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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☑ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Berea College

Number and street (or P O box if mail is not delivered to street address) | Room/suite
Lincoln Hall No 220

City or town, state or country, and ZIP + 4
Berea, KY 40404

D Employer identification number
61-0444650

E Telephone number
(859) 985-3082

F Accounting method ☐ Cash ☑ Accrual
☐ Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☑ No

I Group Exemption Number ▶

M Check ▶ ☐ if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Web site: ▶ www berea edu

J Organization type (check only one) ▶ ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than 25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 847,830,755

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Contributions to donor advised funds		1a			
	b	Direct public support (not included on line 1a)		1b	21,113,232		
	c	Indirect public support (not included on line 1a)		1c			
	d	Government contributions (grants) (not included on line 1a)		1d	7,346,497		
	e	**Total** (add lines 1a through 1d) (cash $ 28,333,822 noncash $ 125,907)				1e	28,459,729
	2	Program service revenue including government fees and contracts (from Part VII, line 93)				2	13,244,367
	3	Membership dues and assessments				3	
	4	Interest on savings and temporary cash investments				4	262,784
	5	Dividends and interest from securities				5	25,195,859
	6a	Gross rents		6a	386,314		
	b	Less rental expenses		6b	236,577		
	c	Net rental income or (loss) subtract line 6b from line 6a				6c	149,737
	7	Other investment income (describe ▶)				7	
	8a	Gross amount from sales of assets other than inventory	**(A)** Securities 776,460,629	8a	**(B)** Other 45,909		
	b	Less cost or other basis and sales expenses	742,879,800	8b			
	c	Gain or (loss) (attach schedule)	33,580,829	8c	45,909		
	d	Net gain or (loss) Combine line 8c, columns (A) and (B)				8d	33,626,738
	9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ▶ ☐					
	a	Gross revenue (not including $ ____ of contributions reported on line 1b)		9a			
	b	Less direct expenses other than fundraising expenses		9b			
	c	Net income or (loss) from special events Subtract line 9b from line 9a				9c	
	10a	Gross sales of inventory, less returns and allowances		10a	3,570,665		
	b	Less cost of goods sold		10b	1,572,038		
	c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a				10c	1,998,627
	11	Other revenue (from Part VII, line 103)				11	204,499
	12	**Total revenue** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11				12	103,142,340
Expenses	13	Program services (from line 44, column (B))				13	57,142,744
	14	Management and general (from line 44, column (C))				14	11,719,432
	15	Fundraising (from line 44, column (D))				15	2,738,266
	16	Payments to affiliates (attach schedule)				16	
	17	**Total expenses** Add lines 16 and 44, column (A)				17	71,600,442
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 12				18	31,541,898
	19	Net assets or fund balances at beginning of year (from line 73, column (A))				19	1,270,213,266
	20	Other changes in net assets or fund balances (attach explanation)				20	-113,093,675
	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20				21	1,188,661,489

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2007)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach Schedule) (cash $ noncash $) If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule) (cash $3,026,137 noncash $) If this amount includes foreign grants, check here	22b	3,026,137	3,026,137		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	1,421,282	365,217	886,708	169,357
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b	105,395	105,395		
c Compensation and other distributions not icluded above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b and c	26	27,378,998	22,099,828	3,785,029	1,494,141
27 Pension plan contributions not included on lines 25a, b and c	27	1,686,768	1,384,954	209,105	92,709
28 Employee benefits not included on lines 25a - 27	28	2,366,574	1,827,123	396,717	142,734
29 Payroll taxes	29	1,831,232	1,411,227	309,277	110,728
30 Professional fundraising fees	30				
31 Accounting fees	31	79,339		79,339	
32 Legal fees	32	16,622		16,622	
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36	2,764,019	2,624,161	139,858	
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	5,879,249	5,413,372	465,877	
43 Other expenses not covered above (itemize)					
a See Additional Data Table	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13—15)	44	71,600,442	57,142,744	11,719,432	2,738,266

Joint Costs. Check ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ☐ **Yes** ☐ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs $______, **(ii)** the amount allocated to Program services $______, **(iii)** the amount allocated to Management and general $, and **(iv)** the amount allocated to Fundraising $

Additional Data

Software ID:
Software Version:
EIN: 61-0444650
Name: Berea College

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a INSTRUCTION	43a	3,131,945	3,131,945		
b PUBLIC SERVICE	43b	3,751,963	3,751,963		
c ACADEMIC SUPPORT	43c	1,784,515	1,784,515		
d STUDENT SERVICES	43d	2,764,488	2,764,488		
e STUDENT INDUSTRIES AND RENTALS	43e	1,768,182	1,768,182		
f RESIDENCE HALLS AND FOOD SERVICE	43f	4,452,710	4,452,710		
g PLANT OPERATIONS	43g	1,231,527	1,231,527		
h FUNDRAISING	43h	728,597			728,597
i GENERAL AND ADMINISTRATIVE	43i	3,012,713		3,012,713	
j INVESTMENT MANAGEMENT FEES	43j	2,418,187		2,418,187	

Form 990, Part III - Program Service Accomplishments:

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501 (c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
INSTRUCTION - EXPENDITURES OF ACADEMIC DEPARTMENTS AND OTHER INSTRUCTION ACTIVITIES BENEFITING APPROXIMATELY 1,500 STUDENTS (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	22,378,496
PUBLIC SERVICE - INCLUDES EXPENDITURES FOR THE UPWARD BOUND PROGRAM, EDUCATIONAL TALENT SEARCH, GEAR UP PROGRAM, CONTINUING EDUCATION, EXTENSION AND OUTREACH PROGRAMS, AND COMMUNITY ASSISTANCE PROGRAMS THAT SUPPORT THE INSTITUTION'S MISSION OF SERVICE (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	6,064,969
ACADEMIC SUPPORT - INCLUDES EXPENDITURES FOR THE PROVOST AND DEAN'S OFFICE, LIBRARY, MEDIA SERVICES, STUDENT LAPTOP COMPUTER PROGRAM, AND OTHER RELATED ACTIVITIES THAT SUPPORT THE INSTRUCTIONAL MISSION OF THE COLLEGE (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	6,918,095
STUDENT SERVICES - STUDENT SUPPORT SERVICES SUCH AS ADMISSIONS, STUDENT LIFE, HEALTH SERVICES, LABOR PROGRAM, AND FINANCIAL AID (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	8,438,758
STUDENT INDUSTRIES COST OF OPERATIONS (EXCLUDING COST OF SALES) WHICH PROVIDE LABOR OPPORTUNITIES FOR STUDENTS (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	2,894,438
STUDENT AID - EXPENDITURES FOR SCHOLARSHIPS, GRANTS, AND AWARDS TO STUDENTS (Grants and allocations $ 3,026,137) If this amount includes foreign grants, check here ▶ ☐	3,026,137
RESIDENCE HALLS AND FOOD SERVICE FOR STUDENTS (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	7,421,851

Part III **Statement of Program Service Accomplishments** *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

What is the organization's primary exempt purpose? ▶	POST-SECONDARY EDUCATIONAL INSTITUTION PROVIDING INSTRUCTION, HOUSING, AND OTHER SERVICES TO FACULTY AND STUDENTS COMMITTED TO THE FOLLOWING MISSION - TO PROVIDE AN EDUCATIONAL OPPORTUNITY PRIMARILY FOR STUDENTS FROM APPALACHIA, BLACK AND WHITE, WHO HAVE GREAT PROMISE AND LIMITED ECONOMIC RESOURCES - TO PROVIDE AN EDUCATION OF HIGH QUALITY WITH A LIBERAL ARTS FOUNDATION AND OUTLOOK - TO STIMULATE UNDERSTANDING OF THE CHRISTIAN FAITH AND ITS MANY EXPRESSIONS, AND TO EMPHASIZE THE CHRISTIAN ETHIC AND THE MOTIVE OF SERVICE TO OTHERS - TO PROVIDE FOR ALL STUDENTS THROUGH THE LABOR PROGRAM EXPERIENCES FOR LEARNING AND SERVING IN THE COMMUNITY, AND TO DEMONSTRATE THAT LABOR, MENTAL AND MANUAL, HAS DIGNITY AS WELL AS UTILITY - TO ASSERT THE KINSHIP OF ALL PEOPLE AND TO PROVIDE INTERRACIAL EDUCATION WITH A PARTICULAR EMPHASIS ON UNDERSTANDING AND EQUALITY AMONG THE RACES - TO CREATE A DEMOCRATIC COMMUNITY DEDICATED TO EDUCATION AND EQUALITY FOR WOMEN AND MEN	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)		
a See Additional Data Table		
(Grants and allocations $)	If this amount includes foreign grants, check here ▶ ☐	
b		
(Grants and allocations $)	If this amount includes foreign grants, check here ▶ ☐	
c		
(Grants and allocations $)	If this amount includes foreign grants, check here ▶ ☐	
d		
(Grants and allocations $)	If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule) (Grants and allocations $)	If this amount includes foreign grants, check here ▶ ☐	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) . . . . ▶		57,142,744

Part IV Balance Sheets *(See the instructions.)*

Line	Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets						
45	Cash—non-interest-bearing				45	
46	Savings and temporary cash investments			25,155,347	46	28,614,341
47a	Accounts receivable	47a	630,774			
b	Less allowance for doubtful accounts	47b	50,000	1,473,874	47c	580,774
48a	Pledges receivable	48a	19,939,508			
b	Less allowance for doubtful accounts	48b	115,000	25,873,681	48c	19,824,508
49	Grants receivable			1,749,524	49	1,020,366
50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
b	Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)				50b	
51a	Other notes and loans receivable (attach schedule)	51a	2,091,056			
b	Less allowance for doubtful accounts	51b	375,822	1,809,742	51c	1,715,234
52	Inventories for sale or use			1,882,717	52	1,624,956
53	Prepaid expenses and deferred charges			2,556,714	53	1,271,204
54a	Investments—publicly-traded securities ▶ ☐ Cost ☑ FMV			142,651,300	54a	139,000,200
b	Investments—other securities (attach schedule) ▶ ☐ Cost ☑ FMV			1,010,508,100	54b	932,150,500
55a	Investments—land, buildings, and equipment basis	55a				
b	Less accumulated depreciation (attach schedule)	55b			55c	
56	Investments—other (attach schedule)			4,792,800	56	4,556,400
57a	Land, buildings, and equipment basis	57a	192,749,934			
b	Less accumulated depreciation (attach schedule)	57b	50,600,280	138,870,536	57c	142,149,654
58	Other assets, including program-related investments (describe ▶)			3,013,005	58	2,840,578
59	**Total assets** (must equal line 74) Add lines 45 through 58			1,360,337,340	59	1,275,348,715
Liabilities						
60	Accounts payable and accrued expenses			8,256,077	60	8,867,689
61	Grants payable				61	
62	Deferred revenue			96,871	62	111,707
63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
64a	Tax-exempt bond liabilities (attach schedule)			66,280,000	64a	62,300,000
b	Mortgages and other notes payable (attach schedule)			590,275	64b	
65	Other liabilities (describe ▶)			14,900,851	65	15,407,830
66	**Total liabilities** Add lines 60 through 65			90,124,074	66	86,687,226
Net Assets or Fund Balances						
	Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 67 through 69 and lines 73 and 74					
67	Unrestricted			887,202,428	67	816,355,437
68	Temporarily restricted			144,895,787	68	126,983,479
69	Permanently restricted			238,115,051	69	245,322,573
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
70	Capital stock, trust principal, or current funds				70	
71	Paid-in or capital surplus, or land, building, and equipment fund				71	
72	Retained earnings, endowment, accumulated income, or other funds				72	
73	**Total net assets or fund balances** Add lines 67 through 69 **or** lines 70 through 72 (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			1,270,213,266	73	1,188,661,489
74	**Total liabilities and net assets / fund balances** Add lines 66 and 73			1,360,337,340	74	1,275,348,715

