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

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07/01 , 2008, and ending 06/30 , 2009

B Check if applicable: Address change [ ] ; Name change [ ] ; Initial return [ ] ; Termination [ ] ; Amended return [X] ; Application pending [ ]

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

C Name of organization BENNINGTON COLLEGE CORPORATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) ONE COLLEGE DRIVE — Room/suite

City or town, state or country, and ZIP + 4 BENNINGTON, VT 05201

D Employer identification number 03-0179414

E Telephone number (802)440-4358

G Gross receipts $ 45,791,045.

F Name and address of principal officer WILLIAM MORGAN
ONE COLLEGE DRIVE BENNINGTON, VT 05201

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.BENNINGTON.EDU

H(c) Group exemption number ▶

K Type of organization [X] Corporation [ ] Trust [ ] Association [ ] Other ▶ — L Year of formation 1932 — M State of legal domicile VT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
BENNINGTON COLLEGE IS A LIBERAL ARTS EDUCATIONAL INSTITUTION LOCATED IN BENNINGTON, VERMONT. THE UNDERGRADUATE ENROLLMENT IS MORE THAN 660 STUDENTS.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of employees (Part V, line 2a)	5	1,083
6	Total number of volunteers (estimate if necessary)	6	23
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	443,880.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-13,070.

			Prior Year	Current Year
Revenue	8	Contribution and grants (Part VIII, line 1h)	25,599,218.	6,461,845.
	9	Program service revenue (Part VIII, line 2g)	28,041,214.	31,390,743.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,608,534.	368,803.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,032,329.	1,358,197.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	56,281,295.	39,579,588.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	9,213,494.	10,343,483.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	17,297,907.	17,611,489.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	18,610.	NONE
	b	Total fundraising expenses, Part IX, column (D), line 25) ▶ 1,311,454.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	11,286,950.	11,893,505.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	37,816,961.	39,848,477.
	19	Revenue less expenses. Subtract line 18 from line 12	18,464,334.	-268,889.
			Beginning of Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	81,146,602.	97,951,508.
	21	Total liabilities (Part X, line 26)	17,289,580.	37,256,282.
	22	Net assets or fund balances Subtract line 21 from line 20	63,857,022.	60,695,226.

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SCANNED JUL 30 2010

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date 6/28/10

▶ William P. Morgan Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Robert J Butler — Date 6-25-10 — Check if self-employed ▶ [ ] — Preparer's identifying number (see instructions) P00037953

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KPMG LLP
60 SOUTH STREET BOSTON, MA 02111

EIN ▶ 13-5565207

Phone no ▶ 617-988-1000

May the IRS discuss this return with the preparer shown above? (See instructions) [ ] Yes [ ] No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

BENNINGTON COLLEGE IS A LIBERAL ARTS EDUCATIONAL INSTITUTION LOCATED IN BENNINGTON, VERMONT. THE UNDERGRADUATE ENROLLMENT IS MORE THAN 660 STUDENTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes" describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ______) (Expenses $ 31,187,401. including grants of $ ______) (Revenue $ ______)

EDUCATION- BENNINGTON COLLEGE IS A LIBERAL ARTS INSTITUTION LOCATED IN BENNINGTON, VERMONT. THE UNDERGRADUATE ENROLLMENT IS MORE THAN 660 STUDENTS.

4b (Code ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

4c (Code ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ $ 31,187,401. *(Must equal Part IX, Line 25, column (B))*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	X	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S ?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? *If "Yes," complete Schedule F, Part I*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16	X	
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3) and 501(c)(4) 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		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2.*	36		X
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		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S. Information Returns Enter -0- if not applicable	1a	NONE		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	NONE		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1,083		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O.*		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	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				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter.				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Part VI Governance, Management, and Disclosure *(Sections A, B, and C request information about policies not required by the Internal Revenue Code.)*

Section A. Governing Body and Management

				Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions				
1a	Enter the number of voting members of the governing body	1a	24		
b	Enter the number of voting members that are independent	1b	24		
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		X
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following.				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9a	Does the organization have local chapters, branches, or affiliates?		9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990		10	X	
11	Is there any officer, director or 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*		11		X

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)	15b		X
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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶WILLIAM MORGAN ONE COLLEGE DRIVE BENNINGTON, VT 05201
802-440-4358

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

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

1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
SEE SCHEDULE J-2										

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total								775,446.	NONE	41,684.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 6

