pederson	2									
Director	0	✓						0	0	
Wayne B Peterson	2									
Director	0	✓						0	0	
Dan S Poffenberger	2	1								
Director/Chair	0.5	✓						0	0	(
Christopher J Rasmussen	2									
Director/Vice Chair	0	1						0	0	
Beth S Schnell	2									
Director	0	✓						0	0	(
Ronald C White	2									
Director	0	] ✓						C	0	(

C	Part VII Se	ection A Officers Directors Trust	loos Koy E	mnlo			nd L	liabo	~ ~	amnonantad F	man I man and the matter	er i a alV		Page C
Name and tells	T CHE AIT OF	octoria, ornicera, priectora, trus	lees, Ney E	mpio	yee			ugne	St C	ompensated E	mployees (contin	iuea)		
Poors for related   Poo			Average hours per	box,	(do not check more the box, unless person is officer and a director/					Reportable compensation	Reportable compensation from	am	imated ount of	
Director			hours for related organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	comp fro orga and	ensation m the inization related	n I
Rebecca M Bergman	Heather T Wigo	lahl	2											
President   0.5	Director		0	1						0	0			0
Prevost and Dean of the College	*********	gman	50											
Provest and Dearn of the College	President			<b>√</b>		1				332,007	0		10	1,251
Thomas J Rooney														
CFO, Vice President for Finance and Treasurer   0.5						1				167,868	0		3	5,502
Marcia J Bunge														
Faculty	***************************************					<b>✓</b>				198,104	0		13	6,741
Diane K Lund Dean 50		)	CONDESSESSES											
Faculty  Ann S Peterson  Ansociate Vice President for Advancement & Direc  50  Vice President for Student Life & Dean of Students  50  Vice President for Student Life & Dean of Students  50  Vice President for Institutional Advancement  50  Vice						_		<b>_</b>		127,890	0		1	9,643
Ann S Peterson  Associate Vice President for Advancement & Direc 0  Associate Vice President for Advancement & Direc 0  Vice President for Student Life & Dean of Students 0  Vice President for Student Life & Dean of Students 0  Vice President for Institutional Advancement 0  Vice President for Institutional Advancement 0  Amrk J Braun  So  Former Provost and Dean of the College/Faculty 0  Kenneth C Westphal  Former Vice President for Finance and Treasurer 0  Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization be 18  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization or individual.  Total Rependent Contractors  Compete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  (B)  Description of services  (C)  Compensation Services  (A)  Name and Dusiness address  (B)  Description of services  (C)  Compensation Services  (A)  Name and Dusiness address  (B)  Description of services  (C)  Compensation Services  (A)  Name and Dusiness address  (B)  Description of services  (C)  Compensation Services  (A)  Name and Dusiness address  (B)  Description of services  (C)  Compensation Services  (C)  Compensati		Dean						,			200			
Associate Vice President for Advancement & Direc 0				-	_	_		<b>-</b>		133,903	0			9,640
Jones R VanHecke    Jones R VanHecke   Jones R VanH								,						
Vice President for Student Life & Dean of Students   0		The state of the s			_				_	126,091	0		1	6,679
Thomas W Young  Vice President for Institutional Advancement  O  V  163,130  O  82,773  Mark J Braun  Former Provost and Dean of the College/Faculty  O  Kenneth C Westphal  Former Provost and Dean of the College/Faculty  O  Kenneth C Westphal  Former Provost and Dean of the College/Faculty  O  Kenneth C Westphal  Former Vice President for Finance and Treasurer  O  1b Sub-total  C  Total from continuation sheets to Part VII, Section A  d  Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Total quay person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services  Description of services  Description of services  2,982,246  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Direct Marketing  418,699  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Construction Services  297,747  Heroic Productions Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  266,603		***************************************	***********					,		440.000				
Vice President for Institutional Advancement   0					-	H		· ·	_	146,390	0		1	9,646
Mark J Braun 50								.,		100 100			2	27
Former Provost and Dean of the College/Faculty   0	- Andread Control of the Control of	ior institutional Advancement		_	_			•	-	163,130	0		8	2,773
Former Vice President for Finance and Treasurer 0		and Dean of the College/Faculty							./	160 507			_	
Former Vice President for Finance and Treasurer 0									Ť	160,527	0		5	4,904
1b Sub-total .									<b>/</b>	102 762	ا			
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c).  1,659,673  1,659,673  0 476,779  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►  18  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  (B)  Description of services  2,982,246  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Direct Marketing  418,699  Gosewisch Construction lnc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  266,377					-			_	÷				47	
Total (add lines 1b and 1c).  1,659,673  0 476,779  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  (B)  Description of services  2,982,246  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Direct Marketing  418,699  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  266,377			VII. Section	n A	99	20 <b>0</b> 22				1,009,070			47	0,779
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual					02	04 C				1 650 673	0		47	6 770
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2 Total nu	mber of individuals (including but	not limited					above	e) w	ho received mo		0 of	41	0,779
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	195540 0000 01000						_			10			Van	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3 Did the employe	organization list any former off se on line 1a? If "Yes," complete S	ficer, direct Schedule J	tor, o <i>for su</i>	r tr <i>ich</i>	uste <i>indi</i>	e, Vidu	key e ıal	mp 	loyee, or high	est compensate	Second Street		140
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	organiza	ation and related organizations	sum of rep greater tha	oortak an \$1	ole ( 50,	com 000	per ? <i>If</i>	satio "Yes	n aı s,"	nd other comp complete Sch	ensation from th edule J for suc	e h		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Hastings and Chivetta Architects Inc, 622 Emerson Road, Saint Louis, MO 63141  Architectural Services  2,982,246  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  266,377	5 Did any	person listed on line 1a receive or	r accrue co	· · mper	nsat	ion	fror	n any	uni	related organiz	ation or individua	al al		200
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Hastings and Chivetta Architects Inc, 622 Emerson Road, Saint Louis, MO 63141  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  266.377			11 100, 0	ompi	310	OCII		10 0 10	01 3	acii persori		5		<b>√</b>
(A) Name and business address  Hastings and Chivetta Architects Inc, 622 Emerson Road, Saint Louis, MO 63141  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Marketing Consultant  (C) Compensation  Architectural Services  2,982,246  Direct Marketing  418,699  Construction Services  267,603  Marketing Consultant  266,377	1 Complet compen	te this table for your five highest o	compensate ort comper	ed ind	lepe	ende	ent o	contra alenda	acto ar y	ors that receive ear ending with	d more than \$10 n or within the or	0,000 of ganizatio	on's ta	ax
Hastings and Chivetta Architects Inc, 622 Emerson Road, Saint Louis, MO 63141  Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Architectural Services  2,982,246  Direct Marketing  Construction Services  297,747  Conference Services  267,603	year.												_	
Royall and Company, 1920 East Parham Road, Richmond, VA 23228  Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220  Direct Marketing  Construction Services  267,603  Marketing Consultant  266,377	770-0						_			Description of se	ervices	Compens	ation	
Gosewisch Construction Inc, 901 Summit Avenue, Mankato, MN 56001 Construction Services 297,747  Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420 Conference Services 267,603  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220 Marketing Consultant 266,377						O 6	314	1			ces		2,98	2,246
Heroic Productions Inc, 801 West 106th Street, Minneapolis, MN 55420 Conference Services 267,603  Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220 Marketing Consultant 266,377														
Barton Denmarsh Esteban Inc, 681 Andersen Drive, Pittsburgh, PA 15220 Marketing Consultant 266.377									_					
							_							
							imit.	od to	Ma	rketing Consult	ant		26	5,377

received more than \$100,000 of compensation from the organization ▶

14

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII . . . . (D)
Revenue
excluded from tax
under sections
512-514 (C) Unrelated (B) Related or (A) Total revenue exempt business revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns . . . 1a 0 Membership dues . . . 1b 0 Fundraising events . . . . 1c 451,519 1d d Related organizations . . . 0 Government grants (contributions) 1,326,473 Contributions, All other contributions, gifts, grants, and similar amounts not included above 31,467,788 Noncash contributions included in lines 1a-1f: \$ 2,465,351 33.245.780 Total. Add lines 1a-1f . . . . **Business Code** Program Service Revenue 0 0 611310 95,324,509 95,324,509 2a **Tuition and Fees** 13,015,813 172,664 0 721000 13,188,477 Residence Halls 6,761,670 867,963 0 7,629,633 722210 Dining Service 0 1,765,396 1,765,396 451211 Book Mark 0 713940 641,234 607,479 33,755 Athletic Facilities 0 177,834 2,221,312 2,399,146 All other program service revenue. 120,948,395 Investment income (including dividends, interest, and other similar amounts) . . . . . . . -770,994 2,738,189 1,967,195 0 0 12,952 Income from investment of tax-exempt bond proceeds ▶ 12,952 4 0 6,476 6,476 0 Royalties . . (i) Real (ii) Personal 0 6a Gross rents . . 0 0 b Less: rental expenses 0 0 c Rental income or (loss) n d Net rental income or (loss) (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory 0 122,335,348 Less: cost or other basis and sales expenses . 106,546,004 0 Gain or (loss) . . 15,789,344 0 15,789,344 Net gain or (loss) 15,789,344 Other Revenue 8a Gross income from fundraising events (not including \$ 451,519 of contributions reported on line 1c). See Part IV, line 18 . . . . . 288,328 **b** Less: direct expenses 290,138 -1,810 -1,810 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 . . . . . 97,770 **b** Less; direct expenses . . . . 11,168 c Net income or (loss) from gaming activities . . . 86,602 86,602 10a Gross sales of inventory, less returns and allowances . . . 0 0 **b** Less; cost of goods sold . . . Net income or (loss) from sales of inventory . . . 0 **Business Code** Miscellaneous Revenue 11a b d All other revenue . . . . Total. Add lines 11a-11d . . 0 18,631,753 481.222 Total revenue. See instructions. 172,054,934 119,696,179 Form 990 (2017) Part IX Statement of Functional Expenses