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	-13,587,045
b	Amounts included on line **a** but not on Part I, line 12				
1	Net unrealized gains on investments	b1	-108,978,094		
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify)	b4	3,620,863		
	Add lines **b1** through **b4**			b	-105,357,231
c	Subtract line **b** from line **a**			c	91,770,186
d	Amounts included on Part I, line 12, but not on line **a**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify)	d2	11,372,154		
	Add lines **d1** and **d2**			d	-105,357,231
e	**Total revenue** (Part I, line 12) Add lines **c** and **d** ▶			e	103,142,340

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	67,964,732
b	Amounts included on line **a** but not on Part I, line 17				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify)	b4	1,808,614		
	Add lines **b1** through **b4**			b	1,808,614
c	Subtract line **b** from line **a**			c	66,156,118
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify)	d2	5,444,324		
	Add lines **d1** and **d2**			d	5,444,324
e	**Total expenses** (Part I, line 17) Add lines **c** and **d** ▶			e	71,600,442

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
See Additional Data Table				

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 31			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	**75b**		No
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" ▶	**75c**		No
	If "Yes," attach a statement that includes the information described in the instructions			
d	Does the organization have a written conflict of interest policy?	**75d**	Yes	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	**(B)** Loans and Advances	**(C)** Compensation (If not paid enter -0-)	**(D)** Contributions to employee benefit plans and deferred compensation plans	**(E)** Expense account and other allowances
david b porter lINCOLN HALL beREA, KY 40404	0	94,200	11,195	0

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	**76**		No
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	**77**		No
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	**78a**	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	**78b**	Yes	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	**79**		No
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	**80a**	Yes	
b	If "Yes," enter the name of the organization ▶ BEREA INTERCHANGE DEVELOPMENT CORP and check whether it is ☑ exempt **or** ☐ nonexempt			
81a	Enter direct or indirect political expenditures (See line 81 instructions) **81a**			
b	Did the organization file **Form 1120-POL** for this year?	**81b**		No

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
LARRY D SHINN LINCOLN HALL BEREA, KY 40404	PRESIDENT 40 00	266,475	54,196	3,048
CAROLYN NEWTON LINCOLN HALL BEREA, KY 40404	ACADEMIC VP & PROVOST 40 00	135,000	19,942	783
WILLIAM LARAMEE LINCOLN HALL BEREA, KY 40404	VP FOR ALUMNI & COLLEGE RE 40 00	137,000	20,319	1,228
steven d karcher LINCOLN HALL BEREA, KY 40404	VP FOR BUSINESS & ADMINIST 40 00	114,822	10,734	168
JEFFREY S AMBURGEY LINCOLN HALL BEREA, KY 40404	VICE PRESIDENT FOR FINANCE 40 00	130,000	19,597	329
GAIL W WOLFORD LINCOLN HALL BEREA, KY 40404	VP FOR LABOR & STUDENT LIF 40 00	122,000	16,626	863
STEPHANIE P BROWNER LINCOLN HALL BEREA, KY 40404	DEAN OF THE FACULTY 40 00	130,000	19,596	259
JUDGE B WILSON II LINCOLN HALL BEREA, KY 40404	secretarygeneral counsel 40 00	206,000	27,252	545
vance blade LINCOLN HALL BEREA, KY 40404	trUSTEE 1 00	0	0	0
M ELIZABETH CULBRETH LINCOLN HALL BEREA, KY 40404	CHAIR 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
VICKI E ALLUMS LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
CHARLOTTE BEASON LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
NANCY BLAIR LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
john e fleming LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
jim lewis LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
JANICE HUNDLEY CRASE LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
CHELLA S DAVID LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
GLENN R FUHRMAN LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
JAMES P GRAY II LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
HEATHER STURT HAAGA LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DONNA S HALL LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
SCOTT M JENKINS LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
eugene woods LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
SHAWN JOHNSON LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
LUCINDA RAWLINGS LAIRD LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
BRENDA TODD LARSEN LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
EUGENE Y LOWE JR LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
ELISSA MAY-PLATTNER LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
HAROLD L MOSES LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
JAMES E NEVELS LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DOUGLAS M ORR LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
WILLIAM B RICHARDSON LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
CHARLES WARD SEABURY II LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
DAVID E SHELTON LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
MARK STITZER LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
TYLER S THOMPSON LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
DAVID O WELCH LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
DAWNEDA F WILLIAMS LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
DRAUSIN F WULSIN LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0
ROBERT T YAHNG LINCOLN HALL BEREA, KY 40404	TRUSTEE 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
ALBERTA WOOD ALLEN LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
JOHN ALDEN AUXIER LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
JAMES T BARTLETT LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
JACK BUCHANAN LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
FREDERIC L DUPREE JR LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
KATE IRELAND LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
JUANITA M KREPS LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
ALICE R MANICUR LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
THOMAS H OLIVER LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
KROGER PETTENGILL LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
R ELTON WHITE LINCOLN HALL BEREA, KY 40404	HONORARY TRUSTEE 0 00	0	0	0
david swanson lINCOLN HALL bEREA, KY 40404	hoNORARY TRUSTEE 0 00	0	0	0