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
SEE STATEMENT 1		

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 5

Part VIII Statement of Revenue

03-0179414

Line	Description	(i) / Code / Sub-amount	(ii)	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts							
1a	Federated campaigns	1a					
b	Membership dues	1b					
c	Fundraising events	1c					
d	Related organizations	1d					
e	Government grants (contributions)	1e	318,625.				
f	All other contributions, gifts, grants, and similar amounts not included above	1f	6,143,220.				
g	Noncash contributions included in lines 1a-1f $						
h	**Total.** Add lines 1a-1f ▶			6,461,845.			
Program Service Revenue		Business Code					
2a	TUITION AND FEES	611710		25,202,145.	25,202,145.		
b	ROOM & BOARD	721310		6,188,598.	6,188,598.		
c							
d							
e							
f	All other program service revenue						
g	**Total.** Add lines 2a-2f ▶			31,390,743.			
Other Revenue							
3	Investment income (including dividends, interest, and other similar amounts) STMT 2 ▶			674,150.	674,150.		
4	Income from investment of tax-exempt bond proceeds ▶			NONE			
5	Royalties ▶			NONE			
		(i) Real	(ii) Personal				
6a	Gross Rents	625,384.	NONE				
b	Less: rental expenses	NONE	NONE				
c	Rental income or (loss)	625,384.	NONE				
d	Net rental income or (loss) ▶			625,384.		443,880.	181,504.
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	5,906,110.	NONE				
b	Less: cost or other basis and sales expenses	6,211,457.	NONE				
c	Gain or (loss)	-305,347.	NONE				
d	Net gain or (loss) ▶			-305,347.			-305,347.
8a	Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18	a	NONE				
b	Less: direct expenses	b	NONE				
c	Net income or (loss) from fundraising events ▶			NONE			
9a	Gross income from gaming activities See Part IV, line 19	a	NONE				
b	Less: direct expenses	b	NONE				
c	Net income or (loss) from gaming activities ▶			NONE			
10a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory ▶			NONE			
	Miscellaneous Revenue	Business Code					
11a	ARBITRATION SETTLEMENT	541100		155,000.			155,000.
b	STUDENT SNACK BAR	722210		226,469.			226,469
c	BOOKSTORE REVENUE	611710		288,018.			288,018.
d	All other revenue	561000		63,326.			63,326.
e	**Total.** Add lines 11a-11d ▶			732,813.			
12	**Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶			39,579,588.	32,064,893.	443,880.	608,970.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	NONE			
2 Grants and other assistance to individuals in the U S See Part IV, line 22	10,277,602.	10,277,602.		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	65,881.	65,881.		
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	688,089.	164,105.	487,109.	36,875.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	13,646,343.	9,884,529.	3,032,478.	729,336.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions)	600,170.	432,123.	132,037.	36,010.
9 Other employee benefits	1,649,827.	1,187,875.	402,963.	58,989.
10 Payroll taxes	1,027,060.	739,484.	245,953.	41,623.
11 Fees for services (non-employees)				
a Management	147,078.	17,555.	76,663.	52,860.
b Legal	70,638.		70,638.	
c Accounting	84,716.		84,716.	
d Lobbying	NONE			
e Professional fundraising services See Part IV, line 17	NONE			
f Investment management fees	NONE			
g Other	NONE			
12 Advertising and promotion	121,237.	84,447.	36,790.	
13 Office expenses	636,448.	456,797.	148,989.	30,662.
14 Information technology	543,308.	483,795.	37,983.	21,530.
15 Royalties	NONE			
16 Occupancy	2,111,651.	1,602,916.	508,735.	
17 Travel	337,972.	189,154.	86,693.	62,125.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	140,395.	91,173.	37,347.	11,875.
20 Interest	1,092,038.	425,895.	666,143.	
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	1,996,619.	1,611,724.	384,895.	
23 Insurance	594,575.	475,660.	118,915.	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a PURCHASED_SERVICES	2,365,347.	1,744,326.	578,928.	42,093.
b FOOD_AND_FUNCTIONS	1,034,362.	902,871.	72,855.	58,636.
c PROJECTS_AND_EVENTS	380,554.	213,866.	41,148.	125,540.
d BOOKS_AND_SUBSCRIPTIONS	111,381.	105,813.	4,748.	820.
e DUES_AND_SUBSCRIPTIONS	82,681.	28,112.	52,089.	2,480.
f All other expenses	42,505.	1,698.	40,807.	
25 **Total functional expenses.** Add lines 1 through 24f	39,848,477.	31,187,401.	7,349,622.	1,311,454.
26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	5,972,058.	2	26,373,516.
	3	Pledges and grants receivable, net	21,549,208.	3	17,221,309.
	4	Accounts receivable, net	662,006.	4	472,130.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sales or use	194,168.	8	226,436.
	9	Prepaid expenses and deferred charges	410,227.	9	841,593.
	10a	Land, buildings, and equipment cost basis . . . 10a 60,484,528.			
	b	Less accumulated depreciation Complete Part VI of Schedule D . . . 10b 25,675,800.	31,990,946.	10c	34,808,728.
	11	Investments - publicly traded securities STMT 3	12,478,688.	11	10,185,988.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	7,889,301.	15	7,821,808.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	81,146,602.	16	97,951,508.
Liabilities	17	Accounts payable and accrued expenses	4,641,230.	17	4,549,047.
	18	Grants payable		18	
	19	Deferred revenue	2,020,006.	19	2,033,902.
	20	Tax-exempt bond liabilities	10,142,344.	20	30,673,333.
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	486,000.	23	NONE
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	17,289,580.	26	37,256,282.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	22,318,271.	27	23,287,457.
	28	Temporarily restricted net assets	27,183,312.	28	23,462,656.
	29	Permanently restricted net assets	14,355,439.	29	13,945,113.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	63,857,022.	33	60,695,226.
	34	Total liabilities and net assets/fund balances	81,146,602.	34	97,951,508.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits?	3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