Do no	Check if Schedule O contains a response include amounts reported on lines 6b, 7b,				
	b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		,	garieral experience	CAPCINGS.
2	Grants and other assistance to domestic individuals. See Part IV, line 22	54,565,281	54,565,281		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	trustees, and key employees	841,632	209,871	631,761	
_	persons described in section 4958(c)(3)(B)	144,276	144,276		
7 8	Other salaries and wages	36,743,820	33,356,101	1,662,939	1,724,780
9	Other employee benefits	2,273,559	2,014,089	143,482	115,988
10	Payroll taxes	7,743,756 2,470,079	6,867,518	482,079	394,159
11	Fees for services (non-employees):	2,470,079	2,224,801	117,911	127,367
a	Management	0			
b	Legal	248,857		225,803	23,054
C	Accounting	70,473		70,473	
ď	Lobbying	103,913		103,913	
е	Professional fundraising services. See Part IV, line 17	192,289	と所質を対し、と言うと	WEST OF STATE	192,289
f	Investment management fees	418,752		418,752	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,426,695	1,265,305	122,503	38,887
12	Advertising and promotion	421,706	421,706	122,303	30,007
13	Office expenses	754,271	195,862	347,995	210,414
14	Information technology	895,265	872,230	17,370	5,665
15	Royalties				31555
16	Occupancy	4,750,107	4,535,964	178,346	35,797
17	Travel	1,335,149	1,188,524	39,466	107,159
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	123,024	111,726	2,410	8,88
20 21	Interest	1,875,126	1,856,952	18,174	
22	Depreciation, depletion, and amortization	6,617,516	6,319,187	248,459	49,870
23	Insurance	530,674	506,750	19,925	3,999
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.)				
<b>a</b>	Dining Service Expenses	3,234,569	3,234,569	0	
b	Study Away Expenses	2,368,824	2,368,824	0	
C	Book Mark Expenses	1,209,129	1,209,129	0	
d	Academic Expenses	1,580,049	1,570,966	9,083	
e os	All other expenses	4,564,867	3,185,479	985,663	393,725
25 26	Total functional expenses. Add lines 1 through 24e  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)	137,503,658	128,225,110	5,846,507	3,432,041

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 58,170 1 72,996 1 2 58,127,475 49,687,566 2 23.828.753 3 26,373,342 3 4 708,647 705,058 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 7 28,436 26,914 426,678 8 471,727 8 1,676,613 9 1,788,886 Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 232,620,968 10b 10c 113,555,399 110,480,580 Less: accumulated depreciation . . . . 122,140,388 11 129,168,286 146,443,770 11 12 66,648,263 83,221,501 Investments—other securities. See Part IV, line 11 12 13 2,577,052 2,448,221 13 14 14 15 2,065,433 10,086,948 15 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . 390,429,296 16 440,247,418 16 Accounts payable and accrued expenses . . . . . . . . 16,283,463 17 17,831,882 17 18 18 2,404,746 19 2,455,507 19 20 67,319,988 50,527,912 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 2,661,017 2,711,705 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 12,610,738 25 13,240,126 84,487,876 26 103,559,208 Total liabilities. Add lines 17 through 25 . . . . 26 Organizations that follow SFAS 117 (ASC 958), check here Vand Balances complete lines 27 through 29, and lines 33 and 34. 27 63,203,752 62,907,367 27 28 122,703,672 135,285,639 28 120,033,996 29 138,495,204 29 **Net Assets or Fund** Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds . . . . . . . . . 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds ... 32 33 336,688,210 305,941,420 33 34 440,247,418 Total liabilities and net assets/fund balances . . . . . . . 390.429.296 34

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Page **12** 

Check if Schedule O contains a response or note to any line in this Part XI  1 Total revenue (must equal Part VIII, column (A), line 12)			
			1
	1	72,05	4.934
2 Total expenses (must equal Part IX, column (A), line 25)		37,50	
3 Revenue less expenses. Subtract line 2 from line 1			1,276
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4			1,420
5 Net unrealized gains (losses) on investments		-2,76	2,620
6 Donated services and use of facilities			0
7 Investment expenses			0
8 Prior period adjustments			0
9 Other changes in net assets or fund balances (explain in Schedule O)		-1,04	1,866
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			-70 - 73
33, column (B))	3	36,68	8,210
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII		((a) - ((a	
4 4 " " 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other ☐	MS.	1	
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		0.50	75.8
		TI VOE	WISS
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:	X is		-8.18
	S E		TWO.
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	20/25		
b Were the organization's financial statements audited by an independent accountant?	2b	<b>✓</b>	-
separate basis, consolidated basis, or both:		123.00	83E
☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	guita.	18/14	2
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		100	- N-
of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	1	
If the organization changed either its oversight process or selection process during the tax year, explain in	26	OLUMBIA DE	DE LA COLUMN
Schedule O.	Jan 1		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		200 00	
the Single Audit Act and OMB Circular A-133?	3a	<b>√</b>	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ja	· ·	
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	_,	
		ຸ່ງງາ	(2017)

### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

**GUSTAVUS ADOLPHUS COLLEGE** 

Employer identification number 41-0695524

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having Ь control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed In your governing support (see other support (see (described on lines 1-10 above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

**Total** 

Par	Support Schedule for Organiza	ations Desci	ribed in Sect	ions 170(b)(1	I)(A)(iv) and	170(b)(1)(A)(v	i)
	(Complete only if you checked the	ne box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
	Part III. If the organization fails to	qualify und	er the tests lis	sted below, p	lease compl	ete Part III.)	
	ion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by	THE BUSINESS TO SELECT	THE WAY THE	(A) 10 0 2 17	USA KILISAN	A CONTRACTOR	
	each person (other than a		Estate Asia				
	governmental unit or publicly			ALC: NEWS			
	supported organization) included on						
	line 1 that exceeds 2% of the amount	<b>用</b> 、作品		15 - 17 C. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
•	shown on line 11, column (f)	E STANKER	EG BALLEY	100000000000000000000000000000000000000			
6 Secti	Public support. Subtract line 5 from line 4 ion B. Total Support		20x 2/14 (0.5°) 1 (c.	The Contraction of	A SERVICIA	S-E SOWNIVE	
-	idar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(a) 2017	(O Total
7	Amounts from line 4	(a) 2013	(0) 2014	(0) 2015	(u) 2016	<b>(e)</b> 2017	(f) Total
8	Gross income from interest, dividends,						
_	payments received on securities loans,	li .					
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	ENLISTAVES S.	SUNS NASO		Interest   138 m	ESS SIVE H	
12	Gross receipts from related activities, etc.	. (see instructi	ons)	S 52 02 04 05	33 20 20 20	12	
13	First five years. If the Form 990 is for the						n 501(c)(3)
	organization, check this box and stop he	re					
Secti	on C. Computation of Public Suppor	t Percentag	е				
14	Public support percentage for 2017 (line 6					14	%
15	Public support percentage from 2016 Sch					15	%
16a	331/3% support test—2017. If the organi						
b	box and <b>stop here.</b> The organization qual						
	331/2% support test – 2016. If the organithis box and stop here. The organization	qualifies as a	publicly suppo	orted organizat	ion		▶ □
17a	10%-facts-and-circumstances test—20	017. If the org	anization did r	ot check a bo	x on line 13, 1	6a, or 16b, and	line 14 is
	10% or more, and if the organization me	ets the "facts	-and-circumst	ances" test, cl	neck this box	and <b>stop here.</b>	Explain in
	Part VI how the organization meets the "organization						
L							-
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization n	neets the "fac	ts-and-circum	stances" test	The organizat	uns DUX and s ion qualifies as	a publick
	supported organization						<b>&gt;</b>
18	Private foundation If the organization di						

# Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support				×		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
J	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
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	STORE STORY	ALL MARKET MARKET	A Section		Date de la Constitución de la Co	
	line 6.)			1000			
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		n'a first	ad thind format	h or fifth tox:	100x 00 0 000±1	n 501(a)(2)
14	First five years. If the Form 990 is for the organization, check this box and stop he					real as a section	
Socti	on C. Computation of Public Suppo			10 10 10 10 10			
15	Public support percentage for 2017 (line			13 column (f)	~ ~ ~ ~	15	%
16	Public support percentage for 2017 (inc.)						%
	on D. Computation of Investment In				<u> </u>	1	70
17	Investment income percentage for 2017			ov line 13. colu	ımn (fi)	. 17	%
18	Investment income percentage for 2017	6 Schedule A	Part III, line 17	7		18	%
19a	331/3% support tests—2017. If the organ	ization did no	t check the bo	x on line 14.	and line 15 is r		
134	17 is not more than 331/3%, check this box	and stop here	. The organizat	ion qualifies as	a publicly supr	orted organizat	tion . ▶ 🗆
b	331/3% support tests—2016. If the organia	zation did not	check a box or	line 14 or line	19a, and line 1	6 is more than	33 <sup>1</sup> / <sub>3</sub> %, and
D	line 18 is not more than 331/3%, check this	box and stop	here. The organ	nization qualifie	s as a publicly	supported orga	nization
20	Private foundation. If the organization d						

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting C	)rganizations
-----------------------------	---------------

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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1		Yes	No
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Part	V Supporting Organizations (continued)			
		menosis	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	0.00	48 11
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2	li Kan	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
a b c	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity</li> </ul>			
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
b	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .  Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI</i> the role played by the organization in this regard.	3a 3b	10.37	RSA

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	tru nizat	st on Nov. 20, 1970 (exp ions must complete Sec	lain in Part VI). <b>See</b> tions A through E.
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):	100		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	CONTRACTOR OF THE PARTY OF THE	
2 Enter 85% of line 1.	2	SEMICHARD WEST	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	White State of the	
5 Income tax imposed in prior year	5	THE REAL PROPERTY.	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).		egrated Type III support	ing organization (see

