DLN: 93493195022260 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form **990** 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the

Open to Public

reasur nternal		iue Service		ror modractions an					Inspection
\ Fc	or the	<b>2019</b> c	alendar year, or tax year begin	ning 07-01-2018 , and ending	g 06-30-2	2019			
Che	ck ıf ap	plicable	C Name of organization				D Employ	er identi	fication number
		-	Wileaton College				36-218	2171	
		-	Doing business as						
□ Am	ended	return		all is not delivered to street address) R	Room/suite		E Telephoi	ne numbei	•
□ App	olicatio	n pending					(630) 7	752-5970	1
				try, and ZIP or foreign postal code					
			,				<b>G</b> Gross re	eceipts \$ 3	43,152,828
				officer	יו	H(a) Is this	a group re	turn for	
			501 College Ávenue		١.			tes	☐Yes ☑No
т								ies	☐ Yes ☐No
Id>	(-exem	ipt status	<b>✓</b> 501(c)(3) <b></b>	nsert no )					•
W	ebsite	e: Nw	w wheaton edu			H(c) Group	exemption	number	<b>▶</b> 2691
					<del>-  </del> -	Year of format	uon 1860	M State	of legal domicile IL
Form	n of org	ganization	✓ Corporation ☐ Trust ☐ Associ	ciation LJ Other >	-	rear or forma	1000	I State	or legal dofficie 12
Pa	ırt I	Sumi	marv						
		riefly des	scribe the organization's mission or						
				2 2	llence ın lı	iberal arts ar	nd graduat	e progra	ms that educate the
2		niole pers	son to build the church and benefit	society worldwide					
110	_								
124	_						_		
5							of its net a		18
<b>5</b> ∧			•	• • • • • •					17
Acumues a governance			, -		,				3,205
, (1,		Meason College			6				
ť			Clame of organization    Clame of organization   Wheeter College   Doing Inscrience at	-730,150					
				* **				7b	, ,
				·		1	r Year		Current Year
۵.	8 (	Contribut	cons and grants (Part VIII, line 1h)				35,492,	859	41,339,470
Rəvenue		Number of voting members of the governing body (Part VI, line 1a)			123,373,31				
ōΛċ							33,144,	943	47,046,60
<u> </u>	11 (	Other rev	venue (Part VIII, column (A), lines 5	5, 6d, 8c, 9c, 10c, and 11e)			1,480,	558	1,134,94
	12	Total reve	enue—add lines 8 through 11 (mus	st equal Part VIII, column (A), line	12)		190,097,	750	212,894,34
	13 (	Grants ar	nd sımılar amounts paid (Part IX, co	olumn (A), lines 1–3 )			32,615,	934	34,851,439
	14	Benefits p	oald to or for members (Part IX, co	lumn (A), line 4)					(
æ	15	Salaries,	other compensation, employee be	nefits (Part IX, column (A), lines 5	5-10)		76,925,	421	77,893,81
พร	16a	Professio	nal fundraising fees (Part IX, colun	nn (A), line 11e)					(
Expenses	b∃	Total fundr	raising expenses (Part IX, column (D), li	ne 25) ▶3,988,851					
Ξi	17 (	Other exp	penses (Part IX, column (A), lines 1	.1a-11d, 11f-24e)			45,577,	577	47,567,39
	18	Total exp	enses Add lines 13–17 (must equ	al Part IX, column (A), line 25)			155,118,	932	160,312,65
	19	Revenue	less expenses Subtract line 18 fro	m line 12			34,978,	818	52,581,68
Fund Balances						Beginning o	of Current \	/ear	End of Year
alar	20 -	Total asse	ets (Part X June 16)				903 412	441	930,846,49
d B					•				164,766,99
Fun					•				766,079,50
Pa				1 HOM INIC 20 1 1 1 1 1			, 32,330,	303	, 60,013,30
Inder	pena	lties of p	erjury, I declare that I have examı						
			f, it is true, correct, and complete	Declaration of preparer (other th	an officer	) is based or	all inform	ation of	which preparer has
117 181	101110	ı.							
		******	*				-07-13		
ign		Signati	are of officer			Date			
lere	:			ions					
		17		I Duran annula ar britis	15:			DTIN	
\-:			riny rype preparer's name	Preparer's signature	Date	Chec	k ∐ ıf		5
Paic		<u> </u>	ırm's name ► CROWF II P	1				-0921680	
-		". L							
ıse	Uni	<b>'Y</b>   F	ırm's address ► 225 West Wacker Drıve	Suite 2600		Phor	ie no (312)	899-7000	
			Chicago, IL 606061224	<b>I</b>					
lav ti	he IRS	S discuss	this return with the preparer show	n above? (see instructions) -				<b>.</b>	Yes 🗆 No

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Pa	rt III Statement	of Program Service	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III .		🗹
1	Briefly describe the o	organization's mission				
		sus Christ and advance and benefit society woi		nrough excellence in libe	ral arts and graduate program	ns that educate the whole
2	-	, ,		vices during the year wh	ich were not listed on	
	'	r 990-EZ?				🗌 Yes 🗹 No
	•	ese new services on Sc				
3	Did the organization	cease conducting, or n	nake significant o	changes in how it conduc	cts, any program	
	services?					. 🗆 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedu	le O			
4	Section 501(c)(3) an		ons are required	to report the amount of	argest program services, as m grants and allocations to othe	
4a	(Code	) (Expenses \$	95,394,933	ıncludıng grants of \$	34,364,249 ) (Revenue \$	95,706,914 )
	See Additional Data					
4b	(Code	) (Expenses \$	28,490,000	including grants of \$	0 ) (Revenue \$	212,136 )
	See Additional Data					
4c	See Additional Data (Code	) (Expenses \$	7,526,000	ıncludıng grants of \$	0 ) (Revenue \$	20,751,716 )
4c		) (Expenses \$	7,526,000	including grants of \$	0 ) (Revenue \$	20,751,716 )
4c	(Code	) (Expenses \$ ) (Expenses \$	7,526,000 5,554,000	including grants of \$ including grants of \$	0 ) (Revenue \$ 487,190 ) (Revenue \$	20,751,716 ) 7,772,646 )
4c	(Code See Additional Data  (Code ARTIST SERIES, THE COFEES, PARKING FINES, ADVISED FUNDS DONO DONOR TO RECOMMENIE WITH THE DONOR'S RECOMMENTED FUNDS RECOMME	) (Expenses \$  DMMUNITY SCHOOL OF TH PARKING PERMITS AND LI DR-ADVISED FUND CONTR: D DISTRIBUTIONS TO COL COMMENDATION, THEY AR	5,554,000 E ARTS AND SUMM BRARY FINES THE IBUTIONS RECEIVE LEGE PROGRAMS C RE SUBJECT TO APP	including grants of \$ ER SPORTS CAMPS MINOR COLLEGE SOLICITS A VARII D ARE ACCOUNTED FOR AS OR OTHER CHARITABLE ORG	487,190 ) (Revenue \$ PROGRAMS, APPLICATION FEES, T ETY OF CONTRIBUTIONS FOR ITS & OTHER INVESTMENTS DONOR-AE ANIZATIONS ALTHOUGH THE COL CHARITY SELECTION COMMITTEE	7,772,646 ) TUITION INSTALLMENT PLAN PROGRAMS INCLUDING DONOR- DVISED FUNDS ALLOW FOR THE LEGE GENERALLY COMPLIES
4c	(Code See Additional Data  (Code ARTIST SERIES, THE COFEES, PARKING FINES, ADVISED FUNDS DONC DONOR TO RECOMMENT WITH THE DONOR'S RECOISTRIBUTE A MAXIMUIT	) (Expenses \$  DMMUNITY SCHOOL OF TH PARKING PERMITS AND LI DR-ADVISED FUND CONTR: D DISTRIBUTIONS TO COL COMMENDATION, THEY AR	5,554,000 E ARTS AND SUMM BRARY FINES THE IBUTIONS RECEIVE LEGE PROGRAMS C RE SUBJECT TO APP OR-ADVISED FUND	INCLUDING GRANTS OF \$ ER SPORTS CAMPS MINOR COLLEGE SOLICITS A VARII ED ARE ACCOUNTED FOR AS OR OTHER CHARITABLE ORG PROVAL BY THE COLLEGE'S OF	487,190 ) (Revenue \$ PROGRAMS, APPLICATION FEES, T ETY OF CONTRIBUTIONS FOR ITS & OTHER INVESTMENTS DONOR-AE ANIZATIONS ALTHOUGH THE COL CHARITY SELECTION COMMITTEE	7,772,646 ) TUITION INSTALLMENT PLAN PROGRAMS INCLUDING DONOR- DVISED FUNDS ALLOW FOR THE LEGE GENERALLY COMPLIES
	(Code See Additional Data  (Code ARTIST SERIES, THE COFEES, PARKING FINES, ADVISED FUNDS DONC DONOR TO RECOMMENT WITH THE DONOR'S RECOISTRIBUTE A MAXIMUIT	) (Expenses \$ DMMUNITY SCHOOL OF TH PARKING PERMITS AND LI DR-ADVISED FUND CONTR D DISTRIBUTIONS TO COL COMMENDATION, THEY AR M OF 75% - 90% OF DONG	5,554,000 E ARTS AND SUMM BRARY FINES THE IBUTIONS RECEIVE LEGE PROGRAMS C RE SUBJECT TO APP OR-ADVISED FUND	INCLUDING GRANTS OF S ER SPORTS CAMPS MINOR COLLEGE SOLICITS A VARI ED ARE ACCOUNTED FOR AS OR OTHER CHARITABLE ORG ROVAL BY THE COLLEGE'S C CONTRIBUTIONS TO UNREL	487,190 ) (Revenue \$ PROGRAMS, APPLICATION FEES, T ETY OF CONTRIBUTIONS FOR ITS I OTHER INVESTMENTS DONOR-AD ANIZATIONS ALTHOUGH THE COL CHARITY SELECTION COMMITTEE ATED THIRD PARTIES	7,772,646 ) TUITION INSTALLMENT PLAN PROGRAMS INCLUDING DONOR- DVISED FUNDS ALLOW FOR THE LEGE GENERALLY COMPLIES