Part I **Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [X] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ______

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [ ] An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I **b** [ ] Type II **c** [ ] Type III - Functionally Integrated **d** [ ] Type III - Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box . . . . . . [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		X
(ii) A family member of a person described in (i) above?	11g(ii)		X
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		X

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

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Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						

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

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . 14 %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . 15 %

16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test - 2008.** 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 "fact-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test - 2007.** 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 IV how the organzation meets the "facts-and-circumstances"" test The organization qualifies as a publicly supported organization ▶ ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

14 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, check this box and stop here ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization ▶ ☐

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of certified historic structure

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ 597,990.

2 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a [ ] Public exhibition
b [ ] Scholarly research
c [X] Preservation for future generations
d [ ] Loan or exchange programs
e [ ] Other ______

4 Provide a description of the organization'scollections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather thanto be maintained as part of the organization's collection? . . . . . . [ ] Yes [X] No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? . . . [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,478,688.				
b Contributions	181,976.				
c Investment earnings or losses	-2,220,885.				
d Grants or scholarships					
e Other expenditures for facilities and programs	253,791.				
f Administrative expenses					
g End of year balance	10,185,988.				

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ ______ %

b Permanent endowment ▶ 100.0000 %

c Term endowment ▶ ______ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by.

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,555,100.		1,555,100.
b Buildings		45,607,900.	17,623,793.	27,984,107.
c Leasehold improvements				
d Equipment		9,910,016.	5,117,639.	4,792,377.
e Other		3,411,512.	2,934,367.	477,145.
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				34,808,729.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
BENEFICIAL INTEREST IN	
SPLIT-INTEREST AGREEMENT	6,061,406.
OTHER ASSETS	915,476.
INTEREST RATE SWAPS AT FMV	844,926.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15)* ▶	7,821,808.

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	39,579,588.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	39,848,477.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-268,889.
4	Net unrealized gains (losses) on investments	4	-2,232,460.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-660,447.
9	Total adjustments (net) Add lines 4-8	9	-2,892,907.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,161,796.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	36,686,681.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-2,232,460.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-660,447.		
e	Add lines **2a** through **2d**			2e	-2,892,907.
3	Subtract line **2e** from line **1**			3	39,579,588.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	39,579,588.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	39,848,477.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	39,848,477.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	39,848,477.

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.

SEE PAGE 5

Part XIV **Supplemental Information** *(continued)*

COLLECTIONS OF ART

PART III, LINE 4

BENNINGTON COLLEGE WAS THE FIRST COLLEGE IN THE NATION TO INCLUDE THE VISUAL AND PERFORMING ARTS AS AN EQUAL PARTNER IN THE LIBERAL ARTS CURRICULUM. BY THE MIDDLE OF THE 20TH CENTURY, BENNINGTON WAS ALREADY PLAYING A CENTRAL ROLE IN THE AMERICAN ART SCENE - SERVING AS A LOCUS FOR MANY MAJOR FIGURES IN THE ART WORLD. BECAUSE OF ITS REMARKABLE HISTORY, BENNINGTON COLLEGE HAS ACQUIRED A UNIQUE COLLECTION OF PAINTINGS, PHOTOGRAPHS, PRINTS AND SCULPTURES - A LARGE PORTION OF THE COLLECTION CONSISTING OF WORK MADE BY ITS RENOWN ALUMNI, FACULTY AND CAMPUS VISITORS. PRIMARILY A TEACHING COLLECTION, NEW WORK AND WORK FROM THE EXISTING COLLECTION ARE EVALUATED FOR THEIR RELEVANCE TO THE COLLECTION AS A WHOLE. SELECT WORK IS OCCASIONALLY LENT FOR NATIONAL EXHIBITIONS AND EXHIBITIONS IN THE REGION. MUCH OF THE COLLECTION IS PERMANENTLY ON DISPLAY THROUGHOUT THE CAMPUS AND IS EXHIBITED ROUTINELY THROUGH SPECIAL EXHIBITIONS IN THE COLLEGE'S USDAN GALLERY AND THE CROSSETT LIBRARY.