Schedul	e A (Form 990 or 990-EZ) 2017			Page 7				
Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)					
	on D - Distributions			Current Year				
1	Amounts paid to supported organizations to accomplish e	exempt purposes						
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted					
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purp							
4	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval required)							
6	Other distributions (describe in Part VI). See instructions.							
7	7 Total annual distributions. Add lines 1 through 6,							
8	8 Distributions to attentive supported organizations to which the organization is responsive							
	(provide details in Part VI). See instructions.							
9	Distributable amount for 2017 from Section C, line 6							
10	Line 8 amount divided by line 9 amount							
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017				
1	Distributable amount for 2017 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.							
3	Excess distributions carryover, if any, to 2017							
а								
b	From 2013							
С	From 2014							
d	From 2015							
е	From 2016		MARKET STOLEN, AND AND					
f	Total of lines 3a through e							
g	Applied to underdistributions of prior years							
h	Applied to 2017 distributable amount		maticary illustration described					
i	Carryover from 2012 not applied (see instructions)			SILE WAR WING TO SHE				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			Charles Inni Sirons				
4	Distributions for 2017 from	E WAR STOWN						
	Section D, line 7: \$	ALL WALKERS AND AND CHARLES	ALLOS VERVIVONOS ESTAS					
a	Applied to underdistributions of prior years	The state of the s						
b	Applied to 2017 distributable amount			NEW YORK STREET				
C	Remainder. Subtract lines 4a and 4b from 4.		M.S. HORNANDE BOLDWAY					
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.							
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.							
7	Excess distributions carryover to 2018. Add lines 3j and 4c.							
8	Breakdown of line 7:	WINDLINESS STREET		Market Market				
а	Excess from 2013	HEAVER HEAVEN	Articles & Line Spills of					
b	Excess from 2014	ALAUN BENEATER						
С	Excess from 2015							
d	Excess from 2016	Kara Sayana Maran						
е	Excess from 2017		Sandy a stable of					
			0.4	A /Form 000 or 000 EZ\ 2017				

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	***************************************
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	***************************************
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### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes." on Form 990. Part IV. line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

	ee separate instructions), th		,,,	•	
	ction 501(c)(4), (5), or (6) organ	nizations: Complete Part III.		Employer ident	tification number
	of organization	_		1104000 COOK BOOK BOOK SEC. 152.9	41-0695524
	AVUS ADOLPHUS COLLEGE	: - exceptantion is exempt unde	r caction 501/a		
Part 1 2 3 Part 1 2 3 4a b Part 1 2 3 43 3	Provide a description of definition of "political camp Political campaign activity Volunteer hours for political campaign activity Volunteer hours for political Complete if the Enter the amount of any Enter the amount of Enter the amount directly activities	y expenditures (see instructions) . al campaign activities (see instructions) and campaign activities (see instructions) are constant or constant of the const	tions)	mpaign activities in Part  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	IV. (see instructions for
4 5	line 17b	file Form 1120-POL for this year? ses and employer identification nurents. For each organization listed, entributions received that were profund or a political action committee.	nber (EIN) of all senter the amount	ection 527 political organized from the filing organiced delivered to a separate p	zation's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)		-484-488-488-188-1881-1881-1881-1881-18			

Schedule C (Form 990 or 9)	9U-EZ	12017
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Pa	rt II-A	Complete if the organizat section 501(h)).	ion is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ▶	if the filing organization bel address, EIN, expenses, ar	in Part IV each affi itures).	liated group membe	er's name,		
В	Check ▶	☐ if the filing organization che	ecked box A and	l "limited control" pr	ovisions apply.		
			bbying Expend	itures		(a) Filing organization's totals	(b) Affiliated group totals
1	<ul><li>b Total log</li><li>c Total log</li><li>d Other e</li><li>e Total e</li></ul>	obbying expenditures to influen obbying expenditures to influen obbying expenditures (add lines exempt purpose expenditures exempt purpose expenditures (aing nontaxable amount. Entens.	ce a legislative to a l	oody (direct lobbying			
	If the ar	mount on line 1e, column (a) or (b)	is: The lobbyin	g nontaxable amoun	t is:	West As I work to	
	Not ove	r \$500,000		amount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	us 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$1,500,000			\$175,000 pk	us 10% of the excess	over \$1,000,000.		
		,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the excess o	ver \$1,500,000.		
_		7,000,000 oots nontaxable amount (enter	\$1,000,000.			(東)/東南京 (F DING)	0.24
	j If there reporti	e organizations that made a s	ro on either line ar? Year Averaging section 501(h) e	Period Under sec	tion 501(h) e to complete all		Yes No
				s During 4-Year Av			
-		Lobbyi	ng Expenditure	S During 4- Year Av	reraging Period		
	Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	(e) Total
2	a Lobbyi	ng nontaxable amount					
		ng ceiling amount of line 2a, column (e))					
	c Total lo	obbying expenditures			A		
	d Grassr	oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))					
	f Grassro	oots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	Form	5768
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	d (i	a)	(b)
description of the lobbying activity.	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local	d Barrie		
legislation, including any attempt to influence public opinion on a legislative matter of	r 🎆		
referendum, through the use of:	I SHOW	BON	
a Volunteers?		1	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-	1	E BOOK AVAILABLE
c Media advertisements?		1	
d Mailings to members, legislators, or the public?		1	
e Publications, or published or broadcast statements?	1	<del>   </del>	103,913
Di la		1	100,010
b Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-	1	
i Other activities?		1	
j Total. Add lines 1c through 1i	340	3 177.0	103,913
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		1	HE ALS THE
b If "Yes," enter the amount of any tax incurred under section 4912	100	11/3/2	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	1000	350	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50: 501(c)(6).	(c)(5),	or sec	tion
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?	9 9 9		1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from	the prior	year?	3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes."	l(c)(5), 'OR (b	or sec ) Part	ction III-A, line 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).	nts of		
a Current year		2a	
<b>b</b> Carryover from last year		2b	
<b>c</b> Total		2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion			
excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbying	311 12	
and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information	aroup li	ctl. Dar	+ II A lines 1 and
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.			
Schedule C, Part II-B, Line 1 - Gustavus Adolphus College (the College) is a member of Minnesota Private C			
organization described in section 501(c)(4) of the Internal Revenue Code. MPCC is an association of private			
education that serves a variety of its members' shared needs, including, but not only, nonpartisan and non			
policy that meets students' needs and advances the interests of private higher education. The College paid	member	suib an	es to MPCC In
the amount of \$128,595 during the taxable year. MPCC has divided its expenses for its taxable year ending.  Group 1 consists of those expenses that did not in any way support attempts to influence legislation within	the mea	ning of	section 501(c)(3)

of the Internal Revenue Code ("lobbying"), and Group 2 consists of all other expenses. Group 2 includes many expenses, such as personnel costs, that supported both lobbying and nonlobbying activities. MPCC did not attempt to allocate the Group 2 expenses between lobbying and nonlobbying activities. MPCC has determined that the amount of the Group 2 expenses represents 80.30% of the amount of the dues that MPCC collected in the same taxable year. Assuming that all Group 2 expenses were paid from member dues, and allocating those expenses pro rata based on the dues paid by each member, \$103,263 of the College's dues were used to pay Group 2 expenses. The amount of lobbying expenses paid from the College's dues was significantly less than that amount. In addition, the College paid

# Schedule C (Form 990) 2017 Page 4 Part IV - Supplemental Information (Continued) \$650, was estimated to be used for lobbying expenses.

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

# **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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

GUSTA	AVUS ADOLPHUS COLLEGE		41-0695524
Part	Organizations Maintaining Donor Adv	rised Funds or Other Similar Fun	ds or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	eld in donor advised
	funds are the organization's property, subject to the	ne organization's exclusive legal contro	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	nt funds can be used
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or f	or any other purpose
Part	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
•	Preservation of land for public use (e.g., recrea	ition or education)  Preservation o	f a historically important land area
	Protection of natural habitat	☐ Preservation o	f a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution	on in the form of a conservation
-	easement on the last day of the tax year.		Held at the End of the Tax Year
	· · · · · · · · · · · · · · · · · · ·		2a
a	Total acreage restricted by conservation easemen		
b	Number of conservation easements on a certified		
C	Number of conservation easements included in	(c) acquired after 7/25/06 and not	
d			
2	Number of conservation easements modified, tran		
3	tax year ►	isierred, roloasod, extinguismod, or tor	minated by the organization during the
	Number of states where property subject to conse	onyation assement is located	
4	Does the organization have a written policy re	parding the periodic monitoring in	spection handling of
5	violations, and enforcement of the conservation ea	seaments it holds?	· · · · · · · · · · · · · · No
_			
6	Staff and volunteer hours devoted to monitoring, inspec	eting, nandling of violations, and emorcing	conservation easements during the year
_		bandling of violations and enforcing	conservation accoments during the year
7	Amount of expenses incurred in monitoring, inspecti	ng, nandling of violations, and enforcing	Conservation easements during the year
_	<b>&gt;</b> \$	O(d) above estisfy the requirements of	f costion 170/b\(4\/P\(i\)
8	Does each conservation easement reported on line		· · · · · · · · · · · Yes · No
	and 555 non 11 5(1)/(1)/(1)/(1)		<u> </u>
9	In Part XIII, describe how the organization reports	conservation easements in its revenu-	e and expense statement, and
	balance sheet, and include, if applicable, the text		nancial statements that describes the
	organization's accounting for conservation easem		. Other Cimiles Accets
Part			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SF	FAS 116 (ASC 958), not to report in it	is revenue statement and balance sneet
	works of art, historical treasures, or other simila	ir assets neid for public exhibition, e	et describes these items
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under	SFAS 116 (ASC 958), to report in its	revenue statement and balance sneet
	works of art, historical treasures, or other similar		education, or research in furtherance of
	public service, provide the following amounts rela		
	(i) Revenue included on Form 990, Part VIII, line 1	l	
	(ii) Assets included in Form 990, Part X		\$ 637,795
2	If the organization received or held works of ar	t, historical treasures, or other simila	ar assets for financial gain, provide the
	following amounts required to be reported under		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X	** 10 (0) (0) (0) (0) (0) (0) (0) (0) (0) (0	▶ \$ 0