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

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

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

4,246

**1**c

Yes

If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

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

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

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

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

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

d If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

7b

7c

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

7d |

10a

10b

11a

11b

12b

13b

13c

Yes

Yes

No

No

No

Nο

Nο

No

No

Form **990** (2018)

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines
Se	ction A. Governing Body and Management		<b>W</b> = -	
1a	Enter the number of voting members of the governing body at the end of the tax year 18		Yes	No_
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No 
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	: Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		No
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		-103	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
	conflicts?	12b	Yes	
·	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			_
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► CA , CO , AK , MI , SC , WA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s			
-0	only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (	Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), ( if the organization's <b>current</b> key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five <b>current</b> high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's <b>former</b> office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's <b>former dir</b> , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

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

(A) (B) (C) (D) (F) (F)

Page 8

Pa	Section A. Officers, Direc	itors, musices	s, key	ЕШР	loye	<i>:es,</i>	, allu	nigi	lest co	inpens	ate	u cilipioyees	COIL	nueu)	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than o	one b	οα, ι an of	ot che unle: fficer	neck meess pers er and a tee)	rson	Rep comp fro organi	(D) cortable pensation om the ization (V	w-	(E) Reportable compensation from related organizations (	w-	Estima Estima amount o compen from	ated of other isation the
		for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/105	99-MISC	.)	2/1099-MISC	:)	organizat relat organiz	ted
			3694 	rustee			ensated								
See	Additional Data Table			上				上							
			<u> </u>	$\perp$	$\perp$	igspace		$\perp$							
			↓	╀	igspace	igspace		$\perp$							
			<u> </u>	$\perp$	igspace	$\vdash$	<del> </del>	$\downarrow$	<u> </u>				_		
			<del>                                     </del>	+	igapha	$\vdash$	_	$\perp$	<del>                                     </del>						
			├─	+	$\vdash$	$\vdash$	<del> </del>	$\vdash$					_		
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		+	<del> </del>	+	+	$\vdash$	+	+	-				+		
		+	<del> </del>	+	+	$\vdash$	_	+					-		
1b !	Sub-Total		<u> </u>	Ļ.		<u>_</u>	<u> </u>						$\top$		
<b>c</b> 1	Total from continuation sheets to P	Part VII <b>, Section</b>	Α.				•			C 47 806			0		242.100
2	Total (add lines 1b and 1c)  Total number of individuals (including of reportable compensation from the	g but not limited	d to thos				re) who	o rec		0,647,896 ore than		00,000	<u> </u>		842,188
														Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> .	J for such individ	dual .	•	•	•		•				• •	3		No
4	For any individual listed on line 1a, is organization and related organization individual											the	4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization	ive or accrue cor n?If "Yes," comp	mpensa lete Sch	tion f hedule	rom e J f	any or si	unreli uch pe	ated rson	organiza	ation or	ındı\ •	vidual for	5		No
	ection B. Independent Contract			<u> </u>	_	_						,			
1	Complete this table for your five high from the organization Report compe	ensation for the c										's tax year	mpens		
		(A) and business addre	ess									(B) iption of services		(C Comper	nsation
	APPETIT									FOOD S	ERVI	CE		5	5,753,393
WHEA	CHASE STREET ATON, IL 60187  ORTENSON CO									CONSTE	UCT	TON CERVICES			. 417 042
	ORTHWEST POINT BLVD									CONSIN	(001)	ION SERVICES		4	2,417,042
STE 1	100 GROVE VILLAGE, IL 60007														
	MECHANICAL CORPORATION			_		_		_		PLUMBII	NG, H	HVAC			516,071
FRAN	PS BELMONT AVE WKLIN PARK, IL 60131														:== 626
	MORE & ASSOCIATES CONSTRUCTION WEST FRONT STREET									CONSTR		L & COMMERCIAL ION			472,626
WHEA	ATON, IL 60187 ARCHITECTS INC									ARCHITI	FCTS				289,243
1211 SUITE	. WEST 22ND STREET E 705									AINGIT.	EC.		ĺ		200,2.
	BROOK, IL 60523 Total number of independent contracto	ors (including bu	t not lim	nited	to th		listed	abo	ve) who	received	d mo	re than \$100.00	00 of		

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

compensation from the organization ▶ 15

													Page <b>9</b>
Part	VIII						D 12/11						
		Check if Schedul	e O contains a	respo	onse or note to any	(,	A) revenue	Rel ex fui	(B) ated or cempt nction	U	(C) Inrelated ousiness revenue	ex tax u	(D) Revenue cluded from inder sections
	18	Federated campaigi	ns	1a				re	venue				512 - 514
nts ints	١,	<b>b</b> Membership dues		1b									
Gra not	١,	c Fundraising events		1c									
Is, I	١,	d Related organizatio	ns	1d	525,000								
<u> </u>	١,	e Government grants (co	ı ontrıbutıons)	1e	583,403								
tions, er Sim	1	All other contributions, and similar amounts no above		1f	40,231,073								
ntribu d Othe	,	g Noncash contribution in lines 1a - 1f \$	ons included	6,0	062,960								
ವಿ ಕ		<b>h Total.</b> Add lines 1a-	-1f	•	•	4	41,339,476						
٦.					Business	Code							
<u> </u>	2a	Tuition & Fees				611600		36,120	94,636				
<u>خ</u>	b	Auxiliary Revenue				611600		51,716	20,751				
3	c	Public Service Revenues	5			541800	•	38,451	3,237		6	99	
ž	d	Minor Program Revenue	·s			611600	·	34,894		1,894			
8	е	Student Insurance				900099	2	12,136	212	2,136			
ogra	f	All other program se	rvice revenue					0		0		0	0
Ĕ	g	<b>Total.</b> Add lines 2a–2	2f		<u> </u>	373,317		T					
		Investment income (ii similar amounts)  .		ends, i	interest, and other		10,500,071	.			-750,827		11,250,898
	4	Income from investme	ent of tax-exe	mpt b	ond proceeds 🕨								
Other Revenue Program Service Revenue and Other Similar Amounts	5	Royalties			•		4,028	3					4,028
	_	C	(ı) Real		(II) Personal	-							
		Gross rents  Less rental expenses		40,146 0									
						_							
		Rental income or (loss)		40,146	C		40.146						10.116
	C	Net rental income of			(II) Other	1	40,146	) 					40,146
	7a	7a Gross amount from sales of assets other than inventory (i) Securities (ii) 165,594,649				3							
	b	Less cost or other basis and	129,0	56,875	C	- )							
	c	sales expenses Gain or (loss)	36,5	37,774	8,758	3							
	d	Net gain or (loss)			<b>•</b>	1	36,546,532	<u>.</u>					36,546,532
nue	8a	Gross income from for (not including \$ contributions reporte		ents of									
क		See Part IV, line 18		а		_							
ď		Less direct expenses		b									
He I		: Net income or (loss) : Gross income from g		_	ents •	1							
Ò		See Part IV, line 19			ļ								
	L			a		-							
		Less direct expense: : Net income or (loss)		<b>b</b> activit	les	J							
		Gross sales of invent				1							
		returns and allowand			4 624 200								
	L	Less cost of goods s	ald	a b		-							
		Net income or (loss)		_		J	422,687	,	422,687				
	_	Miscellaneous		ilivelli	Business Code		•		-				
	11	aTrust Company Fees	s		561000	5	668,085	5	648,107		19,978		
	b	,											
	c	:											
	_	All other revenue .					ſ		0		0		0
	_	• <b>Total.</b> Add lines 11a			▶	1		1					
		: <b>Total revenue.</b> See					668,085						
				•	- · •		212,894,342	2	124,443,412		-730,150		47,841,604 m <b>990</b> (2018)

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comm	olete column (A)	
Check if Schedule O contains a response or note to any	-			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	487,190	487,190		
2 Grants and other assistance to domestic individuals See Part IV, line 22	34,364,249	34,364,249		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
<b>4</b> Benefits paid to or for members				_
5 Compensation of current officers, directors, trustees, and key employees	3,108,644	812,508	1,915,802	380,334
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	296,670	100,131	196,539	
<b>7</b> Other salaries and wages	56,957,883	47,158,335	7,933,805	1,865,743
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,402,336	3,179,106	79,412	143,818
9 Other employee benefits	10,257,219	9,584,235	239,407	433,577
<b>10</b> Payroll taxes	3,871,066	3,617,083	90,352	163,631
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	367,840	46,033	317,886	3,921
c Accounting	149,173		149,173	
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	6,905		6,905	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,113,123	6,716,563	2,368,970	27,590

986,253

5,092,878

1,078,640

7,535,089

3,246,895

504,708

2,506,855

11,188,153

1,283,075

1,137,302

928,716

574,747

410,501

1,456,544

160,312,654

12 Advertising and promotion .

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e
 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation
 Check here ► ☐ if following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O )

a SPECIAL PROJECTS

c PRINTING AND PUBLICATIONS

d DUES & MEMBERSHIPS

e All other expenses

13 Office expenses .

15 Royalties .

**17** Travel .

16 Occupancy .

20 Interest . .

23 Insurance .

**b** Training

14 Information technology

637,114

835,365

4,759,135

6,052,804

2,956,083

472,003

2,134,093

10,330,848

344,757

1,049,088

673,854

367,464

39,604

136,964,933

106,554

265,537

200,344

1,480,200

105,909

32,705

372,762

788,187

938,318

88,214

219,046

189,778

155,749

1,117,316

19,358,870

242,585

68,206

42,931

2,085

0

0

0

0

35,816

17,505

7,464

299,624

3,988,851

Form 990 (2018)

69,118

184,903

Page **11** 

41,972,457

105.527.302

164.766.994

312.596.670

264,522,805

188.960.027

766,079,502

930,846,496

Form **990** (2018)

Form 990 (2018)