ENDOWMENT FUNDS

PART V, LINE 4

THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 64 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING BOTH DONOR RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE COLLEGE, IF ANY, TO FUNCTION AS ENDOWMENTS.

THE COLLEGE USES THE TOTAL RETURN CONCEPT, AND ITS SPENDING POLICY IS DESIGNED TO STABILIZE ANNUAL SPENDING LEVELS AND TO PRESERVE THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

Part XIV **Supplemental Information** *(continued)*

CHANGE IN NET ASSETS

PART XI, LINE 8

OTHER INCOME	(178,504)
CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS	844,926
CHANGE IN VALUE OF BENEFICIAL INTEREST	(1,326,869)
TOTAL	(660,447)

OTHER REVENUE INCLUDED ON FINANCIAL STATEMENTS BUT NOT ON RETURN

PART XII, LINE 2D

OTHER INCOME	(178,504)
CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS	844,926
CHANGE IN VALUE OF BENEFICIAL INTEREST	(1,326,869)
TOTAL	(660,447)

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to From 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
BENNINGTON COLLEGE CORPORATION	03-0179414

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3	X	
	BENNINGTON COLLEGE IS COMMITTED TO A POLICY OF NON-DISCRIMINATION AS DEFINED UNDER APPLICABLE STATE AND FEDERAL LAWS. ILLEGAL DISCRIMINATION WITH REGARD TO AGE, SEX, CREED, DISABILITY, NATIONAL ORIGIN, RACE, COLOR, SEXUAL ORIENTATION, GENDER IDENTITY, MARITAL STATUS, OR ANY OTHER LEGALLY PROTECTED CATEGORY IS PROHIBITED.			
4	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
6a	Does the organization receive any financial aid or assistance from a governmental agency? STMT 4	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement			
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," attach an explanation	7	X	

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
BENNINGTON COLLEGE CORPORATION	03-0179414

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(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 in region
EUROPE	NONE	NONE	PROGRAM SERVICES	STUDY ABROAD	65,881.
Totals . . . . ▶	NONE	NONE			65,881

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule F (Form 990) 2008**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . . ▶ ☐
Use Schedule F-1 (Form 990) if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							
[redacted]	[redacted]							

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) 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)
STUDY ABROAD	EUROPE/ICELAND/GREENLAND	14	65,881.	STUDENT ACCT			

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information

MONITOR THE USE OF GRANT FUNDS OUTSIDE OF THE U.S.

PART I, LINE 2

BENNINGTON MONITORS THE USE OF FUNDS THROUGH THE ANALYSIS OF TRANSCRIPTS, GRADES AND WRITTEN NARRATIVES BY BOTH FACULTY AND STUDENTS. PROGRESS IS MONITORED AND CREDITS ARE REVIEWED/ASSIGNED.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶ [ ]

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

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶

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

Schedule I (Form 990) 2008

JSA
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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FEDERAL GRANTS	119	616,557.		FMV	
BENNINGTON GRANT	382	7,619,034.		FMV	
BROCKWAY SCHOLARSHIP	180	2,042,011.		FMV	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

MONITOR THE USE OF GRANT FUNDS IN THE U.S.

PART 1, LINE 2

BENNINGTON MONITORS THE USE OF FUNDS THROUGH THE ANALYSIS OF TRANSCRIPTS,
GRADES AND WRITTEN NARRATIVES BY BOTH FACULTY AND STUDENTS. PROGRESS IS
MONITORED AND CREDITS ARE REVIEWED/ASSIGNED.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Travel for companions
- [ ] Tax indemnification and gross-up payments
- [ ] Discretionary spending account
- [X] Housing allowance or residence for personal use
- [ ] Payments for business use of personal residence
- [ ] Health or social club dues or initiation fees
- [ ] Personal services (e g , maid, chauffeur, chef)

			Yes	No
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- [ ] Compensation committee
- [ ] Independent compensation consultant
- [ ] Form 990 of other organizations
- [ ] Written employment contract
- [X] Compensation survey or study
- [X] Approval by the board or compensation committee

			Yes	No
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ELIZABETH COLEMAN	(i)	368,760.	NONE	NONE	NONE	14,700.	383,460.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
WILLIAM P MORGAN	(i)	155,224.	NONE	NONE	NONE	11,314.	166,538.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELISSA TENNY	(i)	164,105.	NONE	NONE	NONE	11,210.	175,315.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

SCHEDULE J, PART I

AS A SMALL, RESIDENTIAL UNDERGRADUATE COLLEGE, BENNINGTON'S PRESIDENT IS REQUIRED TO LIVE AT THE COLLEGE. IN ADDITION TO SERVING AS THE PRESIDENT'S RESIDENCE, THE PRESIDENT'S HOUSE IS USED FOR NUMEROUS PRESIDENTIAL-LED ACTIVITIES INCLUDING TRUSTEE, FACULTY, STAFF, STUDENT AND ALUMNI MEETINGS, RECEPTIONS AND EVENTS.