	Organizations Maintaining	Collections of	Art, Historical	Treasures, or C	Other Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of				gnificant use of its
а	✓ Public exhibition			n or exchange pro		
þ	Scholarly research		e 🗌 Othe	er		
C	Preservation for future generations					
4	Provide a description of the organiza XIII.	tion's collections a	ind explain how	they further the o	rganization's exem	pt purpose in Part
5	During the year, did the organization					•
	assets to be sold to raise funds rather	r than to be mainta	ined as part of th	e organization's	collection?	☐ Yes ✓ No
Par	IV Escrow and Custodial Arra	angements.				
	Complete if the organization 990, Part X, line 21.	n answered "Yes'	' on Form 990,	Part IV, line 9, o	r reported an am	ount on Form
1a	Is the organization an agent, trustee	custodian or oth	er intermediany t	or contributions	or other accate not	
Iu	included on Form 990, Part X?					☐ Yes ☑ No
b	If "Yes," explain the arrangement in P					☐ Tes ☑ NO
-	in 100, Oxplain the arrangement in 1	art Am and comple	ic the lenewing	Labic.	l An	nount
С	Beginning balance				С	
d	Additions during the year				d	
е					e	
f	Ending balance			V M M N.	lf	
2a	Did the organization include an amou	nt on Form 990, Pa	art X, line 21, for			✓ Yes No
b	If "Yes," explain the arrangement in P					
Par						
	Complete if the organization	answered "Yes'	on Form 990,	Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	166,977,567	142,126,277	146,169,62	138,475,977	125,373,292
b	Contributions	11,400,204	12,340,708			3,582,564
C	Net investment earnings, gains, and					
	losses	14,306,378	18,459,302	-2,029,56	9,677,571	14,594,320
d	Grants or scholarships	2,675,955	2,497,605			1,947,069
е	Other expenditures for facilities and					
	programs	4,081,646	3,286,123	3,524,52	3,190,515	3,003,600
f	Administrative expenses	418,752	164,992	172,084	173,003	123,530
g	End of year balance	185,507,796	166,977,567	142,126,27	146,169,621	138,475,977
2	Provide the estimated percentage of t	the current year en	d balance (line 1	g, column (a)) held	as:	
а	Board designated or quasi-endowme	nt ▶15	5%			
þ	Permanent endowment	85 %				
C	Temporarily restricted endowment ▶					
	The percentages on lines 2a, 2b, and					
3a	Are there endowment funds not in the	e possession of th	e organization th	at are held and a	dministered for the	
	organization by:					Yes No
	(i) unrelated organizations					3a(i) ✓
	` '					3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on S	chedule R?		3b
4	Describe in Part XIII the intended uses		n's endowment	runds.		
Part			F 000	Dark IV. Box 44.	0 5 000	
-	Complete if the organization					
	Description of property	(a) Cost or oth	1	or other basis (c)	Accumulated depreciation	(d) Book value
1a	Land	e -	676,340	955,993	The state of the s	1,632,333
b	Buildings	ec		178,718,919	85,201,656	93,781,442
C	Leasehold improvements	•8	0	0	0	0
d	Equipment	0	0	30,119,319	22,634,770	7,484,549
е	Other		0	21,886,218	14,303,962	7,582,256
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	0. Part X. colum		W W W SI	110 480 580

Part VII	Investments - Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
	eld equity interests		Tarrent Sur - Arrent Se-tarrent
	mmodity Funds	464,896	End-of-Year Market Value
(A) Fund o		77,019,809	
	Held by Others	5,588,677	End-of-Year Market Value
(C) Other		148,119	End-of-Year Market Value
(D)			
(E) (F)			
(G)			
(H)			
	) must equal Form 990, Part X, col. (B) line 12.) ▶	83,221,501	The second second second second
Part VIII	Investments – Program Related.	00,221,001	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11c. See F	orm 990, Part X, line 13.
7	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		SON WAR THE STATE OF THE STATE
100000000000000000000000000000000000000	o) must equal Form 990, Part X, col. (B) line 13.) ►  Other Assets.		
Part IX	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11d. See F	form 990, Part X, line 15.
- CAN	(a) Doconpacti		
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 15.)	3 4 4 4 4 4 8	. 🏲
Part X	Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part line 25.	IV, line 11e or 11f	. See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal in			0
(2) Annuitie	s Payable		10,493,846
	vernment Grants Refundable		2,548,643
	nterest Discount on Pooled Life Income		197,637
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 25.) ▶		13,240,126
2. Liability for organization'	r uncertain tax positions. In Part XIII, provide the text of the footnote to the orga s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the	inization's financial states text of the footnote ha	atements that reports the s been provided in Part XIII

Par	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,			Return.	
1	Total revenue, gains, and other support per audited financial statements			1	115,190,345
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	(0) (0)		4500	110,100,010
а	Net unrealized gains (losses) on investments	2a	-2,762,620	A150	
b	Donated services and use of facilities	2b	0	Time ?	
C	Recoveries of prior year grants	2c	0	100	
ď	Other (Describe in Part XIII.)	2d	-54,101,969		
е	Add lines 2a through 2d	* *		2e	-56,864,589
3	Subtract line 2e from line 1			3	172,054,934
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			13313	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	8 585	
b	Other (Describe in Part XIII.)	4b	0	14 1135	
С	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	172,054,934
Part				r Return.	ĸ
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	100 200	150 150	(#) (#) (#) (#) (#) (#) (#)	1	84,443,555
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	î	ř	3349	
a	Donated services and use of facilities		0	93333	
b	Prior year adjustments		0	117.00	
C	Other losses		1,139,337		
d	Other (Describe in Part XIII.)		365,841	Section	
е	Add lines 2a through 2d	S*8 S*8	38 38 38 38 38 38 38 38 38 38 38 38 38 3	2e	1,505,178
3	Subtract line 2e from line 1	<b>9</b> 0 (90		3	82,938,377
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b		0	(a. 85	
b	Other (Describe in Part XIII.)		54,565,281	100000	GENERAL SERVICES
С 5	Add lines <b>4a</b> and <b>4b</b>	no 10 l	0.002 (0.00) (0.00) (0.00) (0.00) (0.00)	4c	54,565,281
Part		10.)		5	137,503,658
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a al	nd 1. D	art IV lines 1h and 2h	· Dart V lir	ne 4: Part V line
	: XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par				10 4, 1 art X, 11110
	ule D, Part III, Line 4 - The Hillstrom Museum of Art exists as an integral part		-		Collogo
	nts. As an important educational and cultural component of the College, the N				
	ibitions and programs, encourages the interdisciplinary study of the arts, an				
	ogram.	a provi	dod a contaxt for under	starioning tr	ic arts in a liberal
	0.000		***********		
Sched	ule D, Part IV, Line 2b - This includes the actuarial liability of deferred gift fu	nds hel	d for third parties and fi	unds held f	or various
	nt organizations.	*******			
	V-100-00	*******			******************
Scheo	ule D, Part V, Line 4 - Endowment funds are used for designated and undesi	anated	scholarships, endowed	chairs libr	arv
	itions, faculty development, student research, Nobel Conference and other e				******************
Sched	ule D, Part X, Line 2 - The Internal Revenue Service has determined that the	College	is exempt from federal	income tax	c under
	n 501(c)(3) of the Internal Revenue Code. Accordingly, the College is not sub				
	s income from certain activities not substantially related to its tax-exempt pu				
	e is also exempt from state income tax. The most significant areas that pote				
	lude hosting conferences and events, athletic space rentals and various ser				
	es to the public. At May 31, 2018 and 2017, the College has no current obliga		**************************************		<b>~</b>
	s the accounting standards for contingencies in evaluating uncertain tax pos				
	les for the financial statement recognition of tax positions taken or expected				
	d. No liability has been recognized by the College for uncertain tax positions				
	bject to review and examination by federal and state authorities.	usasummer			
Sched	ule D, Part XI, Line 2d - Adjustment of Actuarial Liability, Scholarships and G	rants to	Students, Miscellaneo	us Interde	partmental
	ments and Fundraising Reclassifications.				

# Part XIII - Supplemental Information (Continued)

Schedule D, Part XII, Line 2d - Miscellaneous Interdepartmental Adjustments and Fundraising Reclassifications
Schedule D, Part XII, Line 4b - Scholarships and Grants to Students
***************************************

### SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Schools**

 Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization

**GUSTAVUS ADOLPHUS COLLEGE** 

Employer identification number 41-0695524

			YES	NO
1	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	<b>✓</b>	
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	>	FUS
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3		
4	The following nondiscrimination policy appears in the all-college policy manual: Within the limits of its facilities, the College shall be open to all applicants who are qualified according to its admission requirements. The College shall make clear to all applicants the characteristics and expectations of students that it considers relevant to its program. Under no circumstances may an applicant be denied admission or financial aid because (Continued on Schedule E, Part II, Statement 1)  Does the organization maintain the following?			
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	✓ ✓	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	1	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	1	a) ij
		a s Shar		
5 a	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a	i Hiji Hijeri	1
b	Admissions policies?	5b		<b>/</b>
С	Employment of faculty or administrative staff?	5c		<b>1</b>
d	Scholarships or other financial assistance?	5d		<b>1</b>
е	Educational policies?	5e		<b>✓</b>
f	Use of facilities?	5f		1
g	Athletic programs?	5g		<b>/</b>
h	Other extracurricular activities?	5h		1
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	1	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		1
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.	2000	The same	115
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 populiscrimination? If "No." explain on Part II.	LUCE !	10000	300%

Schedule E (F	orm 990 or 990-EZ) 2017 Page <b>2</b>
Part II	<b>Supplemental Information.</b> Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.
Schedule E	, Part I, Line 6 - Gustavus received student financial aid assistance from the State of Minnesota and U.S. Department of
	The College also received other grants from the U.S. Government through programs from National Science Foundation, National
	t for the Humanities, General Services Administration and Department of Commerce.
-Engowing.	
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Schedule E, Part II, Statement 1

**GUSTAVUS ADOLPHUS COLLEGE** 

Form: Schedule E (2017)

Page: 1

Racially Nondiscriminatory Media Policy Explanation

EIN: 41-0695524 Part I, Line 3

### **Explanation**

of race, color, creed, religion, age, sex, sexual orientation, national origin, marital status, disability, veteran status, status with regard to public assistance or other categories protected by federal, state or local anti-discrimination laws. Financial aid administered by the College shall be disbursed on the basis of financial need and academic promise and/or academic ability.