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Net Assets or Fund Balances

		Check if Schedule O contains a response or not	te to ar	ny line in this Part IX			🗆
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments .		[	36,200,083	2	49,309,014
	3	Pledges and grants receivable, net			4,646,427	3	4,611,239
	4	Accounts receivable, net		[	3,251,508	4	2,244,961
	5	Loans and other receivables from current and for trustees, key employees, and highest compensations and the formula of Schedule L	ated en	nployees Complete	86,699	5	101,982
ts	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organization voluntary employees' beneficiary organizations Part II of Schedule L	n 4958 ations o (see in	(c)(3)(B), and of section 501(c)(9) structions) Complete	8.254.684	6	7.473.252
Se	7	,		-	· ·		<u> </u>
Assets	8	Inventories for sale or use	902,242	8	241,379		
_	9	Prepaid expenses and deferred charges	4,013,767	9	3,914,409		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	400,079,978			
	b	Less accumulated depreciation	<b>10</b> b	187,600,875	210,556,504	<b>10</b> c	212,479,103
	11	Investments—publicly traded securities .			575,191,362	11	587,391,641
	12	Investments—other securities See Part IV, line	11 .	[	53,542,958	12	52,776,053
	13	Investments—program-related See Part IV, line	e 11 .		1,237,736	13	2,201,031
	14	Intangible assets		[		14	
	15	Other assets See Part IV, line 11		[	5,528,471	15	8,102,432
	16	Total assets.Add lines 1 through 15 (must equ	ıal lıne	34)	903,412,441	16	930,846,496
	17	Accounts payable and accrued expenses			12,604,860	17	12,213,810
	18	Grants payable		Ī		18	
	19	Deferred revenue		Ī	4,564,045	19	5,053,425
	20	Tax-exempt bond liabilities				20	
				h			<del> </del>

b	Less accumulated depreciation	<b>10</b> b	187,600,875	210,556,504	10c	212,479,103
11	Investments—publicly traded securities .			575,191,362	11	587,391,641
12	Investments—other securities See Part IV, line	11 .		53,542,958	12	52,776,053
13	Investments—program-related See Part IV, line	11 .		1,237,736	13	2,201,031
14	Intangible assets				14	
15	Other assets See Part IV, line 11			5,528,471	15	8,102,432
16	Total assets.Add lines 1 through 15 (must equa	al line	34)	903,412,441	16	930,846,496
17	Accounts payable and accrued expenses			12,604,860	17	12,213,810
18	Grants payable			18		

11 Investments—publicly traded securities 575,191,362 11 12 Investments—other securities See Part IV, line 11	212,479,103						
	11	Investments—publicly traded securities .			575,191,362	11	587,391,641
	12	Investments—other securities See Part IV, line	11 .		53,542,958	12	52,776,053
	13	Investments—program-related See Part IV, line	11 .	•	1,237,736	13	2,201,031
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			5,528,471	15	8,102,432
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	903,412,441	16	930,846,496
	17	Accounts payable and accrued expenses			12,604,860	17	12,213,810
	18	Grants payable		18			
	19	Deferred revenue		4,564,045	19	5,053,425	
	20	Tax-exempt bond liabilities			20		
ý	21	Escrow or custodial account liability Complete F	art IV	of Schedule D		21	
ilitie	22						
iab		persons Complete Part II of Schedule L	0	22	0		
	22	Secured mertagges and notes navable to unrela		22			

41,917,371

111,375,782

170.462.058

309.009.923

247,234,403

176,706,057

732,950,383

903,412,441

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31 32

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

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

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

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

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

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

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

3a

3b

Yes

Yes (2018)

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

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

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

Audit Act and OMB Circular A-133?

## **Additional Data**

**Software ID:** 18007697 Software Version: 2018v3.1

**EIN:** 36-2182171

Name: Wheaton College

Form 990 (2018) Form 990, Part III, Line 4a:

Doctoral degrees There are approximately 2,900 students enrolled at the College

EDUCATION AND INSTRUCTION - The College offers undergraduate degrees in 43 areas of major study including 6 in the Conservatory, 16 Master of Arts degrees and 2

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

Form 990, Part III, Line 4c: AUXILIARY ENTERPRISES - THE COLLEGE PROVIDES ROOM AND BOARD FOR ALL ITS STUDENTS. THE BOOKSTORE MAKES BOOKS, STUDY GUIDES AND OTHER RELATED FDUCATIONAL MATERIALS AVAILABLE FOR THE CONVENIENCE OF THE STUDENTS

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

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

and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

Darrell Bock

Emery Lindsay

Shundrawn A Thomas

Gregory Waybright

	any hours	(	direct	or/tr	ruste	ee)		organization (W-	organizations (W- 2/1099- MISC)	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	2/1099-MISC)		organization and related organizations
Philip G Ryken	40 0	×		х				371,617	0	167,563
President/Trustee	2 0							3,1,01,		107,303
James Goetz	2 0			.,						
Chair/Trustee		X		Х				0	0	0

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10 2 0

10 20

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Dale Wong	2 0	×		V			0		0
Vice Chair/Trustee	1 0			^			0		
Kathryn H Vaselkıv	2 0								
Secretary/Trustee	0.0	X		Х			0	0	0
John Augustine	2 0								
Trustoo		X					0	0	0

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Date World		Х	х		l o	۸ ا	n
Vice Chair/Trustee	1 0		^				
Kathryn H Vaselkıv	2 0		,,				
Secretary/Trustee	0 0	X	Х		0	0	0
John Augustine	2 0						
Trustee	0 0	X			0	0	0
Barbara W Anderson	2 0						
Dailbara 11 / madroom		Y			۱ ،	l	n

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

Individual trustee or director

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Institutional

Highest compensated employee

employee

Former

2/1099-MISC)

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(W- 2/1099-

MISC)

organization and

related

organizations

0

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

	for related organizations below dotted line)
Jeffrey Meyer	2 0
Trustee	0 0
Philip G Hubbard	2 0
Trustee	0.0

and Independent Contractors

Kurt Keilhacker

Steven Preston

Andrea D Scott

Samuel Rodriguez

David K Gieser

Mary Schaller

Jeanette L Hsieh

Joseph M Stowell

Trustee - Until May 2019

Trustee - Until May 2019

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

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

and Independent Contractors

Wendy Woodward

Edward Stetzer

Chief Information Officer

Director of Human Resources

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

163,893

171,216

147,489

29,381

54,194

73,867

	any nouns	`	an ccc	0., 0		,		organization (**	(1)	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations	
Dale Kemp	40 0										
VP for Finance, Operations & Treasurer until 7/31/18	1 0			X				304,008	0	102,327	
Kırk D Farney	40 0			×				235,278	0	58,746	
VP for Advancement & Alumnı Relations	0.0			^				233,276		36,740	
Margaret Diddams	40 0			×				201 749	0	70.073	
Provost	0 0			^				201,748	٥	70,072	
Silvio Vazquez	40 0								_		
Chief Enrollment Management Officer	0 0			X				180,117	0	27,476	
Paul Chelsen	40 0			×				163,608	0	79,847	

Chief Enrollment Management Officer			^		180,117	0	ĺ
- Cilier Enrollment Management Officer	0.0		_				<u> </u>
Paul Chelsen	40 0						
			×		163,608	0	l
Vice President - Student Development	0.0						
Sheila Caldwell	40 0						
			x		84,536	0	l
Chief Intercultural Engagement Officer	1 00		- 1				ĺ

0 0

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Vice President - Student Development	0.0				100,000	J	
Sheila Caldwell	40 0						
Chief Intercultural Engagement Officer	0 0		X		84,536	0	
Kenneth Larson	40 0						

		1	×I		163,608	0	79,847
Vice President - Student Development	0.0		^		103,000		7 3,047
Sheila Caldwell	40 0		V		0.4.50.6		
Chief Intercultural Engagement Officer	0 0		×		84,536	0	5,666
Kenneth Larson	40.0						

			V				94 536	0	-
0.0			^				64,336		۶,
	0 0	0 0 40 0	0 0 40 0	0 0 X	0 0 X	0 0 X	0 0 X	X 84,536	X 84,536 0

Kenneth Larson	40 0						
Investment Manager & Interim VP Finance &			Х		181,375	0	84,477
Operations & Treasurer	0.0						
Wendy Woodward	40 0						

Executive Director	40 0				·	·
Karen Tucker	40 0					

Χ

and Independent Contractors (B) (C) (D) (E)

0.0

Dean , Natural & Social Sciences

Name and Title	Average hours per week (list any hours		ne bo	ox, u n off	ınles fıcer	s pers	son	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations	
David Iglesias  Director of the Center for Faith, Politics, and Economics	40 0					х		155,813	0	27,501	
David Teune DIRECTOR OF GIFT PLANNING SERVICES	40 0					х		140,839	0	41,327	
Dorothy Chappell	40 0										

19,744

146,359

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

efil	e GR	APHIC pri	nt - DO NO1	PROCESS	As Filed Data -			DLN: 9	3493195022260
SCHEDULE A (Form 990 or Cor 990EZ)			Com	plete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe  Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	a section	2018
•		f the Treasury		► Go to	www.irs.gov/Form	<u>990</u> for the late	est information	•	Open to Public Inspection
lam		he organiza	tion					Employer identific	ation number
D-a	rt I	Poscon	for Bublic C	harity State	<b>us</b> (All organization	c must comple	to this part \	36-2182171	
					eitis (For lines 1 thro			see mstructions.	
1		A church, c	convention of c	hurches, or as	ssociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).	
2	<b>✓</b>	A school de	escribed in <b>sec</b>	tion 170(b)(	1)(A)(ii). (Attach Scl	nedule E (Form 9	990 or 990-EZ) )		
3		A hospital o	or a cooperativ	e hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4		A medical r		ızatıon operat	ed in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated (iv). (Complet		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
6		A federal, s	state, or local o	government or	governmental unit de	escribed in <b>sectio</b>	on 170(b)(1)( <i>A</i>	()(v).	
7			ation that norr <b>'0(b)(1)(A)(</b> '		a substantial part of it Part II )	s support from a	governmental u	ınıt or from the gener	al public described in
8		A commun	ty trust descri	bed in <b>sectior</b>	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				lege or university or a
.0		from activit	ties related to : income and u	its exempt fur nrelated busin	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III )	taın exceptions,	and (2) no more	than 331/3% of its si	upport from gross
1					d exclusively to test fo	r public safety S	See section 509	(a)(4).	
2		more publi	cly supported (	organizations (	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or se	ction 509(a)(2	). See section 509(a	
a		<b>Type I.</b> A sorganization	supporting org	anızatıon oper r to regularly a	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme		orting organiz	pervised or controlled in ation vested in the sare and C.				
С					supporting organizatio ions) <b>You must com</b>				ated with, its
d		Type III n	on-functiona / integrated T	i <b>lly integrate</b> he organizatio	d. A supporting organ n generally must satis rt IV, Sections A and	Ization operated fy a distribution	in connection wi	th its supported orgai	
e		Check this	box if the orga	inization recei	ved a written determing integrated supporting	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported	·	megratea supporting	organization			
g	Provi	de the follow	ıng ınformatıo	n about the su	pported organization(				
	1 (i)	Name of supports of the second				(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No		
ota	<u> </u>								
		work Reduc	tion Act Noti	ce, see the I	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 2018