Part VI Other Information *(continued)*

			Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		No
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) — 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Yes	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b		
	If "Yes," was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year			
c	Dues assessments, and similar amounts from members — 85c			
d	Section 162(e) lobbying and political expenditures — 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	*501(c)(7) orgs.* Enter **a** Initiation fees and capital contributions included on line 12 — 86a			
b	Gross receipts, included on line 12, for public use of club facilities — 86b			
87	*501(c)(12) orgs.* Enter **a** Gross income from members or shareholders — 87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) — 87b			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		No
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
89a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		No
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶			
e	*All organizations.* At any time during the tax year was the organization a party to a prohibited tax shelter transaction?	89e		No
f	*All organizations.* Did the organization acquire direct or indirect interest in any applicable insurance contract?	89f		No
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		

90a List the states with which a copy of this return is filed ▶ KY,NH

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions) — **90b** 577

91a The books are in care of ▶ The Organization Telephone no ▶ (859) 985-3082

Located at ▶ Lincoln Hall No 220 Berea, KY ZIP + 4 ▶ 40404

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		No

If "Yes," enter the name of the foreign country ▶

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**, Report of Foreign Bank and Financial Accounts

Part VI Other Information *(continued)*

			Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		No
	If "Yes," enter the name of the foreign country ▶			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041***—Check here ▶ ☐			
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92		

Part VII Analysis of Income-Producing Activities ***(See the instructions.)***

Note: *Enter gross amounts unless otherwise indicated.*

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a See Additional Data Table					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	262,784	
96 Dividends and interest from securities			14	25,195,859	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property			16	149,737	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	33,626,738	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			05	1,998,627	
103 Other revenue a See Additional Data Table					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		-476,566		61,978,708	13,180,469

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 74,682,611

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes ***(See the instructions.)***

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities ***(See the instructions.)***

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts ***(See the instructions.)***

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ **Yes** ☑ **No**

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **Yes** ☑ **No**

NOTE: *If "Yes" to **(b)**, file Form 8870 **and** Form 4720 (see instructions).*

Form 990, Part VII, Line 93 - Program service revenue:

Note: *Enter gross amounts unless otherwise indicated.*		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
a	RESIDENCE & FOOD SERVICE REVENUE					7,220,850
b	STUDENT FEES & INSURANCE PAID BY STUDENTS					1,430,102
c	COST OF EDUCATION FEES PAID BY FEDERAL STATE & OTHER GRANTS					2,615,000
d	OVERHEAD RECEIVED FROM GOVERNMENT ON CONTRACTS					378,188
e	INCOME FROM AGRICULTURE FARM LABORATORY					191,815
f	RECOVERY OF LABOR FROM OFF-CAMPUS STUDENT JOBS					47,201
g	FEES FOR ADULT EDUCATION					570
h	FEES RECEIVED FOR LEADERSHIP EDUCATION					544,462
i	INCOME FOR DUPLICATING & PRINTING SERVICES - EXTERNAL	519100	92,830			
j	OTHER PROGRAM SERVICE REVENUE					352,919
k	SALE OF WATER - FORESTRY PROGRAM	221000	136,711			
l	MEDIA GUIDE ADVERTISING INCOME	541800	3,794			
m	WORK COLLEGE CONSORTIUM					135,628
n	CONCERT CHOIR EUROPEAN TOUR					1,575
o	miscellanoue plant fund income					92,722

Form 990, Part VII, Line 103 - Other revenue:

Note: *Enter gross amounts unless otherwise indicated.*		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
a	ROOM & BOARD CHARGES FOR CONFERENCES			03	59,672	
b	INCOME FOR CHILD CARE PROGRAM			03	407,149	
c	FEES CHARGES FOR USE OF GYM			03	109,130	
d	CONCESSION INCOME			03	5,601	
e	MEDICATION & OTHER HEALTH SERVICES			03	124,953	
f	OIL & GAS ROYALTIES ON DONATED MINERAL RIGHTS			15	38,458	
g	INTERNAL ALLOCATION OF MGMT COSTS TO GIFT ANNUITIES					169,437
h	NET UBI FROM INVESTMENT PARTNERSHIPS	525990	-709,901			