### **SCHEDULE F** (Form 990)

# **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GUS1	AVUS ADOLPHUS COLLEGE					1-0695524
Par	Form 990, Part IV, line 1	14b.		the United States. Comp		
1	For grantmakers. Does the assistance, the grantees' elignants or assistance?	gibility for the	grants or as	rds to substantiate the amo sistance, and the selection 	ount of its grants and othe criteria used to award the	r e ☑Yes ☐No
2	For grantmakers. Describe assistance outside the Unite	d States.				ts and other
3	Activities per Region. (The fo	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	South America	0	0	Program Services	January Term-11 Students	38,881
(2)	Europe (including Iceland and (	0	0	Program Services	January Term-157 Student	773,610
(3)	East Asia and the Pacific	0	0	Program Services	January Term-63 Students	453,590
(4)	Europe (including Iceland and (	0	0	Program Services	Student Teaching-4 Stude	16,587
(5)	Central America and the Caribb	0	0	Program Services	Study Abroad-1 Student	6,350
(6)	East Asia and the Pacific	0	0	Program Services	Study Abroad-9 Students	155,720
(7)	Europe (including Iceland and C	0	0	Program Services	Study Abroad-39 Students	641,442
(8)	Middle East and North Africa	0	0	Program Services	Study Abroad-1 Student	12,400
(9)	Russia and the newly independ	0	0	Program Services	Study Abroad-1 Student	28,613
(10)	South America	0	0	Program Services	Study Abroad-1 Student	16,400
(11)	South Asia	0	0	Program Services	Study Abroad-18 Students	176,599
(12)	Sub-Saharan Africa	0	0	Program Services	Study Abroad-1 Student	6,825
(13)	Central America and the Caribb	0	0	Investments		3,432,830
(14)						
(15)						
(16)						
(17)						
3a b						

c Totals (add lines 3a and 3b)

5,759,847

Schedule F (Form 990) 2017

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)
1)								
2)	Hea Reg							
3)								
4)								
5)						2		
6)								
7								
3)								
9)								
10)								
11)								
12)								
13)								
14)	visive new [1]							
15)								
16)								

Page 3

Part III Can be duplicated if additional space is needed.

Page 3

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17)							
18)							

Part	V 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 Foreig Corporation (see Instructions for Form 926)		□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)	n	☑ 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 7 Certain Foreign Corporations (see Instructions for Form 5471)		☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 862 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	1,	□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 Certa. Foreign Partnerships (see Instructions for Form 8865)		□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? "Yes," the organization may be required to separately file Form 5713, International Boycott Report (se Instructions for Form 5713; don't file with Form 990)		☑ No

### Part V

### **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part I, Line 1 - Part I, Line 1 has been checked "yes" and a narrative for Part I, Line 2 provided (below) even though Core Form
Part IV, Line 16 is checked "no". Those disclosures reflect that the College's students who study outside of the U.S. continue to receive
financial aid that they are eligible for were they on-campus students. When a student takes a J-Term or one or more semesters abroad,
financial aid funds are typically disbursed when the student is still in the U.S. and thus such funds technically are not the subject of Part I,
Lines 1 and 2 (and, accordingly, are not reportable on Schedule F, Part III). The disclosures at Lines 1 and 2 are made in favor of
transparency and reflect that the College employs a different monitoring mechanism in such instances than that reported on Schedule I.
Schedule F, Part I, Line 2 - The College offers grants in the form of need or merit based scholarships to students who are studying outside
of the United States. Before the grant or award is available and disbursed, the Center for International and Cultural Education must approve
any program that a student is participating in. Once the grant has been disbursed to the student's account for the study away program, the
Center for International and Cultural Education maintains contact with the host institution to monitor the student's attendance and notifies
the Financial Assistance office and Student Accounts office if a student withdraws from the study away program.
***************************************
***************************************
***************************************

### SCHEDULE G (Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

OMB No. 1545-0047

2017

Open to Public

Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest instructions Name of the organization **Employer identification number GUSTAVUS ADOLPHUS COLLEGE** 41-0695524 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations e Solicitation of non-government grants b ✓ Internet and email solicitations f Solicitation of government grants Phone solicitations g Special fundraising events ✓ In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes □ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col. (i) (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (ii) Activity custody or control of contributions? (or retained by) organization or entity (fundraiser) from activity Yes No 1 See Schedule G, Part IV, Statement 2 3 4 5 6 7 8 9 10 Total 192,290 -192,290 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, AZ, CA, CO, CT, FL, HI, IL, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, NH, NY, OH, OK, OR, SC, SD, UT, VA, WA, WV

Part II	Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more
	than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with
	gross receipts greater than \$5,000.

		gross receipts greater tha				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Royal Affair	Football Golf	6	(add col. <b>(a)</b> through col. <b>(c)</b> )
m			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	625,516	40,619	73,712	739,847
۳	2	Less: Contributions Gross income (line 1 minus	377,040	25,423	49,056	451,519
		line 2)	248,476	15,196	24,656	288,328
	4	Cash prizes	0	0	0	0
	5	Noncash prizes	81,150	7,065	10,855	99,070
Sesu	6	Rent/facility costs	23,553	6,298	17,605	47,456
Direct Expenses	7	Food and beverages	76,221	3,717	6,188	86,126
Direc	8	Entertainment	5,495	0	0	5,495
	9	Other direct expenses	49,180	1,477	1,334	51,991
	10 11	Direct expense summary. Ac Net income summary. Subtra	290,138			
Do	rt III					-1,810
Га	4411	than \$15,000 on Form 9		ed 163 OH OH 33	o, raitiv, inic 15, or i	oported more
enue		man who, odd on homino	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total garning (add col. (a) through col. (c))
Revenue	1	Gross revenue			97,770	97,770
ses	2	Cash prizes			10,553	10,553
xbens	3	Noncash prizes				0
Direct Expenses	4	Rent/facility costs				0
	5	Other direct expenses .			615	615
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes% ☐ No	✓ Yes 95 %  □ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		11,168
	8	Net gaming income summar	y. Subtract line 7 from li	ine 1, column (d) 🔒 🔒		86,602
	a Is	nter the state(s) in which the or the organization licensed to co "No," explain:	onduct gaming activities	s in each of these states	5?	🗹 Yes 🗌 No
10a		/ere any of the organization's g	aming licenses revoked			? . ☐ Yes ☑ No

ichedul	ie G (Form 990 or 990-EZ) 2017			Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	_		□ No ☑ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility			97 %
b	An outside facility			3 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ► Rebecca M Bergman			
	Address ► 800 West College Avenue Saint Peter, MN 56082		******	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	□ \	res [	☑ No
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:			
	Name ►		****	
	Address ▶			
16	Gaming manager information:			
	Name ► Laura T Kelly		*****	
	Gaming manager compensation ► \$ 250			
	Description of services provided ► See Schedule G, Part IV, Statement 2			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17 a	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes [	☑ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ 0			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional infor See instructions.			d
			*******	
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		0.000000	INSECTION.	201120.0000
etanssire		*****		*********
		*****		
		****		

Schedule G, Part IV, Statement 1

**GUSTAVUS ADOLPHUS COLLEGE** 

Form: Schedule G (2017)

Page: 1

**Fundraiser Activity Information** 

EIN: 41-0695524 Part I, Line 2b

Name and Address	Activity	C1	Gross	C2	C3
Name and Address	Activity		Receipts		
Reeher LLC VB Box 159 PO Box 9202 Minneapolis, MN 55480-9202	Advancement Consultant	No	0	67,420	-67,420
Bentz Whaley Flessner and Associates Inc 7251 Ohms Lane Minneapolis, MN 55439	Advancement Consultant	No	0	33,159	-33,159
Wilson-Bennett Technology Inc PO Box 717 Cabot, AR 72023	Software Calling System	No	0	78,500	-78,500
Evangelical Lutheran Church in America PO Box 71256 Chicago, IL 60694-1256	Lutheran Planned Giving Partnership Fee	No	0	13,211	-13,211
Total:			0	192,290	-192,290

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

Schedule G, Part IV, Statement 2

**GUSTAVUS ADOLPHUS COLLEGE** 

Form: Schedule G (2017)

EIN: 41-0695524

Page: 3

Services provided by gaming manager

Part III, Line 16

### Description

The gaming manager's responsibilities include supervising, recordkeeping, money counting, making bank deposits for the raffle and ordering raffle tickets.

### 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

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.lrs.gov/Form990 for the latest information.