SCHEDULE J-2 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization: BENNINGTON COLLEGE CORPORATION

Employer Identification number: 03-0179414

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
PRISCILLA ALEXANDER TRUSTEE	1.	X						NONE	NONE	NONE
SUSAN PARIS BORDEN TRUSTEE	1.	X						NONE	NONE	NONE
JOHN BOYD TRUSTEE	1.	X						NONE	NONE	NONE
KAREN JOHNSON BOYD TRUSTEE	1.	X						NONE	NONE	NONE
BARBARA USHKOW DEANE TRUSTEE	1.	X						NONE	NONE	NONE
JANE DONALDSON TRUSTEE	1.	X						NONE	NONE	NONE
ALBERT F FREIHOFER TRUSTEE	1.	X						NONE	NONE	NONE
CAROLYN HEIMBURGER GANNON TRUSTEE	1.	X						NONE	NONE	NONE
MICHAEL HECHT TRUSTEE	1.	X						NONE	NONE	NONE
LORD RICHARD HOLME TRUSTEE	1.	X						NONE	NONE	NONE
JOHN J KENNEY TRUSTEE	1.	X						NONE	NONE	NONE
BOBBIE KNABLE TRUSTEE	1.	X						NONE	NONE	NONE
ALAN KORNBERG TRUSTEE	1.	X						NONE	NONE	NONE
SETH MASTERS TRUSTEE	1.	X						NONE	NONE	NONE
JACOB PERKINS TRUSTEE	1.	X						NONE	NONE	NONE
AARTI RANA TRUSTEE	1.	X						NONE	NONE	NONE
CAROLYN CROSSETT ROWLAND TRUSTEE	1.	X						NONE	NONE	NONE
ELIZABETH SCHULZ TRUSTEE	1.	X						NONE	NONE	NONE
JAMES SIMON TRUSTEE	1.	X						NONE	NONE	NONE
MARY HAMMOND STORER TRUSTEE	1.	X						NONE	NONE	NONE
RUTH SUDDUTH TRUSTEE	1.	X						NONE	NONE	NONE

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

SCHEDULE J-2 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization: BENNINGTON COLLEGE CORPORATION

Employer Identification number: 03-0179414

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DEBORAH WADSWORTH CHAIR	1.	X						NONE	NONE	NONE
JOHN WILCOX TRUSTEE	1.	X						NONE	NONE	NONE
PENELOPE PERKINS WILSON TRUSTEE	1.	X						NONE	NONE	NONE
JANET MARSDEN SECRETARY	40.			X				81,000.	NONE	NONE
ELIZABETH COLEMAN PRESIDENT	40.			X				368,760.	NONE	19,160.
WILLIAM P MORGAN EXEC VP & TREASURER	40.			X				155,224.	NONE	11,314.
REBECCA B STICKNEY SECRETARY	40.			X				6,357.	NONE	NONE
ELISSA TENNY PROVOST	35.				X			164,105.	NONE	11,210.

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

Schedule J-2 (Form 990) 2008

JSA 8E1294 1 000

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

Part I Bond Issues (Required for 2008)

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No
A	VEHBFA - 2006	14-4990280		11/03/2006	3,000,000.	BIOMASS BOILER		X		X
B	VEDA - 2008A	03-6024497		12/16/2008	10,000,000.	CAPA BUILDING		X		X
C	VEDA - 2008B	03-6024497		12/31/2008	10,000,000.	CAPA BUILDING		X		X
D	VEDA - 2009A	03-6024497		05/06/2009	8,150,000.	CAPA BUILDING		X		X
E										

Part II Proceeds (Optional for 2008)

	A	B	C	D	E
1 Total proceeds of issue					
2 Gross proceeds in reserve funds					
3 Proceeds in refunding or defeasance escrows					
4 Other unspent proceeds					
5 Issuance costs from proceeds					
6 Working capital expenditures from proceeds					
7 Capital expenditures from proceeds					
8 Year of substantial completion					

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9 Were the bonds issued as part of a current refunding issue?										
10 Were the bonds issued as part of an advance refunding issue?										
11 Has the final allocation of proceeds been made?										
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use (Optional for 2008)

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2 Are there any lease arrangements with respect to the financed property which may result in private business use?										