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	RESIDENTIAL CAMPUS - ROOM AND BOARD FOR STUDENTS
93	UNIVERSAL ACCESS FEES, CLASS FEES, ETC FOR EDUCATIONAL PURPOSES
93	COST OF EDUCATION FUNDED BY FEDERAL (PELL), STATE AND OTHER GRANTS
93	INDIRECT COST ALLOWANCE FROM GOVERNMENT CONTRACTS MOSTLY USED FOR PUBLIC SERVICE ACTIVITIES
93	INCOME FROM FARM LABORATORY FOR EDUCATIONAL PURPOSES
93	BEREA COLLEGE IS A FEDERAL WORK COLLEGE ALL STUDENTS ARE REQUIRED TO WORK ON CAMPUS, OR, IN SOME LIMITED SITUATIONS, WORK IN A SERVICE ORIENTED POSITION OFF-CAMPUS
93	PUBLIC SERVICE TO PROVIDE LEADERSHIP TRAINING TO THE APPALACHIA AREA
102	PROVIDES ESSENTIAL SERVICES TO THE COLLEGE COMMUNITY SUPPORTS ACADEMICS and PROVIDES EMPLOYMENT FOR STUDENTS IN THE STUDENT LABOR PROGRAM WHICH IS AN INTEGRAL PART OF THE EDUCATIONAL PROGRAM
93	MISCELLANEOUS INCOME TO SUPPORT THE EXEMPT PURPOSES ABOVE

Part XI **Information Regarding Transfers To and From Controlled Entities** *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity		

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity		

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

****** — Signature of officer
2010-02-26 — Date

JEFFREY S AMBURGEY VICE PRESIDENT OF FINANCE — Type or print name and title

Paid Preparer's Use Only

Preparer's signature: LEIGH MCKEE	Date	Check if self-empolyed ☐	Preparer's SSN or PTIN (See Gen Inst W)
Firm's name (or yours if self-employed), address, and ZIP + 4: DEAN DORTON FORD PSC 106 W VINE STREET SUITE 600 LEXINGTON, KY 40507			EIN Phone no (859) 255-2341

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2007

Name of the organization
Berea College

Employer identification number
61-0444650

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JOHN A LYMPANY LINCOLN HALL BEREA, KY 40404	CHIEF INFO OFFICER 40 00	121,600	18,681	239
RICHARD SEARS LINCOLN HALL BEREA, KY 40404	PROFESSOR 40 00	102,055	12,037	922
clifford b sowell LINCOLN HALL BEREA, KY 40404	PROFESSOR 40 00	98,310	16,177	892
robert j lewis LINCOLN HALL BEREA, KY 40404	PROFESSOR 40 00	97,060	15,612	908
JOSEPH BAGNOLI LINCOLN HALL BEREA, KY 40404	ASSOCIATE PROVOST 40 00	100,000	16,506	119
Total number of other employees paid over $50,000 ▶	187			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
STATE STREET GLOBAL ADVISORS 1 LINCOLN ST BOSTON, MA 02111	INVESTMENT MANAGER	1,138,131
adams street partners one n wacker dr suite 2200 chICAGO, IL 60606	INVESTMENT MANAGER	992,209
ekhoff ochenkoski polk architects 201 west short st suite 602 lexington, KY 40507	ARCHITECTURAL SERVICES	785,029
HIRTLE CALLAGHAN CO 300 BARR HARBOR DR WEST CONSHOHOCKEN, PA 19428	INVESTMENT SERVICES	495,071
BANK OF NEW YORK MELLON 209 WEST JACKSON BLVD CHICAGO, IL 60606	INVESTMENT CUSTODY SERVICES	270,283
Total number of others receiving over $50,000 for professional services ▶ 9		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
alliance corporation 122 n lake dr prestonburg, KY 41653	CONSTRUCTION	1,333,451
MEYER MIDWEST 2150 COMMERCIAL DR FRANKFORT, KY 40601	CONSTRUCTION	533,872
DAVID W POWELL INC 111 HORSECOVE RD BEREA, KY 40403	CONSTRUCTION	200,234
cincinnati bell technology solution 1507 solutions center chiCAGO, IL 60677	CONSTRUCTION	148,885
JOHN DEVERE BUILDERS INC 427 CHESNUT ST BEREA, KY 40403	CONSTRUCTION	144,436
Total number of other contractors receiving over $50,000 for other services ▶ 5		

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶$ 24,952 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	Yes	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing property?	2a		No
b	Lending of money or other extension of credit?	2b		No
c	Furnishing of goods, services, or facilities?	2c	Yes	
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		No
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a	Yes	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	Yes	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3c		No
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		No
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	Yes	
b	Did the organization make any taxable distributions under section 4966?	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		

d Enter the total number of donor advised funds owned at the end of the tax year ▶

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☑ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶ ____________

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 ☐ An organization that normally receives **(1) more than 331/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 331/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

☐ Type I ☐ Type II ☐ Type III - Functionally Integrated ☐ Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support?
Total ▶					

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

	Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2005	**(c)** 2004	**(d)** 2003	**(e)** Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)					
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22					
24	Line 23 minus line 17					
25	Enter 1% of line 23					

26 **Organizations described on lines 10 or 11:** **a** Enter 2% of amount in column (e), line 24 ▶ **26a**

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** 0

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ **26c**

d Add Amounts from column (e) for lines 18 ______ 19 ______ 22 ______ 26b ______ ▶ **26d**

e Public support (line 26c minus line 26d total) ▶ **26e**

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f**

27 **Organizations described on line 12:** **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return.** Enter the sum of such amounts for each year

(2006) ______ (2005) ______ (2004) ______ (2003) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2006) ______ (2005) ______ (2004) ______ (2003) ______