Open to Public Inspection
Employer identification number

GUSTAVUS ADOLPHUS COLLEGE							41-0695524
Part I General Information							
<ol> <li>Does the organization maintain the selection criteria used to a</li> </ol>					grantees' eligibility for		
2 Describe in Part IV the organiz							
							nswered "Yes" on Form
990, Part IV, line 21, fo			4		in Method of valuation		
1 (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	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)				1			
(5)							
(6)							
(7)							
(8)							-
(9)	7						
(10)							
(11)							
(12)							
2 Enter total number of section 8						OKC 65 (K OKC 95 )6 34	25002000000000000000000000000000000000
3 Enter total number of other org			e		Cat. No. 50055P	WO K R 30 K R 3	Schedule I (Form 990) (2017)
FOR Paper work negation Act Notice, 8	ee mie wignacho	HIS IOI FOITH \$30.			AL NO. SUUSSP		Scriedule I (FOITH 880) (2017)

Schedule I (Form 990) (2017)					Page 2
Part III Grants and Other Assistance to D		PLI	organization ansv	vered "Yes" on Form 990,	Part IV, line 22,
Part III can be duplicated if addition	al space is needed	j			g
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Merit-Based Student Financial Assistance	727	14,416,452			
2 Need-Based Student Financial Assistance	1326	37,063,582			
3 International Student Financial Assistance	101	3,085,247			
4 Tuition Benefit Student Financial Assistance	76	3,113,381			
5					
6					
7					
Part IV Supplemental Information. Provide				_1	
Schedule I, Part I, Line 2 - Gustavus offers both merit-	********************	********************			
and must be awarded during the Admission process. T				***************************************	
established minimum standards. Need-based scholars as determined by the family's Estimated Family Contril					
Any changes are communicated to the Student Account					
to monitoring of students taking J-Term or semester st	********************		to ensure jurius are	being property disbursed. Also	3 see Scheddle F, Fait V With respect
to morning or stadents taking or form or somester si	adios outsido of the	Jillou Otatos.			
	*******************************			******************************	
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y+++++++++++++++++++++++++++++++++++++	***************************************		***************************************	***************************************	***************************************
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		***************************************	*******************	***************************************	***************************************
		***************************************		***************************************	
***************************************					

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization **GUSTAVUS ADOLPHUS COLLEGE**  Employer identification number

41-0695524

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use	844	TOP IN	A 1500
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	SHA		
	☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)		100	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	M-S	Sign	
	explain	1b	<b>√</b>	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	1	30000
		2110		Mean .
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.			
	✓ Compensation committee	he the		CONT.
	☐ Independent compensation consultant ☐ Compensation survey or study		1)-2	3330
	☐ Form 990 of other organizations ☐ Approval by the board or compensation 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?	4a	1	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	1	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			ings.
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a		1
b	Any related organization?	5b		1
	If "Yes" on line 5a or 5b, describe in Part III.			315
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:		100	3100
а	The organization?	6a		1
b	Any related organization?	6b		1
	If "Yes" on line 6a or 6b, describe in Part III.	THE REAL PROPERTY.	513 6	
_	For a control field on Forms 000 Port VIII Continue A Plan 4- alid the control of the control of		12070	400
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	_		/
_		7	-	ľ
8	Were any amounts reported on Form 990, Part VII, paid or accrued 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			1
	III ( ( ( III ) , , , , , , , , , , , , , , , , ,	8	No.	WHITE I
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	No.	10000	1000
-		1	1	II.

Regulations section 53.4958-6(c)?

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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. (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and other deferred (F) Compensation in column (B) reported (D) Nontaxable (E) Total of columns (I) Base compensation (II) Bonus & Incentive (III) Other reportable henefits  $(\Theta)(i)\!\!-\!\!(D)$ (A) Name and Title compensation as deferred on prior compensation Rebecca M Bergman, President 15,757 316,250 60,087 433,258 41,164 0 (ii) 0 0 0 Mark J Braun, Former Provost (1) 47,522 0 113,005 11,572 43,332 215,431 109,980 and Dean of the College/Faculty (ii) 0 0 0 0 0 0 0 Brenda S Kelly, Provost and M 167,166 0 702 12,312 23,190 203,370 0 3 Dean of the College (11) 0 0 0 0 0 0 0 Thomas J Rooney, CFO, Vice (i) 196,696 0 1,408 104,827 31,914 334,845 0 President for Finance and άň 0 0 0 Jones R VanHecke, Vice (1) 144,926 0 1,464 10,332 9,314 166,036 0 President for Student Life & (ii) 0 0 0 0 Kenneth C Westphal, Former (1) 0 103,763 103,763 103,763 6 Vice President for Finance and 0 0 0 (ii) 0 0 0 0 0 0 0 Thomas W Young, Vice (i) 0 1,656 161,474 12,221 70,552 245,903 0 President for Institutional (ii) 0 0 0 0 0 (i) (ii) (i) an (i) (ii) 10 (i) (ii) \_11 (i) (ii) 12 (i) 13 (H) (i) (ii) 14 (i) (iii) 15 (i) (ii) 16

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017
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.
Schedule J, Part I, Line 1a - As part of the President's contract, she is required to reside in the College-owned residence at the College's expense. The College pays for all maintenance
and operating expenses of the house, including, but not limited to, housekeeping, grounds keeping, general maintenance and all utilities. The President's residence is available for
College-related business and entertainment on a regular and continuing basis. This benefit is excluded from taxable income pursuant to IRC Section 119(a).
S
Schedule J, Part I, Line 3 - The President's compensation is reviewed annually by the executive committee of the Board of Directors in accordance with College's By-Laws using
compensation data from comparable institutions. The results of this review are not currently documented in the executive committee minutes. However, the committee has implemented
new procedures to document this deliberation process and final approval of the President's annual compensation package in fiscal year 2019.
Schedule J, Part I, Line 4 - The President has a supplemental nonqualified retirement plan that has been approved by the Board of Directors. The terms of this plan are set forth in the
written contract of the President that has been signed by the Chair of the Board of Directors.
Schedule J (Form 990) 2017

### SCHEDULE K (Form 990)

### **Supplemental Information on Tax-Exempt Bonds**

► Complete if the organization answered "Yee" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

20**17** Open to Public

Name of the organization Employer identification number **GUSTAVUS ADOLPHUS COLLEGE** 41-0695524 Part I Bond Issues (h) On behalf of (a) Issuer name (b) issuer EIN (c) CUSIP # (d) Date Issued (e) Issue price (f) Description of purpose (g) Defeased Issuer 11,610,060 See Part VI Minnesota Higher Education Facilities 41-0988525 60416HD27 07/30/2013 Yes No Yes No Yes No Authority Minnesota Higher Education Facilities 58,087,076 See Part VI 41-0988525 60416H4Y7 09/07/2017 Authority В Ç D Part II Proceeds В C D Amount of bonds retired . . 11,950,000 3,020,000 Amount of bonds legally defeased 0 Total proceeds of issue . . . . 11,610,060 58,087,076 Gross proceeds in reserve funds 4 0 0 Capitalized interest from proceeds 0 0 Proceeds in refunding escrows . . 6 0 0 Issuance costs from proceeds . 160,060 534,253 8 Credit enhancement from proceeds . 0 0 9 Working capital expenditures from proceeds 0 0 Capital expenditures from proceeds . . 0 20,000,000 Other spent proceeds . . . 11 11,450,000 37,552,823 12 Other unspent proceeds . 0 0 Year of substantial completion . 13 2013 Yes No Yes No Yes No No Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding issue? 15 Has the final allocation of proceeds been made? . . . 16 17 Does the organization maintain adequate books and records to support the Part III Private Business Use В C D Was the organization a partner in a partnership, or a member of an LLC, Yes Yes No Yes No Yes No No which owned property financed by tax-exempt bonds? . . . . . Are there any lease arrangements that may result in private business use of bond-financed property?

Part	Private Business Use (Continued)								rage z				
Fait	Frivate Business Ose (Continued)	-		-	в	-	c T		D				
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	No /	Yes	No /	Yes	No	Yes	No				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?												
С	Are there any research agreements that may result in private business use of bond-financed property?		1		,								
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?												
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		%		%				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %							0 %		%		%
6	Total of lines 4 and 5		0 %		0 %		%		%				
7	Does the bond issue meet the private security or payment test?		<b>√</b>		<b>V</b>								
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		1		1								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%				
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?												
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	<b>√</b>		1									
Part	V Arbitrage					-							
			1		В		С		D				
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No ✓	Yes	No ✓	Yes	No	Yes	No				
2	If "No" to line 1, did the following apply?								***				
a	Rebate not due yet?		1	✓									
	Exception to rebate?	✓			1								
С	No rebate due?	/			1								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed												
3	Is the bond issue a variable rate issue?		1		1								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		√		/								
b	Name of provider												
C	Term of hedge												
d	Was the hedge superintegrated?												
	Was the hedge terminated?												

	-	· ·		3	- (	2		)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? .	1.00	1	1				100	110
b Name of provider			Bayem LB	New York				
c Term of GIC			- Dayoni 25	1.4				
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?			1	- 35-				
6 Were any gross proceeds invested beyond an available temporary period? .		1		1				
7 Has the organization established written procedures to monitor the requirements of section 148?	<b>√</b>		_					
Part V Procedures To Undertake Corrective Action								
	- /	1	E	3	(	)		)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under							1 1	
applicable regulations?	✓		1					
Part VI Supplemental Information. Provide additional information for resp	onses to	auestions	on Schedu	le K. See in	structions			
Schedule K, Part I, Column e-07/30/2013 11,610,060 Minnesota Higher Education Facilities							struct and fur	nish a
new apartment complex, complete the installation of fire sprinkler systems in existing reside				<u> </u>		H-3-1-13-1-3-1		777977.44
Schedule K, Part IV, Line 2c-07/30/2013 11,610,060 Minnesota Higher Education Facilities A	athority - 11	ne rebate c	alculation was	репогтед о	n October 9	, 2017.		
			_					
			=					

# **SCHEDULE L**

### **Transactions With Interested Persons**

OMB No. 1545-0047

Internal Revenue Service Name of the organization

(Form 990 or 990-EZ)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

**GUSTAVUS ADOLPHUS COLLEGE** 

Employer identification number

41-0695524

Par	Excess Benefit Transact Complete if the organizati	tions (section 501(c)(3), section 501(c)(4), and on answered "Yes" on Form 990, Part IV, line	501(c)(29) organizations only). ≥ 25a or 25b, or Form 990-EZ, Part V,	line 40b.	
4	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Con	rected?
'	(a) Name of disqualified person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)		4			
(6)					
2		red by the organization managers or disqu			
3	Enter the amount of tax, if any,	on line 2, above, reimbursed by the organiza	ition ▶ \$		

#### Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(b) Relationship with organization	loan	from	n to or the zation?	(e) Original principal amount	(f) Balance due	(g) in default		by bo	board or agree		by board or agree		ritten ment?
		То	From			Yes	No	Yes	No	Yes	No		
			organi: To	organization?  To From	organization?  To From	organization?  To From	organization? To From Yes	organization? To From Yes No	organization? To From Yes No Yes	organization? To From Yes No Yes No  Organization?  To From  Organization?  Organization.  Organ	organization? To From Yes No Yes No Yes  I I I I I I I I I I I I I I I I I I I		

#### Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27,

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) 2 Dependents	2 Officers	49,215	Tuition Exchange	Tuition Benefit
(2) 2 Dependents	2 Directors	46,160	Merit Scholarship	Student Financial Assistance
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Schedule L (Form 990 or 990-EZ) 2017 Page 2 Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (c) Amount of (b) Relationship between (d) Description of transaction (e) Sharing of interested person and the transaction organization's organization revenues? Yes No (1) Kristianne R Westphal Westphal Spouse 89,042 Salary and Benefits Russell V Michaletz Michaletz Spouse 55,234 Salary and Benefits (3)Catherine Asta and Richard Black Asta Spouse 95,837 Apartment Rental Fiscal Agent (4) Substantial Contributor Substantial Contributor 359,966 Video Services for Events (5)(6)(7) (8)(9)(10)Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions). Schedule L, Part IV - Line 3: The College has a property management agreement with a current member of the Board of Directors and her husband. Under this agreement, the College rents apartment units to current students. The College serves as fiscal agent on the property and is responsible for all maintenance, repairs and capital improvements. The remaining balance at the end of each fiscal year is paid to the College as a management fee. During the year ended May 31, 2018, the College billed students \$458,258 and paid expenses of \$362,421, resulting in a management fee of \$95,837. The agreement is in full force until May 31, 2018, and shall continue thereafter on successive five year terms, through May 31, 2032 unless sooner terminated by the College or the owner.

### SCHEDULE M (Form 990)

## **Noncash Contributions**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**GUSTAVUS ADOLPHUS COLLEGE** 

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number 41-0695524

Part	Types of Property	<i>p</i>	W					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property				in error	The series		
9	Securities-Publicly traded .	<b>√</b>	51	1,536,037	Average Hig	h/Low		
10	Securities—Closely held stock .							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution—Historic structures							
4.4	Qualified conservation							
14	contribution—Other							
15	Real estate - Residential	<b>✓</b>	1	37,500	Qualified In			
16	Real estate - Commercial	<b>✓</b>	2	337,661	Qualified In	depend	ient A	pprai
17	Real estate—Other							
18	Collectibles							
19	Food inventory						_	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts		1	220,000	Qualified In	donon	tont A	nnrai
25	Other ► ( 8 Rank Pipe Organ ) Other ► ( Research Equipmen)		1	257,916	Fair Market		JGHL /	hprai
26 27	Other ( Auction Items )		457	76,237	Donated Va			
28	Other ► ( Addidn items )		407	10,201	Bonatou vo			
29	Number of Forms 8283 received	by the or	ganization during the tax	year for contributions for				
	which the organization completed	Form 828	3, Part IV, Donee Acknowle	dgement	29			7
							Yes	
30a	During the year, did the organiza	tion receive	by contribution any prop	erty reported in Part I, line:	s 1 through	1000	33.00	TO CO
	28, that it must hold for at least t	hree years	from the date of the initial	contribution, and which is	n't required	8.70		12.003
	to be used for exempt purposes	for the enti	re holding period?			30a		1
b	If "Yes," describe the arrangemen					STE III	(Jegg	
31	Does the organization have a	gift acce	ptance policy that requir	es the review of any n	onstandard	ALC:		
	contributions?					31	<b>√</b>	
32a	Does the organization hire or us							
	contributions?					32a	1	
b	If "Yes," describe in Part II.					-182	SIT OF	9.88
33	If the organization didn't report ar describe in Part II.	n amount in	column (c) for a type of pro	operty for which column (a)	is checked,	10.7		

Part II	the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Schedule N	, Part I, Line 1 - It is the College's policy to aggregate multiple gifts occurring on the same day as one contribution.
Schedule N	, Part I, Line 32b - The College uses several brokers to sell publically traded securities that are gifted to the College.
**********	
******	
**********	
***********	
*************	

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
GUSTAVUS ADOLPHUS COLLEGE

Employer identification number 41-0695524

Form 990, Part III, Line 4a - With the exception of auxiliary services revenue reported on Line 4c, all grants expense and program revenue receipts have been included on 4a since students are billed a comprehensive fee and an allocation by program service achievement area is not practical.

Form 990, Part VI, Section A, Line 1a - The executive committee shall consist of the Chair; each Vice Chair; the President; the Secretary, if the Secretary is a director; the immediate past Chair for one year after leaving office, if the immediate past Chair continues to be a director; the President of the Gustavus Adolphus College Association of Congregations; and up to four and not fewer than two additional directors elected at the annual meeting for one-year terms. The Secretary, even if not a member, shall attend executive committee meetings in order to take minutes, unless the committee determines that the matters under consideration would render such attendance inappropriate. The executive committee shall undertake any duties assigned to it by the Board; assists the Chair and the President with their shared responsibility for effective Board operations by, among other things, participating in the preparation of Board-meeting agendas; and take any action for the Board that the executive committee determines must be taken before the Board meets again, endeavoring always to preserve for the Board the fullest possible flexibility for addressing the matter at its next meeting. The committee shall have the authority to act for the Board on all matters except for the following, which are reserved for the Board; presidential selection and termination; director and Board officer elections, changes in institutional mission and purpose and changes to the Articles of Incorporation or the Bylaws. The executive committee shall provide to all directors prior to each Board meeting minutes of all executive committee meetings that have taken place since the previous Board meeting, and such minutes disclose all action as taken by the executive committee.

Form 990, Part VI, Section A, Line 1b - Two directors have dependents at the College who receive financial aid. One director has a spouse who is employed by the College, one director is employed by the College and one director has a reportable business relationship with the College. See Schedule L for disclosures.

Form 990, Part VI, Section A, Line 2 - Directors Marcia Page and George Hicks - Business Relationship, Directors Marcia Page and Edward Drenttel - Business Relationship.

Form 990, Part VI, Section A, Line 7a - The Board of Directors membership is established as follows: Board Composition - The Board of Directors shall consist of no fewer than twenty-eight and no more than thirty-four directors. All directors shall have equal voting rights. Ex Officio Directors - So long as they hold office, the President of the College, the Bishop of the Southwestern Minnesota Synod of the ELCA, and the President of the Gustavus Adolphus College Association of Congregations (the "Association") shall be directors. Alumni Association Directors - The Board of Directors of the Gustavus Adolphus College Alumni Association, acting in consultation with the Board, shall be entitled to appoint two Alumni Association directors, each of whom may serve as an Alumni Association director for up to four consecutive years. ELCA Director - The ELCA may designate as a director a member of the churchwide staff with responsibility for higher education. Elected Directors - Elected directors of the Board shall be elected by the Association at its annual meeting. The Board shall serve as the nominating committee to the Association for the selection of candidates to serve as elected directors of the Board. The composition of the elected directors of the Board shall be no fewer than twenty-four (24) and no more than twenty-eight (28) directors. At least twelve (12) elected directors, the exact number to be determined by the Board, shall be at-large directors nominated by the Board and elected by the Association without contest. At least twelve (12) but no fewer than half of the elected directors must be members of congregations that are members of the Association, and at least four of these must be rostered ELCA clergy. Term - Elected directors shall serve three-year terms. beginning with the call to order of the Board's annual meeting and ending with the call to order of the Board's annual meeting three years later. To the extent possible, the Board should stagger elections so that the terms of approximately one-third of elected directors expire each year. Nomination - Before the Association's annual meeting each year, the Board of Directors shall nominate a slate of candidates for election

Form 990, Part VI, Section B, Line 11b - Federal Form 990 (the 990) was prepared by the Director of Tax and reviewed by the Controller and CFO, Vice President for Finance and Treasurer. On February 6, 2019, a draft of the 990 was distributed to the Board of Directors.

Inquiries from the Directors were communicated to the Audit Committee chair and discussed at the Audit Committee meeting. In addition, a summary of all disclosures from the annual representation letters (Directors) and the questionnaires (Directors, officers and highly compensated employees) was presented to the Audit Committee for their review. On February 13, 2019, the Audit Committee of the Board of Directors reviewed and accepted the draft 990 for filing with the IRS.