Part III Private Business Use *(Continued)*

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?										
b Are there any research agreements with respect to the financed property which may result in private business use?										
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		%		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

Part IV Arbitrage *(Optional for 2008)*

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?										
2 Is the bond issue a variable rate issue?										
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?										
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?										
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5 Were any gross proceeds invested beyond an available temporary period?										
6 Did the bond issue qualify for an exception to rebate?										

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
BENNINGTON COLLEGE CORPORATION	03-0179414

ORGANIZATION'S MISSION

PART III, LINE 1

THE MEN AND WOMEN WHO BROUGHT BENNINGTON COLLEGE INTO BEING SOUGHT TO CREATE A COLLEGE THAT WOULD EMPHASIZE "THE INDIVIDUAL STUDENT AND HER DEVELOPING INTERESTS," LEARNING "BY ACTIVITY AND LIVING," A COMMUNITY LIFE DESIGNED TO "BREAK DOWN ARTIFICIAL BARRIERS BETWEEN TEACHER AND STUDENT AND BETWEEN CURRICULUM AND EXTRACURRICULUM," AND "A CONSCIOUS ELASTICITY IN EDUCATIONAL PLANS."

THE PRINCIPLE OF LEARNING BY PRACTICE AND THE EMPHASIS ON THE INDIVIDUAL UNDERLIE EVERY MAJOR FEATURE OF A BENNINGTON EDUCATION: THE CLOSE WORKING RELATIONSHIP BETWEEN STUDENT AND TEACHER, THE INSISTENCE ON SELF-DETERMINATION, THE COMMITMENT TO LEARNING ACROSS THE DISCIPLINES, AND THE FIELD WORK TERM, WHICH GIVES STUDENTS WORK EXPERIENCE AND CONNECTS THEM TO THE GREATER COMMUNITY. THE PLAN PROCESS, THROUGH WHICH STUDENTS DESIGN THEIR ACADEMIC EXPERIENCES AND NAVIGATE THEIR BENNINGTON CAREERS, EMBODIES THE COLLEGE'S MISSION.

ALSO KEY TO BENNINGTON'S PHILOSOPHY IS THE CONVICTION THAT A COLLEGE EDUCATION SHOULD NOT MERELY PROVIDE PREPARATION FOR GRADUATE SCHOOL OR A CAREER, BUT SHOULD BE AN EXPERIENCE VALUABLE IN ITSELF AND THE MODEL FOR A LIFELONG HABIT OF LEARNING.

IN THE 1930S THE COLLEGE'S FIRST PRESIDENT, ROBERT DEVORE LEIGH, DEVELOPED A STATEMENT DESCRIBING BENNINGTON'S GUIDING IDEALS. THIS

Name of the organization: BENNINGTON COLLEGE CORPORATION

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STATEMENT-WHICH WAS READ AT THE FIRST COMMENCEMENT IN 1936 AND HAS BEEN PART OF EVERY COMMENCEMENT SINCE-CONTINUES TO EXPRESS THE COLLEGE'S MISSION AND PURPOSES.

COMMENCEMENT STATEMENT

BENNINGTON REGARDS EDUCATION AS A SENSUAL AND ETHICAL, NO LESS THAN AN INTELLECTUAL, PROCESS. IT SEEKS TO LIBERATE AND NURTURE THE INDIVIDUALITY, THE CREATIVE INTELLIGENCE, AND THE ETHICAL AND AESTHETIC SENSIBILITY OF ITS STUDENTS, TO THE END THAT THEIR RICHLY VARIED NATURAL ENDOWMENTS WILL BE DIRECTED TOWARD SELF-FULFILLMENT AND TOWARD CONSTRUCTIVE SOCIAL PURPOSES. WE BELIEVE THAT THESE EDUCATIONAL GOALS ARE BEST SERVED BY DEMANDING OF OUR STUDENTS' ACTIVE PARTICIPATION IN THE PLANNING OF THEIR OWN PROGRAMS, AND IN THE REGULATION OF THEIR OWN LIVES ON CAMPUS. STUDENT FREEDOM IS NOT THE ABSENCE OF RESTRAINT, HOWEVER; IT IS RATHER THE FULLEST POSSIBLE SUBSTITUTION OF HABITS OF SELF-RESTRAINT FOR RESTRAINT IMPOSED BY OTHERS. THE EXERCISE OF STUDENT FREEDOM IS THE VERY CONDITION OF A MEANINGFUL EDUCATION, AND AN ESSENTIAL ASPECT OF THE NURTURE OF FREE CITIZENS, DEDICATED TO CIVILIZED VALUES AND CAPABLE OF CREATIVE AND CONSTRUCTIVE MEMBERSHIP IN MODERN SOCIETY.