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ **27c**

d Add Line 27a total ______ and line 27b total ______ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ **27f**

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g**

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h**

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	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?	29	Yes	
30	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?	30	Yes	
31	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?	31		No
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
	BEREA COLLEGE IS EXEMPT FROM PUBLICIZING ITS NONDISCRIMINATORY POLICY BY NEWSPAPER OR BROADCAST MEDIA BECAUSE IT CUSTOMARILY DRAWS A SUBSTANTIAL PERCENTAGE OF STUDENTS FROM LARGE GEOGRAPHIC SECTIONS OF THE UNITED STATES ADDITIONALLY, IT CURRENTLY ENROLLS MEANINGfUL NUMBERS OF RACIAL MINORITIES Its PROMOTIONAL & RECRUITING EFFORTS ARE REASONABLY INTENDED to INFORM STUDENTS OF ALL RACIAL SEGMENTS OF THE AVAILABILITY of SCHOOl IT PUBLISHES ITS RACIALLY NONDISCRIMINATORY policy IN BROCHURES AND CATALOGS DEALING WITH STUDENT admissions, PROGRAMS, AND SCHOLARSHIPS			
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		No
b	Admissions policies?	33b		No
c	Employment of faculty or administrative staff?	33c		No
d	Scholarships or other financial assistance?	33d		No
e	Educational policies?	33e		No
f	Use of facilities?	33f		No
g	Athletic programs?	33g		No
h	Other extracurricular activities?	33h		No
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	34b		No
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	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," attach an explanation	35	Yes	

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ **a** ☐ if the organization belongs to an affiliated group Check ▶ **b** ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table—	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is—	**The lobbying nontaxable amount is—**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2007	**(b)** 2006	**(c)** 2005	**(d)** 2004	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		No	
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)		No	
c Media advertisements		No	0
d Mailings to members, legislators, or the public		No	0
e Publications, or published or broadcast statements		No	0
f Grants to other organizations for lobbying purposes		No	0
g Direct contact with legislators, their staffs, government officials, or a legislative body	Yes		24,952
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		No	0
i Total lobbying expenditures (Add lines **c** through **h.**)			24,952

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	**51a(i)**		No
(ii) Other assets	**a(ii)**		No
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	**b(i)**		No
(ii) Purchases of assets from a noncharitable exempt organization	**b(ii)**		No
(iii) Rental of facilities, equipment, or other assets	**b(iii)**		No
(iv) Reimbursement arrangements	**b(iv)**		No
(v) Loans or loan guarantees	**b(v)**		No
(vi) Performance of services or membership or fundraising solicitations	**b(vi)**		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	**c**		No

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☑ **Yes** ☐ **No**

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
BEREA INTERCHANGE DEVELOPMENT COPRORATION	501(C)(2)	WHOLLY OWNED SUBSIDIARY - EIN 61-1124566

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Form **4562-FY**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-
2007
Attachment Sequence No **67**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
Berea College	Form 990 Page 2	61-0444650

Part I **Election To Expense Certain Property Under Section 179**
Note: *If you have any listed property, complete Part V before you complete Part I.*

1 Maximum amount See the instructions for a higher limit for certain businesses	1	125,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	500,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

(a) Description of property	**(b)** Cost (business use only)	**(c)** Elected cost
6		

7 Listed property Enter the amount from line 29	7			
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7			8	
9 Tentative deduction Enter the **smaller** of line 5 or line 8			9	
10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562FY			10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)			11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11			12	
13 Carryover of disallowed deduction to 2008 Add lines 9 and 10, less line 12 ▶	13			

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not** include listed property **)** (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	5,879,249

Part III **MACRS Depreciation (Do not** include listed property.**)** (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	**(b)** Month and year placed in service	**(c)** Basis for depreciation (business/investment use only—see instructions)	**(d)** Recovery period	**(e)** Convention	**(f)** Method	**(g)** Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV **Summary** (see instructions)

21 Listed property Enter amount from line 28			21	
22 **Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr			22	5,879,249
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23			

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? Yes No | **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						**25**		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 . **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 . . . . **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles) . .												
31 Total commuting miles driven during the year .												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use? .												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2007 tax year (see instructions)					
43 Amortization of costs that began before your 2007 tax year				**43**	
44 Total. Add amounts in column (f) See the instructions for where to report . .				**44**	

TY 2007 Cash Grants Paid Schedule

Name: Berea College

EIN: 61-0444650

Class of Activity	Recipient's name	Address	Amount	Relationship
STUDENT AID GRANTS PRIZE FUNDS & AWARDS	VARIOUS	BEREA COLLEGE BEREA, KY 40404	3,026,137	NONE

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

TY 2003 Gain/Loss from Sale of Nonpublic Securities Schedule

Name: Berea College

EIN: 61-0444650

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Sales Expenses	Total (net)
endowment fund	2007-12	PURCHASED	2007-12		768,798,195	736,650,731	0	32,147,464
annuity fund	2007-12	PURCHASED	2007-12		7,662,434	6,229,069	0	1,433,365

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

TY 2007 Gain/Loss from Sale of Other Assets Schedule

Name: Berea College

EIN: 61-0444650

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
various surplus equipment	2007-12	PURCHASED	2007-12		24,540	0		0	24,540	
Equipment	2007-12	PURCHASED	2007-12		21,369	0		0	21,369	

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TY 2007 General Explanation Attachment