Other income Do not include gain

12 Gross receipts from related activities, etc. (see instructions)

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 Schedule A, Part II, line 14

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

check this box and stop here . . . . . . .

or loss from the sale of capital

assets (Explain in Part VI ) Total support. Add lines 7 through

organization

instructions

supported organization

10

11

III. If the organization fails to qualify under the tests listed below, please complete Part III.)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

Section A. Publ							
Calenda or fiscal year b	ar year Deginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, cor membership fees include any "unu	received (Do not	28,161,935	29,042,040	27,339,674	35,101,633	41,339,476	160,984,758
Tax revenues lev organization's be paid to or expend	ied for the nefit and either	0	0	0	0	0	0
The value of serve furnished by a good the organization	overnmental unit to	0	0	0	0	0	0
4 Total. Add lines	1 through 3	28,161,935	29,042,040	27,339,674	35,101,633	41,339,476	160,984,758
each person (oth governmental un supported organi line 1 that exceed amount shown of (f)	it or publicly zation) included on ds 2% of the n line 11, column						9,115,650
6 Public support. from line 4	Subtract line 5						151,869,108
Section B. Tota	l Support	•					
Calend		(a)2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e)2018	<b>(f)</b> Total
7 Amounts from I		28,161,935	29,042,040	27,339,674	35,101,633	41,339,476	160,984,758
8 Gross income fr	om interest,						

6	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5						9,115,650
<u> </u>	from line 4						151,869,108
S	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
7		(a)2014 28,161,935	<b>(b)</b> 2015 29,042,040	. ,	` '	` ,	

6	(f) <b>Public support.</b> Subtract line 5 from line 4						151,869,108
:	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e)2018	<b>(f)</b> Total
7	Amounts from line 4	28,161,935	29,042,040	27,339,674	35,101,633	41,339,476	160,984,758
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,019,712	7,351,746	8,832,073	9,053,607	11,295,072	44,552,210
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	158,382	0	0	0	158,382

1,517,168

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

1,474,364

1,410,312

1,070,794

Schedule A (Form 990 or 990-EZ) 2018

12

14

15

6,923,689

212,619,039

589.904.142

71 43 %

70 04 %

▶Ⅵ

1,451,051

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.	)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
36	ection B. Total Support  Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI )						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and <b>stop here</b>	,	, ,	, ,	,	( ), ( )	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

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

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

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

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

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

6

7

8

answer line 10b below

the organization had excess business holdings)

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

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

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

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

provide detail in Part VI.

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

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

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

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

9с

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

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

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

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	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	<b>11</b> c		
S	ection 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	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		
_	<u> </u>			
	ection 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?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	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		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI.</b>	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3h		

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E						
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1					
a	Average monthly value of securities	1a					
b	Average monthly cash balances	<b>1</b> b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)						
2	Acquisition indebtedness applicable to non-exempt use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
	Section C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
				1			

4

Schedule A (Form 990 or 990-F7) 2018

Enter greater of line 2 or line 3

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

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

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation Schedule A, Part II, Line 10 DESCRIPTION - , COLUMN A - -35241 0, COLUMN B - -41373 0, COLUMN C - -17123 0, COLUMN D -0 0, COLUMN E - 0 0, COLUMN F - -93737 0, DESCRIPTION - , COLUMN A - 894719 0, COLUMN B -Other Income 940672 0, COLUMN C - 830379 0, COLUMN D - 737027 0, COLUMN E - 422687 0, COLUMN F - 382548 4 0. DESCRIPTION - . COLUMN A - 591573 0. COLUMN B - 617869 0. COLUMN C - 661108 0. COLUMN

D - 673285 0, COLUMN E - 648107 0, COLUMN F - 3191942 0,

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

# **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 the latest information.

OMB No 1545-0047

DLN: 93493195022260

	me of the organization		Employer identification number
wn	eaton College		36-2182171
Pa	ort I Organizations Maintaining Donor Adv		r Accounts.
	Complete if the organization answered "Ye		
		(a) Donor advised funds	(b)Funds and other accounts
1	Total number at end of year	22	1
2	Aggregate value of contributions to (during year)	2,571,285	1
3	Aggregate value of grants from (during year)	787,954	(
4	Aggregate value at end of year	10,492,262	(
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex		vised funds are the  Yes No
6	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?		
Pa	rt III Conservation Easements. Complete if t	he organization answered "Yes" on Form	າ 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the orga	inization (check all that apply)	
	$\square$ Preservation of land for public use (e g , recreation	n or education)	historically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the for	
_	Total number of conservation easements	I	Held at the End of the Year
a ı.		-	2a
Ь	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified histor Number of conservation easements included in (c) acqu	` '	2c 2d
d	structure listed in the National Register	ined arter 7/25/06, and not on a historic	20
3	Number of conservation easements modified, transferred tax year ▶	ed, released, extinguished, or terminated by t	the organization during the
4	Number of states where property subject to conservation	on easement is located <b>&gt;</b>	
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		of violations,  Yes No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting  \$	, handling of violations, and enforcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d	) above satisfy the requirements of section 17	70(h)(4)(B)(ı)

Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

the organization's accounting for conservation easements

□ No

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Cat No 52283D Schedule D (Form 990) 2018

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990.

and section 170(h)(4)(B)(II)?

Part III

Par	t III	Organizations Ma	aintaining Coll	lections of A	rt, Histori	ical T	reası	ıres, or	Other	Similar As	sets (con	inued)	
3		g the organization's acqi s (check all that apply)	uisition, accession	n, and other rec	ords, check	any of	the fo	llowing t	hat are a	sıgnıfıcant u	se of its co	llection	
а	✓	Public exhibition			d	✓	Loan	or excha	ange prog	rams			
b	<b>✓</b>	Scholarly research			е		Othe	r					
С	✓	Preservation for future	generations										
4	Prov Part	ide a description of the o	organization's coll	ections and exp	olain how the	ey furtl	her the	e organız	ation's ex	empt purpos	se in		
5		ng the year, did the orga ts to be sold to raise fun								ılar	☐ Yes	☑ N	o
Pa	rt IV	Escrow and Custon Complete if the org X, line 21.			n Form 990	), Part	IV, lı	ne 9, or	reporte	d an amou	nt on For	n 990,	Part
1a		e organization an agent ided on Form 990, Part )		an or other inte	rmediary for	contri	bution	s or othe	er assets i	not	☐ Yes	□ N	o
Ь	If "Y	es," explain the arrange	ment in Part XIII	and complete t	the following	table		[		Aı	nount		_
С		nning balance		,	-			İ	1c				_
d	Addı	tions during the year						Ī	1d				_
е	Dıstr	ributions during the year						Ī	1e				_
f	Endı	ng balance						[	1f				
2a	Did t	the organization include	an amount on Fo	rm 990, Part X,	line 21, for	escrov	v or cu	- Istodial a	ccount lia	ıbılıty?	Yes	□ N	0
b		es," explain the arrange								•	_		
	rt V	Endowment Fund											
				(a)Current ye		rior yea			ears back	(d)Three yea		Four yea	rs back
<b>1</b> a	Begini	ning of year balance .		489,131	,000	446,37	5,000	38	8,033,000	409,6	313,000	405,	027,000
b	Contri	butions		10,974	,000	7,709	9,000		4,647,000	5,0	71,000	3,	952,000
c	Net ın	vestment earnings, gain	s, and losses	24,264	,000	57,009	9,000	7	6,988,000	-9,4	140,000	16,	703,000
d	Grant	s or scholarships	•	20,207	,000	18,40	5,000	1	7,865,000	17,2	211,000	16,	069,000
е		expenditures for facilitie	es	796	,000	3,558	3,000		5,427,000		0		0
f	Admır	nistrative expenses .			0		0		0		0		0
g	End of	f year balance		503,366	,000	489,13	1,000	44	6,376,000	388,0	33,000	409,	613,000
2 a		ide the estimated perceind designated or quasi-ei		ent year end bal 25 63 %	lance (line 1	g, colu	mn (a	)) held a	S				
ь		nanent endowment >	74 37 %										
c		porarily restricted endov		%									
·		percentages on lines 2a,											
3а	Are t	there endowment funds nization by	•	•	anızatıon tha	t are h	eld an	d admını	stered fo	r the		Yes	No
	(i) u	inrelated organizations									3a(i)		No
		related organizations .									3a(ii	)	No
b		es" on 3a(II), are the rel	<del>-</del>	·			?.				3b		
4		cribe in Part XIII the inte			endowment	tunds							
Pa	rt VI	Land, Buildings, Complete if the org			n Form 000	) Dart	T\/ 1-	no 115	See Ear	m 900 Da	t X line 1	0	
	Desci	ription of property	(a) Cost or oth (investme	er basıs (b	Cost or other					epreciation		Book valu	e
1a	Land					28.5	84,201			+		28	3,584,201
		ngs					98,753			138,508,158			5,490,595
		hold improvements				•	98,622		<u> </u>	717,195			1,781,427
		ment				•	15,751			42,277,000			0,738,751
	I · I ·			,									