Name of the organization: BENNINGTON COLLEGE CORPORATION

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FORM 990 REVIEW PROCESS

PART VI, SECTION A, LINE 10

IN ORDER TO PREPARE OUR BOARD MEMBERS FOR THE NEW FORM 990 EACH BOARD MEMBER WAS GIVEN THE JUNE 30, 2008 FORM 990 TO REVIEW. THIS FORM WAS GIVEN TO EACH BOARD MEMBER ALONG WITH A HANDOUT DETAILING WHAT WOULD CHANGE FROM THE PRIOR YEAR TO THE NEW FORM 990. DETAILED EXPLANATIONS WERE GIVEN FOR ALL OF THE NEW DISCLOSURES AND THE FINANCE AND AUDIT COMMITTEE WAS KEPT ABREAST OF ALL CHANGES AS THEY RELATED TO THE NEW FORM.

IN EARLY MARCH EACH MEMBER OF THE FINANCE AND AUDIT COMMITTEE WAS FURNISHED WITH A COMPLETED FORM 990 TO REVIEW. THE CFO/TREASURER WAS AVAILABLE FOR ANY QUESTIONS.

AFTER REVIEW THE COMMITTEE WAS ASKED TO FORMALLY APPROVE THE FORM AND THE APPROVAL WAS NOTED IN THE MINUTES.

Name of the organization: BENNINGTON COLLEGE CORPORATION

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CONFLICT OF INTEREST POLICY

PART VI, SECTION B, LINE 12

1. TRUSTEES, OFFICERS AND KEY EMPLOYEES OF BENNINGTON COLLEGE SHALL AVOID PLACING THEMSELVES IN POSITIONS IN WHICH THERE MAY BE CONFLICT BETWEEN THEIR PERSONAL INTERESTS AND THEIR DUTIES TO BENNINGTON.

2. A CONFLICT OF INTEREST EXISTS WHEN THERE IS THE POTENTIAL THAT A TRUSTEE, OFFICER, OR KEY EMPLOYEE MAY OBTAIN A DIRECT OR INDIRECT PECUNIARY OR OTHER PERSONAL BENEFIT, OR ANY OTHER IMPROPER GAIN OR ADVANTAGE, AT THE EXPENSE OF THE INTERESTS OF THE COLLEGE, OR WHEN A TRUSTEE, OFFICER, OR KEY EMPLOYEE OF THE COLLEGE ACCEPTS A GIFT OR OTHER FAVOR UNDER CIRCUMSTANCES FROM WHICH IT MIGHT BE INFERRED THAT SUCH GIFTS WERE INTENDED TO INFLUENCE THE PERFORMANCE OF DUTIES FOR THE COLLEGE.

3. INDIVIDUALS COVERED BY THIS POLICY HAVE A DUTY TO VOLUNTARILY SELF-DISCLOSE TO THE CHAIR OF THE BOARD OF TRUSTEES (UNLESS THE DISCLOSURE IS BY THE CHAIR, IN WHICH EVENT IT SHALL BE MADE TO THE VICE CHAIR) ANY POTENTIAL CONFLICT OF INTEREST: (1) PRIOR TO ASSUMING THEIR RESPONSIBILITIES, AND (2) AT THE TIME ANY POTENTIAL CONFLICT ARISES. IN THE CASE OF DISCLOSURE BY A KEY EMPLOYEE UNRELATED TO THE PROCEEDINGS OF THE BOARD OF TRUSTEES, THE DISCLOSURE SHALL BE MADE TO THE PRESIDENT.

4. EACH PROPOSED TRANSACTION IN WHICH IS IT DISCLOSED OR OTHERWISE KNOWN TO THE BOARD OR TO MANAGEMENT THAT A TRUSTEE, OFFICER, OR KEY EMPLOYEE MAY HAVE A CONFLICT OF INTEREST SHALL BE SUBMITTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES FOR SUCH ACTION AS THE EXECUTIVE COMMITTEE MAY DETERMINE AND REPORTED TO THE BOARD OF TRUSTEES.

5. ANY INDIVIDUAL COVERED BY THIS POLICY SHALL NOT VOTE OR USE THAT INDIVIDUAL'S PERSONAL INFLUENCE ON ANY MATTER WITH RESPECT TO WHICH THE INDIVIDUAL BELIEVES HIM OR HERSELF TO HAVE A CONFLICT OF INTEREST, OR

Name of the organization: BENNINGTON COLLEGE CORPORATION

Employer identification number: 03-0179414

WITH RESPECT TO WHICH THE EXECUTIVE COMMITTEE HAS DETERMINED PURSUANT TO PARAGRAPH 4 THAT THE INDIVIDUAL HAS A CONFLICT OF INTEREST SUBJECT TO THIS POLICY.