Name: Berea College

EIN: 61-0444650

Identifier	Return Reference	Explanation
STMT ON DETERMINATION OF RECIPIENTS OF SCHOLARSHIPS, GRANTS & STUDENT LO	FORM 990 - SCHEDULE A PART III, LINE 3A	ADMISSION TO BEREA COLLEGE IS LIMITED TO STUDENTS WITH FINANCIAL NEED AS DETERMINED USING FEDERAL METHODOLOGY, ACADEMICALLY RANK IN THE UPPER TWO/FIFTHS OF HIGH SCHOOL CLASS OR IN UPPER 60TH PERCENTILE AS MEASURED BY ACT OR SAT SCORES, AND COME FROM CERTAIN GEOGRAPHIC A REAS COLLEGE POLICY IS THAT APPROXIMATELY 80% OF STUDENTS COME FROM SOUTHERN APPALACHIA A ND THE STATE OF KENTUCKY THE REMAINING 20% COME FROM OTHER PARTS OF THE U S AND FOREIGN COUNTRIES ALL STUDENTS ADMITTED TO BEREA COLLEGE ARE AWARDED FINANCIAL AID BASED ON NEED THIS IS ACCOMPLISHED THROUGH A COMBINATION OF THE STUDENT'S AND THE FAMILY'S RESOURCES, TH E COLLEGE WORK PROGRAM, PUBLIC AND PRIVATE GRANTS AND SCHOLARSHIPS, AND FINALLY, A COLLEGE GRANT OR LOAN FOR ANY REMAINING NEED EACH BEREA STUDENT IS GUARANTEED SOME WAY TO COVER THE COST OF EDUCATION - IN EFFECT RECEIVING A SCHOLARSHIP OR SOME FORM OF FINANCIAL AID FR OM VARIOUS SOURCES EVERY STUDENT CONTRIBUTES THROUGH HIS OR HER LABOR TOWARD THE COST OF E DUCATION IN RECOGNITION OF THIS EFFORT ON BEHALF OF THE COLLEGE, A LABOR GRANT FROM THE C OLLEGE IS APPLIED TOWARD THE COST OF EDUCATION FOR EACH STUDENT IN ADDITION, EACH STUDENT IS REQUIRED TO WORK AT LEAST 10 HOURS PER WEEK AND RECEIVES AN HOURLY PAYMENT FOR WORK IN THE STUDENT LABOR PROGRAM THE STUDENT AND THE FAMILY ARE EXPECTED TO CONTRIBUTE ADEQUATEL Y FROM EARNINGS AND SAVINGS, AS AVAILABLE, TOWARD LIVING EXPENSES ADDITIONAL ASSISTANCE M AY BE ARRANGED IF NEEDED IN ADDITION TO ITS PRIVATE RESOURCES, BEREA COLLEGE PARTICIPATES IN THE FOLLOWING FEDERAL AND STATE STUDENT AID PROGRAMS 1 THE FEDERAL COLLEGE WORK-STUDY PROGRAM2 FEDERAL PERKINS LOANS3 FEDERAL FAMILY EDUCATION LOAN PROGRAM4 FEDERAL PELL GRA NTS5 FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS6 KENTUCKY TUITION GRANTS7 KENT UCKY STATE STUDENT INCENTIVE GRANTS

Identifier	Return Reference	Explanation
COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR OTHER SERV	FORM 990, SCHEDULE A, PART II-B	AMOUNTS PAID TO THE FOLLOWING INDEPENDENT CONTRACTORS FOR OTHER SERVICES INCLUDE BOTH SERV ICES AND MATERIALS DAVID W POWELL, INC AND ALLIANCE CORPORATION

Identifier	Return Reference	Explanation
EXPLANATION OF RETURN AMENDMENT	FORM 990 - PAGE 1 LINE B AMENDED RETURN	THIS RETURN IS BEING AMENDED TO CORRECT OFFICER COMPENSATION AMOUNTS PREVIOUSLY OVERSTATED ON THE ORIGINALLY FILED RETURN

TY 2007 Investments - Other Schedule

Name: Berea College

EIN: 61-0444650

Description	Book Value	Cost/FMV
REAL ESTATE	4,556,400	F

TY 2007 Investments - Securities Schedule

Name: Berea College

EIN: 61-0444650

Description	Book Value	Cost/FMV
INVESTMENTS - SECURITIES	556,564,200	F
FOREIGN FIXED INCOME SECURITIES	454,800	F
SHORT-TERM NOTES & CASH EQUIVALENTS	61,118,100	F
STRUCTURED NOTES	69,621,600	F
PRIVATE EQUITY VENTURE CAPITAL OTHER	86,798,200	F
HEDGE FUNDS	133,908,800	F
FUNDS HELD IN TRUST BY OTHERS	23,684,800	F

TY 2007 Land etc. Schedule

Name: Berea College

EIN: 61-0444650

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
EDUCATIONAL PROPERTY PLANT & EQUIPMENT	169,216,980	45,026,618	124,190,362
STUDENT INDUSTRY PLANT & EQUIPMENT	7,991,527	4,387,746	3,603,781
RENTAL PROPERTY	2,551,773	1,185,916	1,365,857
FOREST AND FARMS	1,250,902		1,250,902
COLLECTIONS AND WORKS OF ART	4,063,531		4,063,531
CONSTRUCTION IN PROCESS	7,675,221		7,675,221