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

4,884,129

212,479,103

6,098,522

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he organiza	tion answe	red "Yes" on Fo	orm 990, Par	t IV, line 11b.
(a) Description of security or category	(b) Book	value		) Method of va	
(Including name of security)  (1) Financial derivatives			Cost of	end-of-year i	Harket value
(2) Closely-held equity interests					
(A) Partnership Investments (B)	52	,776,053		С	
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	. 52	,776,053			
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on F	Form 990, F	Part IV, line	e 11c. See Forn	n 990, Part >	(, line 13.
(a) Description of investment	<b>(b)</b> B	ook value		) Method of varience of varience of the method of varience of the method	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					_
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )					
Part IX Other Assets. Complete if the organization answered		m 990, Part	IV, line 11d See	Form 990, Pa	
(a) Description	<u>n</u>				(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X  Other Liabilities. Complete if the organization a			 n 990, Part IV,		<u> </u> 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability		<b>(b)</b> Boo	k value		
(1) Federal income taxes		. ,			
OBLIGATIONS UNDER ANNUITIES, SPLIT-INTRST AGREEMENTS, OTH BENEFICIARIES	IER TRST		84,484,664		
DEPOSITS			687,683		
INTEREST RATE SWAP AGREEMENT ASSET RETIREMENT OBLIGATION			5,094,886 2,801,778		
REFUNDABLE U.S. GOVERNMENT GRANTS FOR STUDENT LOANS			4,068,081		
POST-RETIREMENT BENEFITS OBLIGATION (7)			8,390,210		
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  2. Liability for uncertain tax positions In Part XIII, provide the text of	• F the footnot	e to the oraa	105,527,302 anization's financi	al statements	that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 7		_			

Part XI

2

4

а

b

C

Part XII

5

1

2

c

d

3

4

b

5

Schedule D (Form 990) 2018

Page 4

-14,294,082

178,530,093

34,364,249

212,894,342

131,106,892

5,158,487

125,948,405

34,364,249

160.312.654

Schedule D (Form 990) 2018

d	Other (Describe in Part XIII )	
е	Add lines 2a through 2d	
3	Subtract line 2e from line 1	

b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )
е	Add lines 2a through 2d
~	Culture of the control of

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

Donated services and use of facilities . . .

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

Add lines 2a through 2d . .

а	Net unrealized gains (losses) on investments
b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )
е	Add lines 2a through 2d
3	Subtract line <b>2e</b> from line <b>1</b>

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

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

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

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

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

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

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

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

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

Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Return Reference Explanation

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

2a

2b 2c 2d

4a

4b

2a 2b

2c

2d

4a 4b -15,495,693

1.201.611

34,364,249

5,158,487

34,364,249

2e

3

4c

5

2e

3

4c

5

See Additional Data Table

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

Schedule D (Form 990) 2018

### Additional Data

**Software ID:** 18007697 **Software Version:** 2018v3.1 **EIN:** 36-2182171

Name: Wheaton College

ivate landowners in 2010.

Supplemental Information Return Reference

Schedule D, Part II CONSERVATION EASEMENTS

Explanation

Wheaton College owns 21 acres of land subject to a conservation easement held by Northwood s Land Trust, Inc (an unrelated tax-exempt charitable organization) Northwoods Land Trus t, Inc acquired the conservation easement in 2005 from private landowners, subject to an

agreement that permitted the use of the land as an outpost camping site by HoneyRock/Wheat

on College The subject property was subsequently contributed to Wheaton College by the pr

Supplemental Information					
Return Reference	Explanation				
Schedule D, Part III, Line 4 Collections of art - description of collections	WHEATON COLLEGE HAS PIECES OF ART AND ARTIFACTS, VARIOUS LITERARY COLLECTIONS, ORIGINAL MA NUSCRIPTS, PRIVATE PAPERS, AND RARE BOOKS OF SEVERAL AUTHORS WHEATON COLLEGE'S COLLECTION OF BOOKS AND EXHIBITS ARE DEDICATED TO THE MESSAGE AND HISTORY OF EVANGELISM IN AMERICA THE BOOKS AND EXHIBITS PROVIDE RESOURCES FOR RESEARCH AND STUDY THE MARION E WADE CENTER PROMOTES CULTURAL ENGAGEMENT AND SPIRITUAL FORMATION BY OFFERING A COLLECTION OF RESOURCE S AVAILABLE NOWHERE ELSE IN THE WORLD WE EMPHASIZE THE ONGOING RELEVANCE OF SEVEN BRITISH CHRISTIAN AUTHORS WHO PROVIDE A DISTINCTIVE BLEND OF INTELLECT, IMAGINATION, AND FAITH C S LEWIS, J R R TOLKIEN, DOROTHY L SAYERS, GEORGE MACDONALD, G K CHESTERTON, OWEN BARF IELD, AND CHARLES WILLIAMS THE WADE CENTER IMPLEMENTS THESE GOALS BY * ASSISTING SCHOLAR S IN THEIR STUDY OF UNIQUE MATERIALS BY AND ABOUT THESE SEVEN AUTHORS IN ORDER TO GENERATE NEW UNDERSTANDINGS, * SHARING INSIGHTS WITH A BROADER AUDIENCE THROUGH OUR NUMEROUS PROGR  AMS AND PUBLICATIONS, * SUPPORTING ARTISTIC WORKS INSPIRED BY OUR AUTHORS, * WELCOMING VIS STORS TO OUR MUSEUM THE WADE CENTER IS OPEN TO THE GENERAL PUBLIC AS WELL AS THE WHEATON COLLEGE COMMUNITY THERE IS NO ADMISSION FEE THE ARCHAEOLOGY MUSEUM CONTAINS MORE THAN 14,000 ARTIFACTS EXCAVATED BY JOSEPH P FREE, WHO SERVED AS PROFESSOR OF ARCHAEOLOGY AT WHEA TON COLLEGE FROM 1953-1964 THE EXCAVATION SITE WAS THE ANCIENT CITY OF DOTHAN LOCATED JUS T TEN KILOMETERS FROM MODERN-DAY JENIN IN PALESTINE THE MUSEUM IS OPEN TO THE PUBLIC AND IS LOCATED ON THE FIFTH FLOOR OF THE BILLY GRAHAM HALL VISITS TO THE MUSEUM ARE BY APPOIN TMENT CONTACT THE OFFICE COORDINATOR FOR THE BIBLICAL AND THEOLOGICAL STUDIES DEPARTMENT AT 630-752-5054 THE WHEATON COLLEGE BILLY GRAHAM CENTER ARCHIVES AT WHEATON COLLEGE ARE A MAJOR RESEARCH COLLECTION OF UNPUBLISHED MATERIALS RELATING TO NORTH AMERICAN, PROTESTANT , NON-DENOMINATIONAL EVANGELISM AND GLOBAL MISSIONS EFFORTS THE COLLECTIONS INCLUDE SERMO NS, INTERVIEWS, PHOTOGRAPHS, AUDIO AND VIDEO RECORDINGS, CRUSADE RECORDS AND				

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

S

Supplemental Information					
Return Reference	Explanation				
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The College and the Billy Graham Center have received determination letters from the Inter nal Revenue Service indicating they are tax exempt organizations described in Section 501(c)(3) of the Internal Revenue Code (The Code) Accordingly, they are generally exempt from income taxes pursuant to Section 501 (A) of the Code, except for taxes pertaining to Unre lated Business Income The College believes it has taken no uncertain tax positions as of June 30, 2019 or 2018				

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	Bookstore Cost of Goods Sold - 1201611

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Scholarships - 34364249

S

Supplemental Information	
Return Reference	Explanation
Other expenses in audited	Bookstore Cost of Goods Sold - 1201611 Change in the Value of Annuities - 2025770 Change in the Value of Bond Swap - 1143653 DONOR ADVISED FUNDS DISTRIBUTIONS TO OPERATIONS - 15079 6 DONOR ADVISED FUNDS DISTRIBUTIONS TO OTHERS - 636657

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Scholarships - 34364249

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493195022260 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** Wheaton College 36-2182171 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5с c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2018)

Schedule E (Form 990 or 990EZ) (2018)	Page 2				
<b>Part II</b> Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)					
Return Reference	Explanation				
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	The College's non-discrimination policy is stated on the College's website, as well as in all recruitment brochures and literature				
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	Wheaton College students receive federal financial assistance in accordance with Title IV of the Education Amendments of 1972				

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

efile GRAPHIC print - DO NOT PROCESS			SS As Filed Data -				DLN: 93493195022260		
SCHEDULE F (Form 990)	Statem	ent of	Activities (	Outside the Uni	ited Sta	ates	OMB No 1545-0047		
► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 1  ► Attach to Form 990.					ıne 14b, 15,	or 16.	2018		
Department of the Treasury Internal Revenue Service	Inspection						Open to Public Inspection		
Name of the organization Wheaton College						• •	tification number		
Part I General Info			o Outside the U	<b>Inited States.</b> Comple	_	s6-2182171 rganization a	nswered "Yes" to		
_	grantees' elig			substantiate the amount stance, and the selection	_				
J	Describe in Par	t V the org	anızatıon's proce	dures for monitoring the	use of its	grants and otl	L Yes L No her assistance		
3 Activites per Region (	The following P	art I, line 3	table can be dupli	cated if additional space is	needed )				
(a) Region		) Number of ffices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program se specif	/ listed in (d) is a ervice, describe fic type of s) in region	(f) Total expenditures for and investments in region		
See Add'l Data									
3a Sub-total b Total from continuation	sheets to	(	0 0				15,987,753 0		
Part I  c Totals (add lines 3a ar	vd 3P)		0 0				15,987,753		

Schedule F (Form 990) 2018							Page <b>3</b>	
Part IIII Grants and Otl				<b>ed States.</b> Complete r	f the organization ar	nswered "Yes" to Form 9	990, Part IV, line 16.	
Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

Sched	dule F (Form 990) 2018		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>☑</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	_	_
		∐ Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (See Instructions for Form 3471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	<b>✓</b> No

Schedule F	(Form 990) 2018	Page :			
Part V Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting 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 any additional information (see instructions).					
	ReturnReference	Explanation			