Form 990, Part VI, Section B, Line 12c - The College has a written conflict of interest policy that pertains to its employees. This policy is one of several "All College Policies" that are published on the College's website. The conflict of interest policy is designed to help officers and

# Supplemental Information (Continued)

employees of the College identify situations that present potential conflicts of interest, along with following written procedures in the event that there is a conflict of interest. The policy is intended to comply with the procedure prescribed in Minnesota Statutes, Section 317A.255, and governing conflicts of interest to nonprofit corporations. The President and the CFO, Vice President for Finance and Treasurer monitor
and enforce the College's conflict of interest policy relating to its employees. In addition, a questionnaire is completed by all officers and key
employees on an annual basis that documents any activity that could give rise to conflicts of interest. These guestionnaires are reviewed by the President and the CFO, Vice President for Finance and Treasurer. The College has a separate written conflict of interest policy that
pertains to all members of the Board of Directors. The policy discloses the importance of exercising integrity and objectivity in making decisions. It further provides disclosure requirements and procedures for abstaining and documentation of meeting minutes when there is a conflict of interest. At the beginning of May 2017, the Chair of the Board of Directors requested that the President's Office distribute this policy to all Directors, along with an annual representation letter, indicating that the director has read, understands and discloses whether or
not there are any circumstances leading to a conflict of interest. At the June 23, 2017 Board of Directors meeting, the Chair of the Board of Directors requested that all Directors read the conflict of interest policy, determine if they had any questions, and complete the annual representation letter on a timely basis. From a governance perspective, the Directorship Committee of the Board of Directors is specifically
charged with overseeing compliance with this policy (page two of the Directorship Committee Charter). Chairs of individual committees are
charged with following the procedures for voting when there is a conflict of interest, along with documentation of those procedures in the meeting minutes. All Directors complete the questionnaire described above in the first paragraph and return them to the CFO, Vice President for Finance and Treasurer.
Form 990, Part VI, Section B, Line 15 - The President's compensation is reviewed annually by the executive committee of the Board of
Directors in accordance with College's By-Laws using compensation data from comparable institutions. The results of this review are not currently documented in the executive committee minutes. However, the committee has implemented new procedures to document this
deliberation process and final approval of the President's compensation package in fiscal year 2019. The President reviews compensation
surveys and the compensation of all vice presidents on an annual basis in accordance with the College's By-Laws. The President approves and signs all vice president contracts. The compensation of all interested persons on Schedule L, Part IV is reviewed by independent persons.
Form 990, Part VI, Section C, Line 19 - The audited financial statements of the College for the year ended May 31, 2018 are found on the College's website. The following documents are available for public inspection in the President's Office, located in the Carlson
Administration Building on the campus in St. Peter, MN: Articles of Incorporation, Bylaws and Conflict of Interest Policy.
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)
Form 990, Part XI, Line 9 - Adjustment of Actuarial Liability \$97,471 and Loss on Debt Refinancing \$(1,139,337)

Schedule O, Statement 1

**GUSTAVUS ADOLPHUS COLLEGE** 

EIN: 41-0695524

Form: Form 990 (2017)

Page: 1

**Activity Or Mission Description** 

Part I, Line 1

### Description

faith. It is especially known for strong science, writing, music, athletics, and study abroad programs. The College hosts a chapter of Phi Beta Kappa and is internationally recognized for its annual Nobel Conference sanctioned by The Nobel Foundation in Stockholm, Sweden. The students, faculty, administration, staff and Board of Directors believe in a strong, open community where all citizens play a vital role. Gustavus has consistently produced graduates who lead lives of uncommon purpose and passion, and demonstrate that they make their lives count.

Schedule O, Statement 2

**GUSTAVUS ADOLPHUS COLLEGE** 

Form: Form 990 (2017)

EIN: 41-0695524

Page: 2

Part III, Line 1

### **Mission Description**

### Description

backgrounds who respect and affirm the dignity of all people. It is a community where a mature understanding of the Christian faith and lives of service are nurtured and students are encouraged to work toward a just and peaceful world. The purpose of a Gustavus education is to help students attain their full potential as persons, to develop in them a capacity and passion for lifelong learning, and to prepare them for fulfilling lives of leadership and service in society.

Schedule O, Statement 3

**GUSTAVUS ADOLPHUS COLLEGE** 

EIN: 41-0695524

Form: Form 990 (2017)

Page: 2

Other Program Services Accomplishments

Part III, Line 4d

Activity Code	Description	Expense	Grants	Revenue
-	Gustavus offers a number of activities that enhance the curricular program, including various public service events and miscellaneous services provided to students.	4,438,655	0	0
Total:		4,438,655	0	0

### **SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

### **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.lrs.gov/Form990 for instructions and the latest information.

Name of the organization GUSTAVUS ADOLPHUS COLLEGE

2017 Open to Public Inspection

OMB No. 1545-0047

41-0695524

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Tennis and Life Camps LLC 800 West College Avenue, Saint Peter, MN 56082	Summer Camp	MN	952,616	747,197	N/A
(2)					
(3)					
(4)					
(5)					
(6)					
Identification of Related Tax-Exempt Organizations. Co	omplete if the organization	answered "Yes"	on Form 990, Pa	rt IV, line 34, be	cause it had

one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti	g) 512(b)(13) rolled lity?
S						Yes	No
(1) Greater Gustavus Fund (41-6038632) 800 West College Avenue, Saint Peter, MN 56082	Fundraising	MN	501(c)(3)	11, 1	N/A	1	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2017

Part III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered	"Yes" on Form 990, Part IV, line 34
R-JEAILI	because it had one or more related organizations treated as a partnership during the tax year.	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income (related, unrelated, excluded from tax under sections 512—514)	(f) Share of total Income	(g) Share of end-of- year assets	Disprop	h) ortionate tions?	(i) Code V—UBI amount In box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)										П		
(4)												
(5)												
(6)												
(7)												

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership	contr	(i) 512(b)(13) rolled ity?
								Yes	No
(1) Beneficial Interest in Funds Held In Trust (20) Names and EINs Withheld, Saint Peter, MN 56082	Investment	MN	N/A	Т	58,656	4,450,248	100%		<b>√</b>
(2) Charitable Remainder Annuity Trust (1) Name and EIN Withheld, Saint Peter, MN 56082	Investment	MN	N/A	Т					<b>✓</b>
(3) Charitable Remainder Unitrusts (29) Names and EINs Withheld, Saint Peter, MN 56082	Investment	MN	N/A	Т					V
(4) Pooled Life Income Fund 800 West College Avenue, Saint Peter, MN 56082	Investment	MN	N/A	Т					1
(5)									
(6)									
(7)									

Schedule R (Form 990) 2017

Part '	Transactions With Related Organizations. Complete if the organization ans	wei	red	"Ye	es"	on I	orr	n 9	90,	Par	t IV,	line	34	, 35	b,	or 3	6.			
	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.																		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with on	10 OI	mo	re r	elat	ed o	orga	niza	tion	s lis	ted	in Pa	arts	II–IV	17			1000	500	(10)
а	Receipt of (I) Interest, (II) annuities, (III) royalties, or (Iv) rent from a controlled entity															000 ×		1a		1
b	Gift, grant, or capital contribution to related organization(s)																14	1b		<b>√</b>
C	Gift, grant, or capital contribution from related organization(s)														- 6			1c		<b>√</b>
d	Loans or loan guarantees to or for related organization(s)														. :	30 ×		1d		1
е	Loans or loan guarantees by related organization(s)															(a) (a)	12	1e		<b>√</b>
																		103	\$31.	W.41
f	Dividends from related organization(s)	:: :	11	13				85	BS 1	1 05	1.0	20.05	100		90	(e) 8	*	1f		✓_
g	Sale of assets to related organization(s)	ět s	19	$e^{\frac{1}{2}}$	•	6 ×	: 0	100	F	ē 9	100	90-19	(0)	8	(a) - j	w 2	- 60	1g		✓
h	Purchase of assets from related organization(s)	20 3	14	4	8	4	3 8	12	•			9 9				• •		1h		1
i	Exchange of assets with related organization(s)			50			- 2	85		5 85		80.05	- 30		(6)	· .		1i		1
J	Lease of facilities, equipment, or other assets to related organization(s)		- 19	•	•	6 1	: 3	(i. )	•	6 3		\$0.00	(4)	8	(k. )	W3 - 8	88	1j	1	
																			Bul	
k	Lease of facilities, equipment, or other assets from related organization(s)			*	*		2 8	13	<b>B</b> 3 3	1 75	100	80.08	- 690	8	15. 1	* ×		1k	1	
I	Performance of services or membership or fundraising solicitations for related organization(	s) .	- 64	63		× 1	: 3	29	8	5 9		90 79	(4)	- 20	(k.)	(e) (	9	11		1
m	Performance of services or membership or fundraising solicitations by related organization(	s) .	74	41		4	*	12	3	9		Ø (8	10			•		1m		✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).	. 2	100	40	2		2.2	35	5.3	1 31	190	20.03	100	*	4	(e) ×		1n		✓
0	Sharing of paid employees with related organization(s)		164		•	9 4	: 10	100		9 9	8	90.79	100	8	(2 )	we v		10		✓
																		100	100	
р	Relmbursement paid to related organization(s) for expenses	9 9		*1			8 12	35	E -	100	199	er 18	99		œ 1	(e) 8		1p		1
q	Reimbursement paid by related organization(s) for expenses	6 9	- 64	$\widetilde{\mathbf{e}}_{i}$	•	9 4	: 10	99	6	5 5		90.79	- 30	9	(2 )	(v): v	- 62	1q		✓
																			2500	13000
r	Other transfer of cash or property to related organization(s)	20.00	102	10	(*)			3.*	E I	5 35	.00	(e) 19	(-10*)			os x		1r		1
S	Other transfer of cash or property from related organization(s)	e: e	100	60	*	× 4	: 9	2.0	No.	e ox	182	× 3		98	90		1.0	1s		1
2	If the answer to any of the above is "Yes," see the Instructions for information on who must	cor	nple	ete t	his	line,	incl	udi	ng c	ove	red i	relati	ons	hips	an	d tra	ınsac	tion thr	eshol	ds.
	(a)				(b)						c)						-{(	d) Ing amou		
	Name of related organization			Tran	isaci e (a-			1	Am	ount	Invol	ved		Me	thod	of de	termin	Ing amou	nt invo	ved
		4.		(J/D	o (a-	٥,		_			_	-								
	oled Life Income Fund	k									1	71,3	76	Casi	h Pa	aid				
(1)		4						1					_							
(2)		+	_					_					4							
7222								1												
(3)		-	_	_				1			_		-	_						
(FPSE)																				
(4)		-			_	_	_	1					4							
res.																				
(5)		+		_				1	_	_		_	-		_		_			_
101																				
(6)				_		_		1_		_		_		_	_	_				
																Sch	edule	R (For	m 990	2017

# 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

(a) Name, address, and EIN of entity	(b) Primary activity	e instructions r (c) Legal domicile (state or foreign country)	(d) Predominant	(e) Are all partners section 501(c)(3)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
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12)													
13)													
14)													
15)													
16)													

Schedule R (Form 990) 2017

Schedule R (F	Form 990) 2017	Page <b>5</b>
Part VII	Supplemental Information.  Provide additional information for responses to questions on Schedule R. See instructions.	
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