TY 2007 Other Assets Schedule

Name: Berea College

EIN: 61-0444650

Description	Beginning of Year Amount	End of Year Amount
ACCRUED INTEREST ON INVESTMENTS	1,998,983	2,337,135
BOND DEFEASANCE ESCROW	1,014,022	503,443

TY 2007 Other Changes in Net Assets Schedule

Name: Berea College

EIN: 61-0444650

Description	Amount
UNREALIZED GAINS(LOSSES)	-108,978,093
CHANGE IN ANNUITY PAYMENT LIABILITY OF ANNUITY CONTRACTS	1,812,248
CHANGE IN FUNDS HELD IN TRUST BY OTHERS	-1,818,500
ANNUITY PAYMENTS	-2,095,430
INTEREST RATE SWAPS	-2,013,900

TY 2007 Other Expenses Included Schedule

Name: Berea College

EIN: 61-0444650

Description	Amount
COST OF SALES NETTED AGAINST INCOME ON 990	1,572,038
RENTAL EXPENSES NETTED AGAINST INCOME ON 990	236,576

TY 2007 Other Expenses Not Included Schedule

Name: Berea College

EIN: 61-0444650

Description	Amount
STUDENT AID GRANTS NETTED AGAINST INCOME ON FINANCIAL STATEMENTS	3,026,137
INVESTMENT MANAGEMENT FEES NETTED AGAINST INCOME ON FINANCIAL STATEMENTS	2,418,187

TY 2007 Other Liabilities Schedule

Name: Berea College

EIN: 61-0444650

Description	Beginning of Year Amount	End of Year Amount
AGENCY FUNDS	396,190	418,251
REVOCABLE GIFT AGREEMENTS	173,400	103,400
CHARITABLE LEAD TRUST LIABILITY	409,800	397,600
FUTURE PAYMENT LIABILITIES ON ANNUITY CONTRACTS	13,055,600	12,966,400
WORKERS COMP - LONG TERM PORTION	247,700	316,500
LONG TERM PORTION OF ASSET RETIREMENT LIABILITY	618,161	549,231
457b plan	0	37,848
interest rate swap	0	618,600

TY 2007 Other Revenues Included Schedule

Name: Berea College

EIN: 61-0444650

Description	Amount
COST OF SALES NETTED AGAINST INCOME ON 990	1,572,038
RENTAL EXPENSES NETTED AGAINST INCOME ON 990	236,577
CURRENT YEARS ADJUSTMENT ON FUTURE ANNUITY PAYMENTS	1,812,248

TY 2007 Other Revenues Not Included Schedule

Name: Berea College

EIN: 61-0444650

Description	Amount
STUDENT AID GRANTS NETTED AGAINST INCOME ON FINANCIAL STATEMENTS	3,026,137
INVESTMENT MANAGEMENT FEES NETTED AGAINST INCOME ON FINANCIAL STATEMENTS	2,418,187
PAYMENTS TO ANNUITANTS	2,095,430
INTEREST RATE SWAPS	2,013,900
change in funds held by others	1,818,500

TY 2007 Tax-Exempt Bond Liabilities Schedule

Name: Berea College
EIN: 61-0444650

Item No.	1
Name of Issue	
Purpose	frost building restoration and renovation
Amount Outstanding	1860000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	2
Name of Issue	
Purpose	retire bonds for water filtration plant and other water utility improvements
Amount Outstanding	500000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	3
Name of Issue	
Purpose	residence hall and administrative building renovation
Amount Outstanding	5585000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	4
Name of Issue	
Purpose	residence hall renovation
Amount Outstanding	1850000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	5
Name of Issue	
Purpose	various capital projects
Amount Outstanding	15830000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	6
Name of Issue	
Purpose	various capital projects
Amount Outstanding	19150000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	7
Name of Issue	
Purpose	various capital projects
Amount Outstanding	9190000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	8
Name of Issue	
Purpose	central heat plant & various capital retrofits
Amount Outstanding	8335000
Unexpeded Bond Proceeds	
Third Party Use	Yes
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

TY 2007 Non Electing Public Charities Statement

Name: Berea College

EIN: 61-0444650

Statement: GENERAL LOBBYING OF US CONGRESS IN SUPPORT OF EDUCATION RELATED APPROPRIATION PROJECTS. WORK COLLEGES LOBBYING SERVICES PROVIDED BY WILLIAM A BLAKELY AND ASSOCIATES IN THE AMOUNT OF $24,952.

TY 2007 Scholarship Award Statement

Name: Berea College

EIN: 61-0444650

Statement: SEE STATEMENTS 36 & 37.

TY 2007 Self Dealing Statement

Name: Berea College

EIN: 61-0444650

Line Number	Explanation
2c	WILLIAM R. GRUVER, TRUSTEE IS A MEMBER OF THE HIRTLE CALLAGHAN & CO. ADVISORY BOARD. LESS THAN 5% INTEREST. NOT A MEMBER OF THE BEREA COLLEGE INVESTMENT COMMITTEE. ALL TRANSACTIONS WITH HIRTLE CALLAGHAN ARE CONDUCTED AT ARMS-LENGTH.SHAWN JOHNSON, TRUSTEE IS AN EMPLOYEE OF STATE STREET GLOBAL ADVISORS, AND ABSTAINS FROM ALL DECISIONS INVOLVING STATE STREET. ALL TRANSACTIONS WITH STATE STREET GLOBAL ADVISORS ARE CONDUCTED AT ARMS-LENGTH.