Schedule F (Form 990) 2018

## **Additional Data**

East Asia and the Pacific

Software ID: 18007697
Software Version: 2018v3.1
EIN: 36-2182171
Name: Wheaton College

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	, ,	STUDY/ HUMANITARIAN PROJECTS	109,653

0 Program Services

STUDY/ HUMANITARIAN

PROJECTS

18,011

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 0 | Program Services STUDY/ HUMANITARIAN 137.523 Greenland) IPROJECTS. Middle East and North Africa STUDY/ HUMANITARIAN 49,099 0 Program Services IPROJECTS.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 0 Program Services STUDY/ HUMANITARIAN 172,326 IPROJECTS. Central America and the 15.501.141 0 Investments Carıbbean

DLN: 93493195022260 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Wheaton College 36-2182171 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 26 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

(1) SCHOLARSHIPS - Undergraduate - Merit Based	1251	8,717,034		
(2) SCHOLARSHIPS - Undergraduate - Need Based	1467	22,695,804		
(3) SCHOLARSHIPS - Graduate - Merit Based	279	1,775,534		

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

(4) SCHOLARSHIPS -Graduate - Need Based 113 17

16

Schedule I (Form 990) 2018

Loan Cancellations - Undergraduate - Need

Loan Cancellations - Graduate - Need Based

the College

PROCEDURES FOR MONITORING

Procedures for monitoring use of

USE OF GRANT FUNDS

grant funds

Schedule I. Part I. Line 2

(5)

Based

307,357 405,322

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

remaining portion of each donor's contribution is available for distribution to other public charities at the donor's recommendation, subject to the approval of the

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

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

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

Page **2** 

Schedule I (Form 990) 2018

(7) Tuition Discounts 145 300,886 (7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Return Reference **Explanation** Schedule I, Part I, Line 2 For contributions under \$1,000,000, Wheaton College will generally retain 25%, for contributions of over \$1,000,000, Wheaton College will generally retain 10% The

162,312

## **Additional Data**

Calvary Homes Retirement

Community 502 Elizabeth Dr Lancaster, PA 17601

		Software ID	<b>18007697</b>			
		Software Version	: 2018v3.1			
		EIN	l: 36-2182171			
		Name	: Wheaton College			
Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance
By the Hand Club (for Kids) PO Box 10043 Chicago, IL 60610	20-3144284	501(C)(3)	11,500			
	ı			ı	1	1

9,500

501(C)(3)

23-1606038

(h) Purpose of grant or assistance

Fundraiser Pledge/ General support

Piano purchase

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

CEO Forum	20-2012491	501(C)(3)	15,000		General Supp
15475 Gleneagle Dr					
Colorado Springs, CO 80921					

City Reformed Church 39-6059688 501(C)(3) 12.000 General Support

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

1661 North Farwell Ave Milwaukee, WI 53202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance College Church 36-2203929 501(C)(3) 6.000 Pioneer Clubs / General Support

General Support

23,000

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

501(C)(3)

332 E Seminary Ave
Wheaton, IL 60187

Cornerstone Community
Church

3167 Frankford Ave Philadelphia, PA 191343826 23-3057681

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 59-1098689 501(C)(3) 63.837 Covenant Church of Naples Missions/ Pastor Fund/ General Support 6926 Trail Blvd

6926 Trail Blvd
Naples, FL 34108

Campus Crusade for Christ Inc 95-6006173 (CRU)

General Support

7,800

Mission Support

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

PO Box 628222 Orlando, FL 328628222

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ESMI 31-1633120 501(C)(3) 73.500 Building Churches 2121 SW 3rd Ave Ste 601 Miami, FL 33129

General Support

50.000

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

501(C)(3)

Grace Presbyterian Church of

the North Shore 404 Ridge Ave Winnetka, IL 60093 36-4416196

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 47-2715039 501(C)(3) 12.500 General Support Hope Works Community

Hope Works Community 47-2715039 501(C)(3) 12,500

Development 6414 S Cottage Grove Ave Chicago, IL 60637

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

PO Box 7895

Madison, WI 537077895

Chicago, IL 60637

Intervarsity Christian 36-2171714 501(C)(3) 11,345
Fellowship National MBA Ministry/

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

Mission Support

Kids Alive International	31-1140515	501(C)(3)	6,908		Pledge/ School/
2507 Cumberland Dr					
Valparaiso, IN 46383					

7.200

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

501(C)(3)

Mission Aviation Fellowship

Nampa, ID 836530047

PO Box 47

95-1920983

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 20-3226605 501(C)(3) 10.000 New Trier School National School Project PO Box 1232 Ministry

PO Box 1232
Whittier, CA 90609

Outreach Community Ministries 23-7265066 501(C)(3) 18,000

Ste 102

Ministry

Ministry

Ministry

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

Carol Stream, IL 60188

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

General Support

Peachtree Presbyterian Church 3434 Rosewell Road NW Atlanta, GA 30306	58-1807840	501(C)(3)	16,000		1	Stewardship/ Music Ministry/ Scholarships

9.100

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

501(C)(3)

Pepperdine University

24255 Pacific Coast Hwy Malibu, CA 902639698 95-1644037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Redeemer City to City 38-3773431 501(C)(3) 17.000 Trainer to support Planters

	 ===:			
New York, NY 10036				
Ste 1620				
1166 Avenue of the Americas				Church Pla

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

Charlotte, NC 282890004

Reformed University Ministries 58-1713181 501(C)(3) 12.500 Mission Support PO Box 890004

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

Ethiopia Support

Samaritan's Purse PO Box 3000 Boone, NC 28607	58-1437002	501(C)(3)	9,000		Disaster relief/ Veterans outreach/ General Support

SIM USA 22-1936391 501(C)(3) 7.500l Mission support/

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

PO Box 7900

Charlotte, NC 28241

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 36-2440497 501(C)(3) 13.000 |General Support/ Scholarships/

Skokie Valley Baptist Church 1050 Skokie Blvd Wilmette, IL 60091

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

500 E 61st St Chicago, IL 60637

Benevolent Fund Sunshine Enterprises 36-2317631 501(C)(3) 20,000 General Support

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

General Support

20,000

					1
Together Chicago Inc	82-3256928	501(C)(3)	25,000		Gene
102 Elm St		, , ,	·		
Prospect Heights, IL 60070					

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

501(C)(3)

Wheaton Bible Church

27W500 North Ave West Chicago, IL 60185 36-2233546

SCHOLARSHIPS - Undergraduate - Merit Based

SCHOLARSHIPS - Undergraduate - Need

1251 8,717,034 | SCHOLARSHIPS - Undergraduate - Need

1467 22,695,804

(d)Amount of

(e) Method of valuation (book,

(f)Description of non-cash assistance

SCHOLARSHIPS - Undergraduate - Need Based	1467	22,695,804		
SCHOLARSHIPS - Graduate - Merit Based	279	1,775,534		

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

(b) Number of

113

(c)Amount of

307.357

405.322

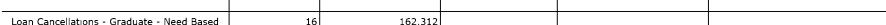
(a)Type of grant or assistance

SCHOLARSHIPS -Graduate - Need Based

Based

Loan Cancellations - Undergraduate - Need

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



300.886

145

Tuition Discounts

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data -		DLN: 934	9319	5022	260
Sch	edule J	Compensation	Information	ОМ	В No	1545-0	)047
(For	n 990)	For certain Officers, Directors, Truste	es, Key Employees, and High	nest			
		Compensated E  ▶ Complete if the organization answered '	mployees "Yes" on Form 990, Part IV.	line 23.	20	18	}
		► Attach to Fo	orm 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form990</u> for instru	uctions and the latest inform			o Put ectio	
	ne of the organiza	ation		Employer identificati			
Whe	aton College			36-2182171			
Pa	rt I Questi	ons Regarding Compensation					
				ŗ		Yes	No
1a		ppiate box(es) if the organization provided any of the forection A, line 1a Complete Part III to provide any relev					
	First-class	or charter travel	sing allowance or residence for p	personal use			
	_	· · · - · · · · · · · · · · · · · · · ·	nents for business use of persor				
		- · · · · ·	th or social club dues or initiatio				
	☐ Discretion	ary spending account LJ Perso	onal services (e g , maid, chaufi	eur, cner)			
b		kes in line 1a are checked, did the organization follow a ill of the expenses described above? If "No," complete f		ent or reimbursement	<b>1</b> b	Yes	
2		ition require substantiation prior to reimbursing or allov es, officers, including the CEO/Executive Director, rega		152	2	Yes	
	directors, truste	es, officers, including the CEO/Executive Director, rega	arding the items checked in line	la,			
3		If any, of the following the filing organization used to es		e			
	_	EO/Executive Director Check all that apply Do not che d organization to establish compensation of the CEO/E:	•	n Part III			
	✓ Compensa						
			en employment contract pensation survey or study				
			oval by the board or compensat	cion committee			
4		, did any person listed on Form 990, Part VII, Section A					
7	related organiza		A, line 1a, with respect to the hi	ing organization or a			
а	Receive a sever	ance payment or change-of-control payment?			4a		No
b	Participate in, o	r receive payment from, a supplemental nonqualified re	etirement plan?		4b	Yes	
c	Participate in, o	r receive payment from, an equity-based compensation	n arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable	e amounts for each item in Part	III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) organizations must	complete lines 5-9				
5		ed on Form 990, Part VII, Section A, line 1a, did the org					
	compensation c	ontingent on the revenues of					
а	The organization	1 <sup>?</sup>			5a		No
b	Any related orga				5b		No_
_	•	5a or 5b, describe in Part III					
6		ed on Form 990, Part VII, Section A, line 1a, did the org ontingent on the net earnings of	ganization pay or accrue any				
a	The organization				6a		No
b	Any related orga	anization? 6a or 6b, describe in Part III			<b>6</b> b		No_
7	•	·	anniantion provide and namedous	,			
7		ed on Form 990, Part VII, Section A, line 1a, did the orgescribed in lines 5 and 6? If "Yes," describe in Part III	ganization provide any nonfixed	'	7		No
8		nts reported on Form 990, Part VII, paid or accured pui uitial contract exception described in Regulations section		scribe			Nic
9	If "Yes" on line	3, did the organization also follow the rebuttable presur	mption procedure described in l	Regulations section	8		No_
Ear !	53 4958-6(c)?	ction Act Notice, see the Instructions for Form 99	QO Cot No E	0053T Schedule 1	9 (Earm	000	2018

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting							
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	( <b>D)</b> Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1		1	I	1
							!
				+			
	+			+			
				+			
1-		-		+			
1							
			1				

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

The College provided tax gross up payments related to educational benefits provided to three highest compensated employees. Such benefits were included in

Page 3

Schedule J (Form 990) 2018

Schedule J, Part I, Line 1a Tax

indemnification and gross-up payments taxable income for all three recipients

Return Reference	Explanation
edule J, Part I, Line 1a Housing	The President of the College receives a housing allowance that is excluded from taxable income
vance or residence for personal use	

Return Reference	Explanation
	Wheaton College has a nonqualified 457(f) retirement plan in place that allows for certain officers to participate in the plan. The following interested person constructively received deferrals to the 457(f) plan in 2018. These deferrals are included in Schedule J, Part II, Column (c). Dale Kemp - \$50,000.