6. ALL DISSENTING VOTES AND ABSTENTIONS FROM VOTING SHALL BE DULY NOTED IN THE MINUTES OF ALL MEETINGS OF THE BOARD AND ITS COMMITTEES

7. EACH TRUSTEE, OFFICER OR KEY EMPLOYEE SHALL SIGN A CONFLICT OF INTEREST STATEMENT IN ACCORDANCE WITH THE STATEMENT ATTACHED HERETO.

8. THE SECRETARY OF THE CORPORATION SHALL MAINTAIN A FILE OF INFORMATION DISCLOSED BY TRUSTEES, OFFICER AND KEY EMPLOYEES. SUCH FILE OF INFORMATION SHALL BE AMENDED ANNUALLY ON SUCH DATE AS THE BOARD OF TRUSTEES SHALL DETERMINE.

Name of the organization: BENNINGTON COLLEGE CORPORATION

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COMPENSATION POLICY

PART VI, SECTION B, LINE 15

THE CHAIR OF THE BOARD OF TRUSTEES MEETS ANNUALLY WITH SELECTED BOARD MEMBERS TO REVIEW THE COMPENSATION OF THE COLLEGE'S PRESIDENT. AFTER EVALUATING THE PRESIDENT'S PERFORMANCE AND REVIEWING DATA FROM OTHER PERTINENT INSTITUTIONS, THE COMMITTEE DETERMINES COMPENSATION FOR THE SUBSEQUENT FISCAL YEAR. THE CHAIR OF THE BOARD THEN INFORMS THE COLLEGE'S CFO IN WRITING OF THE BOARD'S DETERMINATION.

Name of the organization: BENNINGTON COLLEGE CORPORATION

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PUBLIC DISCLOSURE

PART VI, SECTION C, LINE 19

THE ORGANIZATION'S FORM 990, GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. THE FORM 990 IS ALSO POSTED ON WWW.GUIDESTAR.ORG.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ See separate instructions.

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Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity

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

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations? Yes	(H) No	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes	(J) No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
BENNINGTON COLLEGE REST. & CATERERS, LTD 03-0287721 ONE COLLEGE DRIVE BENNINGTON, VT 05201	DINING SERVICES	VT	N/A	C	100.	100.	100.0000
			N/A				
			N/A				
			N/A				

JSA
8E1308 1 000

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV

		Line	Yes	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 II–IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b		X
c	Gift, grant, or capital contribution from other organization(s)	1c		X
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o		X
p	Reimbursement paid by other organization for expenses	1p		X
q	Other transfer of cash or property to other organization(s)	1q	X	
r	Other transfer of cash or property from other organization(s)	1r		X

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

	(A) Name of other organization(s)	(B) Transaction type (a–r)	(C) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership**

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

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproportionate allocations?		(G) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
TOD WILLIAMS BILLIE TSIEN ARCHITECTS 222 CENTRAL PARK SOUTH NEW YORK, NY 10019	ARCHITECT	984,920.
VERSATILE COMMUNICATIONS 400 DONALD LYNCH BOULEVARD MARLBORO, MA 01752	NETWORK PROVIDER	237,231.
CENTERLINE ARCHITECTS 302 MAIN STREET BENNINGTON, VT 05201	ARCHITECT	228,548.
REED HILDEBRAND ASSOCIATES INC 741 MOUNT AUBURN STREET WATERTOWN, MA 02472	ARCHITECT	173,080.
LANGROCK, SPERRY & WOOL, LLP 210 COLLEGE STREET BURLINGTON, VT 05401-8376	LAW FIRM	152,665.
TOTAL COMPENSATION		1,776,444.

STATEMENT 1

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
DIVIDENDS & INTEREST	565,923.	565,923.		
OTHER FINANCIAL INCOME	108,227.	108,227.		
TOTALS	674,150.	674,150.		

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
MONEY MARKET MUTUAL FUNDS	1,368,570.	632,320.
FIXED INCOME FUNDS	2,899,919.	2,652,077.
EQUITY MUTUAL FUNDS	7,112,736.	5,829,084.
PREFERRED EQUITY	48,235.	48,235.
ALTERNATIVE INVESTMENT	1,049,228.	1,024,272.
TOTALS	12,478,688.	10,185,988.

STATEMENT 3

SCHEDULE E - EXPLANATION FOR LINE 6A

BENNINGTON COLLEGE STUDENTS RECEIVE SEOG, PELL, AC AND SMART GRANTS ALONG WITH FEDERAL WORK STUDY MONEY.