#### **Additional Data**

Kirk D Farney

Provost Silvio Vazquez

VP for Advancement &

Alumnı Relations Margaret Diddams

Chief Enrollment

Management Officer Paul Chelsen

Vice President - Student Development Kenneth Larson

Investment Manager &

Chief Information Officer

Edward Stetzer

Karen Tucker

Executive Director

Director of Human Resources David Iglesias

Faith, Politics, and Economics David Teune

DIRECTOR OF GIFT PLANNING SERVICES Dorothy Chappell

Dean , Natural & Social

Sciences

Director of the Center for

Interim VP Finance & Operations & Treasurer Wendy Woodward

(11)

(1)

(1)

(11)

(1)

(1)

(11)

(1)

(11)

(11)

(1)

(1)

(II)

(1)

(1)

(III)

233,700

200,318

156,952

163,154

180,036

163,203

146,099

124,712

117,532

138,131

143,824

Software Version: 2018v3.1 **EIN:** 36-2182171

**Software ID:** 18007697

Name: Wheaton College

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

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISO	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990		
Philip G Ryken	(1)	370,298	0	1,319	40,000	127,563	539,180	0		
President/Trustee	(11)	o	0	0	0	0	0	0		
Dale Kemp	(1)	302,455	0	1,553	73,150	29,177	406,335	0		
VP for Finance, Operations & Treasurer until 7/31/18	(11)	o	0	0	0	0	0	0		

1,578

1,430

23,165

454

1,339

690

25,117

22,777

38,281

2,708

2,535

28,780

24,141

7,742

23,332

15,123

13,559

12,484

10,773

9,676

11,686

11.723

29,966

45,931

19,734

56,515

69,354

15,822

41,710

63,094

17,825

29,641

8,021

294,024

271,820

207,593

243,455

265,852

193,274

225,410

221,356

183,314

182,166

166,103

	te print - E	O NOT PROCESS	AS FII	ed Data -						IN: 93	4931	950	
Schedule L (Form 990 or 99		mplete if the organ	ization an	swered "Yes'	on Form 9		nes 2	5a, 2	5b, 26		MB No		
		, ,	► Attach	to Form 990	or Form 99						20	1	8
21.7		▶Go to	www.irs.g	ov/Form990	for the lates	st information	١.				Open		
epartment of the Tra nternal Revenue Ser	I										Insp		
Name of the org Wheaton College	ganızatıon						En	nploy	er ide	ntifica	ation n	umb	er
								-2182					
		t <b>Transactions</b> (se								. 40h			
		isqualified person			·	Ified person an			escript		(d	) Cor	rected?
				OI	rganization			tra	ansactio	on	Y	es	No
							_						
							+						
							_						
		i/or From Intere: organization answere								_	+h-a		
(a) Name of interested person	ported an am	ount on Form 990, Pa ship (c) Purpose of loan	rt X, line 5,	6, or 22		8a, or Form 99  (f)Balance due	( <b>g)</b> defa	In	(h Approv	n) /ed by	(1	i)Writ	ten
(a) Name of interested	(b) Relation with	ount on Form 990, Pa ship (c) Purpose of loan	(d) Loan organ	6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defa	In ult?	(h Approv boar comm	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rej (a) Name of Interested person  1)	(b) Relation with	ount on Form 990, Pa ship (c) Purpose of loan	rt X, line 5,	6, or 22 to or from the	(e)Original principal	(f)Balance	(g) defa	In ult?	(h Approv boar	n) ved by	(1	i)Writ reem	ten
rej (a) Name of Interested person  1)	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	(d) Loan organ	6, or 22 to or from the nization?	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rej (a) Name of Interested person  1)	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	(d) Loan organ	6, or 22 to or from the nization?	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rej (a) Name of Interested person  1)	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	(d) Loan organ	6, or 22 to or from the nization?	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rep (a) Name of Interested person  1) hillip G Ryken	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	(d) Loan organ	6, or 22 to or from the nization?  From X	(e)Original principal amount	(f)Balance due 101,982	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rep (a) Name of interested person  1) Philip G Ryken  Total	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	(d) Loan organ	6, or 22 to or from the nization?  From X	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rep (a) Name of interested person  1) hilip G Ryken  otal  otal  Grant IIII Grant Gr	(b) Relation with organizati	ount on Form 990, Pa ship (c) Purpose of loan on Home Mortgage/ Home	TX, line 5, (d) Loan orgal To	6, or 22 to or from the nization?  From X	(e)Original principal amount  210,000	(f)Balance due  101,982	(g) defa	In ult?	(h Approv boar comm <b>Yes</b>	r) /ed by id or ittee?	(i ag	i)Writ reem	ten ent?
rep (a) Name of interested person  1) hillip G Ryken  otal  Part III Grance Columns	President  ants or Assemplete if the	ount on Form 990, Paiship (c) Purpose of loan on Home Mortgage/ Home Improvements	To T	6, or 22 to or from the nization?  From X	(e)Original principal amount  210,000  \$  \$  90, Part IV,	(f)Balance due  101,982	(g) defa	In ult?	(h Approv boar comm Yes Yes	ved by d or ittee? No	Yes Yes	i)Writireem	ten ent?
(a) Name of interested person  1) hillip G Ryken  Total  Part III Grace Contains Name of interested person	President  ants or Assemplete if the	ount on Form 990, Pariship (c) Purpose of loan on Home Mortgage/ Home Improvements  sistance Benefiting organization answin (b) Relationship Interested person	To T	6, or 22 to or from the nization?  From X  sted Person " on Form 9	(e)Original principal amount  210,000  \$  s.  90, Part IV, f assistance	(f)Balance due  101,982  101,982	(g) defa  Yes	In ult?	Yes  Yes	(e) Pu	Yes Yes	i)Writ	nten ent?
(a) Name of interested person  1) Chilip G Ryken  Total  Part III Grace Contain Name of interested person	President  ants or Assemplete if the	ount on Form 990, Pariship (c) Purpose of loan on Home Mortgage/ Home Improvements  sistance Benefiting organization answin (b) Relationship Interested person	To T	6, or 22 to or from the nization?  From X  sted Person " on Form 9	(e)Original principal amount  210,000  \$  s.  90, Part IV, f assistance	(f)Balance due  101,982  101,982  line 27.  (d) Type o	(g) defa  Yes	In ult?	Yes  Yes	(e) Pu	Yes Yes	i)Writ	nten ent?
rep (a) Name of interested person  1) Philip G Ryken  Total	President  ants or Assemplete if the	ount on Form 990, Pariship (c) Purpose of loan on Home Mortgage/ Home Improvements  sistance Benefiting organization answin (b) Relationship Interested person	To T	6, or 22 to or from the nization?  From X  sted Person " on Form 9	(e)Original principal amount  210,000  \$  s.  90, Part IV, f assistance	(f)Balance due  101,982  101,982  line 27.  (d) Type o	(g) defa  Yes	In ult?	Yes  Yes	(e) Pu	Yes Yes	i)Writ	nten ent?

(a) Name of Interested person	(b) Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	(e) Sh of organiza reven	f atıon's
				Yes	No
(1) Kenneth Larson	Key employee/ Investment manager	, , , , , , , , , , , , , , , , , , ,	Sister Karen Belling is the Director of Financial Aid at Wheaton College		No
(2) Kenneth Larson	Key employee/ Investment manager	,	Spouse Laurel Larson is the CMCA coordinator for the Billy Graham Center for Evangelism		No
(3) Jeffrey Meyer	Trustee	10,204	Daughter-ın-law Rebecca Meyer ıs		No

la Ministry Associate in the Chaplain's Office at Wheaton College (4) Philip Hubbard 61,268 Son-in-law Adam Wood is an Trustee Assistant Professor in Philosophy at Wheaton College

Nο President 71,606 Brother-in-law Jeffrey Beaird is a No network/systems engineer at Wheaton College

Explanation

Schedule L (Form 990 or 990-EZ) 2018

(5) Philip Ryken

Return Reference

Part V

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493195022260 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Wheaton College 36-2182171 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 2,000 Cost 1 Art-Works of art . . Х Art—Historical treasures 3 Art—Fractional interests Χ 33,049 Cost 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles Х 15,000 Cost **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 5,103,874 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . Χ 123,480 Market value Real estate—Commercial . Х 315,000 Market value Real estate—Other . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ See Additional Data 26 Other ▶ ( \_\_\_\_\_\_) Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions 2 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
I, column (b), the r	ormation.  tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part lumber of contributions, the number of items received, or a combination of both. Also complete ditional information.
Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Books and publications - Number of contributions Securities - Publicly traded - Number of contributions Other - Horses to Honey Rock - Number of contributions Other - Musical Instruments - Number of contributions Other - Donated Tickets - Number of contributions Other - Gifts in Kind - Number of contributions Cars and other vehicles - Number of contributions Other - Tools to Honey Rock - Number of contributions Real estate - Commercial - Number of contributions Real estate - Residential - Number of contributions Art - Works of art - Number of contributions
	Schedule M (Form 990) (2018)

#### **Additional Data**

Other ▶ (

Other ▶ ( Musical Instruments )

Other ▶ (

Other ▶ (

Tools to Honey Rock )

Donated Tickets )

Gifts in Kind ) Other ▶ (

Horses to Honey Rock )

**Software ID:** 18007697 **Software Version:** 2018v3.1 **EIN:** 36-2182171

Name: Wheaton College

Part I, Lines 25-28 (a) (b) (c) Number of contributions or Noncash contribution Check if applicable items contributed amounts reported on Form 990, Part VIII, line

Χ

Χ

Х

Χ

Χ

(d) Method of determining noncash contribution amounts

53

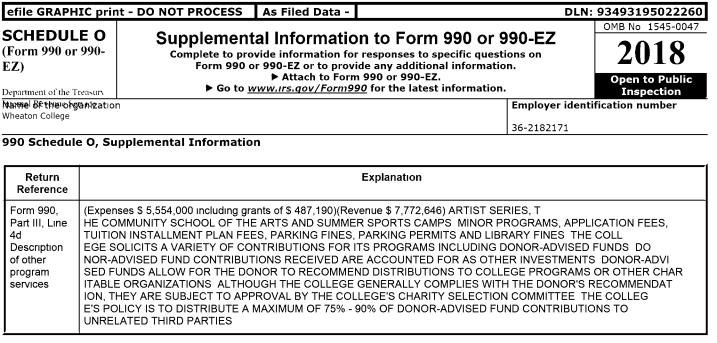
49,100 Cost

14,297 Cost

388,900 Cost

8.750 Market value

9,510 Replacement cost



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

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The Executive Committee shall consist of not less than seven elected Trustees, a majority of whom shall constitute a quorum, and as ex-officio members the Chairman of the Board, VI ce Chairman of the Board and the President (when a Trustee). The members of this committee shall be appointed by the Board of Trustees at its annual meeting. The Chairman of the Board shall also be the Chairman of the Executive Committee and in his/her absence, the Vice Chairman shall sit in his/her place. The Executive Committee shall have and may exercise all of the authority of the Board of Trustees during the interim between regular meetings of the Board provided that such committee shall not have the authority of the Board of Trustees in reference to (I) amending, altering, or repealing their Bylaws, (II) electing, ap pointing, or removing any Trustee, (III) amending the Charter, (IV) adopting a plan of mer ger or consolidation with another corporation, (V) authorizing the sale, lease, exchange, or mortgage of all or substantially all of the property and assets of the Corporation, (VI) authorizing the voluntary dissolution of the Corporation

Return Explanation
Reference

Form 990, Part VI, Line
11b Review of form 990
by governing body

After finalizing the Form 990 with the paid tax preparer, the Controller and the VP for Finance forward a copy of the Form 990 to all board members with sufficient time for their review prior to filing the return with the IRS

Return Reference	Explanation
,	Officers, trustees and key employees are annually asked to reveal any potential conflicts of interest. Each interested person is provided a questionnaire electronically to be revie

wed The Controller reviews the questionnaires to determine if any potential conflict exis 12c Conflict

ts and is required to be disclosed on the Form 990. If a conflict exists, the Board member of interest is asked to abstain from voting on the issue of which they have a conflict policy

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

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The Compensation Committee also reviews and approves the compensation for the VP for Finan ce, the VP for Student Development, the Provost and for the VP for Advancement The review sutilize compensation data from Form 990's of similar educational institutions. This process is undertaken annually and is documented in the meeting minutes of the Compensation Committee.

# 990 Schedule O, Supplemental Information Return Reference Explanation

the public

Form 990,
Part VI, Line
19 Required documents available to documents available on our website Governing documents and conflict of interest policies are not required disclosures pursuant to Internal Revenue Cod et (IRC) Section 6104. These documents are not available to the public at this time.

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	CHANGE IN THE VALUE OF ANNUITIES2025770, CHANGE IN THE VALUE OF THE BOND SWAP11436 53, DONOR ADVISED FUNDS DISTRIBUTIONS TO OTHERS636657, DONOR ADVISED FUNDS DISTRIBUTIO NS TO OPERATIONS150796,

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Wheaton College

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

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

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

2018

**Employer identification number** 

**DLN: 93493195022260**OMB No 1545-0047

Open to Public Inspection

							36-2	182171				
Part I Identification of Disregarded Entities Complete If	the organı	zation answe	ered "Yes	" on Form	990, Part	IV, line 3	33.					
(a) Name, address, and EIN (If applicable) of disregarded entity		<b>(b)</b> Primary activi		Legal domic or foreign o		(d) Total in	I come	<b>(e)</b> End-of-year a	ssets	ts Direct co		
Part II Identification of Related Tax-Exempt Organizatio	<b>ns</b> Comple	te if the orga	nızatıon	answered i	"Yes" on F	orm 990	Part I\	/ line 34 he	cause it	had one or	more	
related tax-exempt organizations during the tax year.	iis comple	te ii tile orge	mzacion	answered	103 0111	01111 550	, raic i	7, IIIIC 5+ bc	.cause ic	naa one or	more	
(a) Name, address, and EIN of related organization	Prima	(b) ry activity	Legal dor or foreig	(c) nicile (state in country)	(d Exempt Coo	) de section	Public of (if secti	(e) charity status on 501(c)(3))	Direc	(f) at controlling entity	Section (13) co	g) n 512(b ontrolle tity?
(1)BILLY GRAHAM CENTER 501 COLLEGE AVENUE	RESEARCH			IL	501(c)(3)		Type I		WHEATON	N COLLEGE	Yes	No
WHEATON, IL 60187 36-2982217												
(2)WHEATON COLLEGE ALUMNI ASSOCIATION 501 COLLEGE AVENUE	ALUMNI AS	SOC		IL	501(c)(3)		Type II		WHEATON	N COLLEGE	Yes	
WHEATON, IL 60187 36-6127340											$\downarrow$	$oxed{igspace}$
For Paperwork Reduction Act Notice, see the Instructions for Form	990.		Ca	t No 5013	5Y				Sched	ule R (Form	990) 2	018

(3)		(b)	(a)	(d)	/-	.,	(f)	(a)	(1	.,	1 (1)	1	(j)	/-	
(a) Name, address, and EIN of related organization	Primary activity		Direct controlling entity	ect Predomi olling income(re		Share of total incom		(h) Disproprtionat allocations?		(i) Code V-UI amount in l 20 of Schedule k (Form 106	BI Ge box ma pa -1	neral or anaging artner?	(k) Percentag ownership	ntage	
					"	••			Yes	No		Ye	s No		
													+		
Part IV Identification of Related Organi because it had one or more related	zations Taxable as a C organizations treated as	orporation a corporation	or Trus on or tru	<b>t</b> Complete st during th	if the o	rganız ear.	ation ans	wered "Yes	on Fo	orm 9	90, Part I	V, lın	e 34		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	don	<b>c)</b> gal nicile	Direct o	(d) controlling	Туре		<b>(f)</b> Share of total		(g) e of end		(h) rcentag		(ı) Section	1512 L3)
			r foreign ntry)	e	ntity	or	o, S corp, trust)	income		year assets	0/	vnershi		contro	
		cou	ntry)			or	trust)			assets				contro entit Yes	
501 COLLEGE AVENUE WHEATON, IL 60187	TRUST ADMINISTRATION		ntry)	WHEAT COLLEG	ON	C Corpo	trust)	income 133,615				68 %		contro entit	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420	TRUST ADMINISTRATION  Trust	cou	ntry) ¯	WHEAT COLLEG	ON	or C Corpo	trust)			assets				contro entit Yes	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?
501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?
(1)WHEATON COLLEGE TRUST COMPANY NA 501 COLLEGE AVENUE WHEATON, IL 60187 36-4353420 (2)Charitable Remainder Trust (141) 501 COLLEGE AVENUE Wheaton, IL 60187		Cou	ntry) ¯	WHEAT COLLEG	ON SE	or C Corpo	trust)			assets				contro entit <b>Yes</b> Yes	y?

(1)Billy Graham Center

(5)Billy Graham Center

(2)Wheaton College Trust Company NA

(3) Wheaton College Trust Company NA

(4)Wheaton College Trust Company NA

No

No

No

No

No

No

No No

11

1n 10 Yes

1r

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

Allocation based on square footage

Based on square footage plus overhead

Admin fees received from Wheaton College

Allocation based on the number of trusts

General Ledger

1m Yes

Yes

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.										
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Ye	es No						
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts I	II-IV?			$\top$						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity			1a Ye	s						
f b Gift, grant, or capital contribution to related organization(s)			<b>1</b> b	No						
${f c}$ Gift, grant, or capital contribution from related organization(s)		[	1c Ye	s						
d Loans or loan guarantees to or for related organization(s)			1d	No						
e Loans or loan guarantees by related organization(s)			1e	No						

		_
а	receipt of (1) interest, (1) and 100, (1) for the month of controlled citation (1) in the controlled citation (1) in the citat	1a
b	Gift, grant, or capital contribution to related organization(s)	<b>1</b> b
c		<b>1</b> c
d	Estans of four guarantees to or for related organization(s)	<b>1</b> d
e	Loans or loan guarantees by related organization(s)	<b>1</b> e

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

(b)

Transaction type (a-s)

Ν

М

(c)

Amount involved

1,321,900

40,146

829,027

668.085

525,000

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Performance of services or membership or fundraising solicitations for related organization(s) . . . . . .

m Performance of services or membership or fundraising solicitations by related organization(s) . . . . . . . . .

Lease of facilities, equipment, or other assets to related organization(s) . . .

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses .

r Other transfer of cash or property to related organization(s) . . .

Ь	Gift, grant, or capital contribution to related organization(s)	<b>1</b> b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	<b>1</b> f		No
g	Sale of assets to related organization(s)	<b>1</b> g		N
1		1	$\overline{}$	

С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	<b>1</b> g		No
h	Purchase of assets from related organization(s)	1h		No

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

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

was not a related organization. See mistractions regarding exclusion													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		ganizations?	(f) Share of total Income	(g) Share of end-of-year assets		_	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
Schedule R (Form 990) 2018													

